

* Video "Wide Awake" – Alan Berliner

Insomnia Disorder

- * Dissatisfaction with sleep
 - * Difficulty initiating or maintaining sleep
- * Daytime impairment
- * At least 3 nights per week
- * At least 3 months
- * Despite adequate opportunity to sleep

British Medical Journal, Volume II for 1877, July 14 1877, P47. Queen's Hospital, Birmingham - Dr Sawyer Insomnia

Ordinary cases of insomnia can be divided into three classes: Senile, toxic and psychical. In the senile form of the affection, the disorder depends on degeneration of the cerebral arteries, and is difficult to cure; in the toxic abuse of alcohol, tea or tobacco, and ceases upon the removal of the cause; in the psychical it arises from continued and excessive mental strain, grief, anxiety, worry, etc and is usually successfully treated by full doses of bromides conjoined with tinctures of ergot and cod liver oil. If the insomnia be serious, it must be stopped at once by hypnotics, preferably by opium.

Case example

- * 44 yo woman,
- * Initial insomnia +multiple night awakenings x 4 years
- * Decr. energy, work performance
- * BT 9 pm, SOL 4 hrs, 4-5 awak.up to 1 hr,
- * wake 6:30 am, exhausted
- * Zopiclone 7.5 mg with partial response and worry about tolerance, Citalopram 30 mg
- * Constant worry, tension in neck and back
- * Panic attacks in past

Insomnia and PSG

Parameter	PI	GS
SOL (min)	20.0 (17.1)	14.2 (11.3) *
TST (min)	391.1 (53.4)	414.8 (46.3) *
WASO (min)	58.5 (43.1)	36.8 (25.5) *
S1 (%)	7.0 (3.4)	6.8 (2.8)
S2 (%)	53.8 (8.1)	54.4 (6.8)
SWS (%)	10.9 (7.4)	12.8 (6.7) *
REM (%)	20.3 (5.1)	22.3 (4.8) *

Baglioni C., Sleep Med Rev 2014

Sleep misperception

- * Tang & Harvey, Beh Sleep Med 2005
- * Van den Berg et al., J Sleep Res 2008
- * Wicklow & Espie, Beh Res&Ther 2000

PTSD

- * Dagan et al., J Psychosom Res 1997
- * Klein et al., J Sleep Res 2003

Bipolar disorder

* Harvey et al. Am J Psychiatry 2005

Unipolar depression

* Rotenberg et al., Int J Psychophys 2000

Alcoholism recovery

* Currie et al., Behav Sleep Med 2004

Chronic fatigue

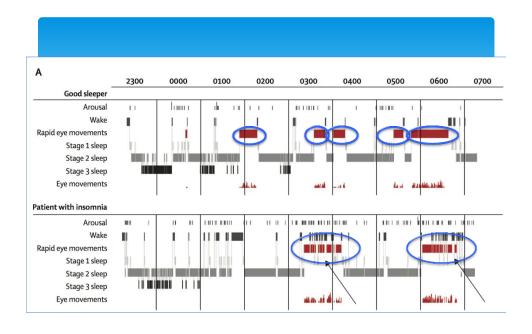
* Neu et al., Neuropsychobiology 2007

Rheumatoid arthritis

* Hirsch et al., Arthritis and Rheumatism 1994

Implications





Sleep in insomnia

- * Changes in microstructure
 - *

 microarousals
 - ★ fast EEG frequencies

Insomnia and REM sleep

- Perception of wakefulness
- * No difference in positive emotions
- * Higher frequency of negative emotions

Riemann D., 2015

Insomnia and dream content

- * More negative content
- Less activity (action)

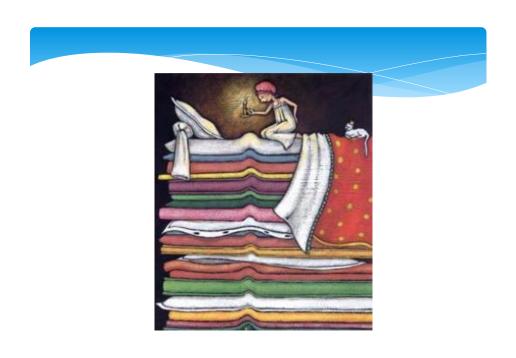
Bastien C., 2016

Insomnia and arousal

- * Temperature
- * Resting metabolic rate
- * Cortisol
- * Sympathetic tone

REM and emotions Fragmented REM Slower distress downregulation Hyperarousal

Wassing, PNAS 2016





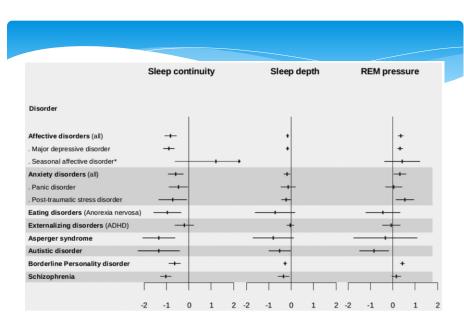
CBT-I Meta-analysis

Table 2Main post-test effects of insomnia treatments.

Outcome	N_c	Hedges g (95% CI)	I ² (95% CI)	NNT
Insomnia severity index	38	0.98 (0.82-1.15)	74 (63-80)	1.95
Without seven outliers ^a	31	0.92 (0.79-1.06)	51 (19-67)	2.07
Sleep efficiency (SE)	79	0.71 (0.61-0.82)	70 (61-75)	2.60
Without 14 outliersb	65	0.68 (0.60-0.74)	34 (5-51)	2.70
Pittsburgh sleep quality index ^c	19	0.65 (0.51-0.79)	39 (0-64)	2.82
Wake after sleep onset (WASO)	71	0.63 (0.53-0.73)	60 (46–68)	2.91
Without nine outliersd	62	0.66 (0.57-0.74)	40 (14-55)	2.78
Sleep onset latency (SOL)	108	0.57 (0.50-0.65)	48 (33-58)	3.18
Without nine outlierse	99	0.55 (0.48-0.61)	27 (3-43)	3.31
Sleep quality (SQ)	40	0.40 (0.24-0.56)	74 (64-80)	4.50
Without six outliersf	34	0.45 (0.31-0.59)	49 (17-65)	4.00
Number of awakenings (NWAK)	36	0.28 (0.16-0.40)	29 (0-52)	6.41
Without nine outliersg	34	0.28 (0.17-0.38)	11 (0-42)	6.41
Total sleep time (TST)	91	0.16 (0.08-0.24)	47 (30-58)	11.11
Without nine outliersh	82	0.17 (0.11-0.24)	14 (0-35)	10.42

95% CI = 95% confidence interval; $N_{c}=\mbox{number}$ of comparisons; NNT = number needed to treat.

VanStraten, Sleep Med Rev2017



Baglioni C., 2016

SleepWellNS

http://sleepwellns.ca/

Video – Eus Van Someren

"For some must watch, while some must sleep: So runs the world away."

W. Shakespeare Hamlet, act 3, scene 2