

Sleep & Wellbeing: evidence-based longterm sleep help

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When we can trust our sleep:

- Less vulnerability to anxiety & depression
- Better mental health
- Better physical health & wellbeing
- Better immune function
- Better functioning:
 - relationships, work safety & productivity
 - reduced accident rate

We humans don't like uncertainty about sleep

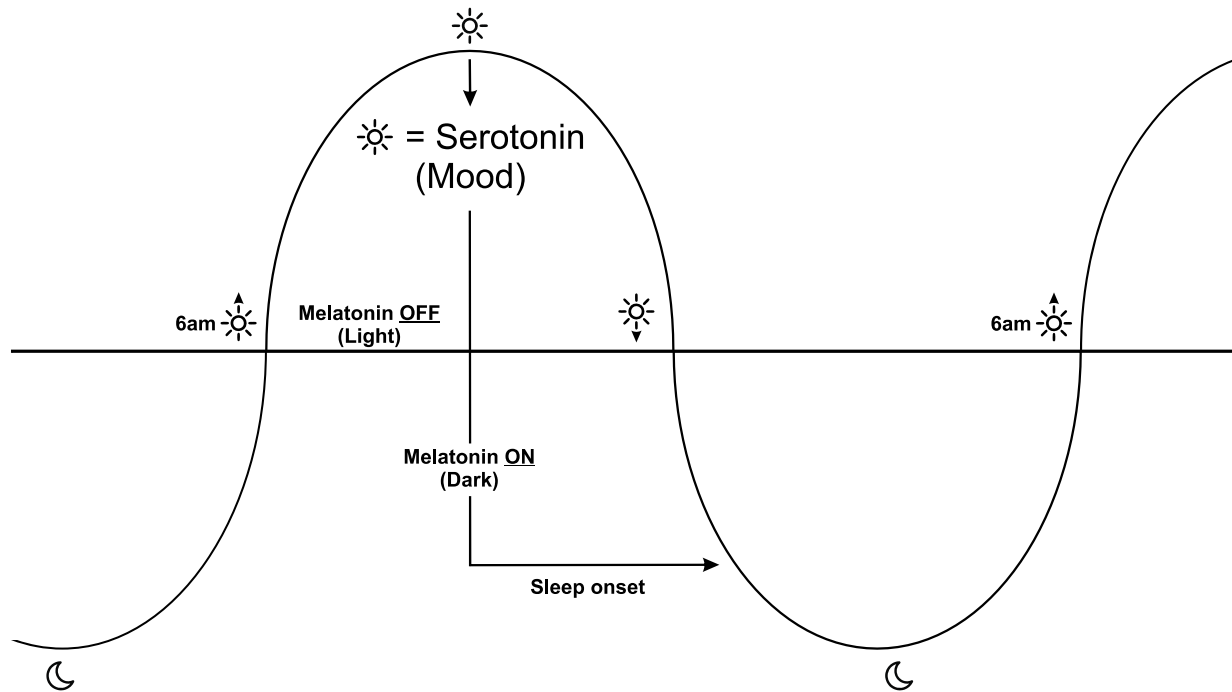
- Good problem solvers: control for certainty!
- Sleep is uncertain
- We look for fast fix, make it a habit
- Unhelpful behaviours OK short term,
- But sleep-distrust longterm

The 7 core habits that work

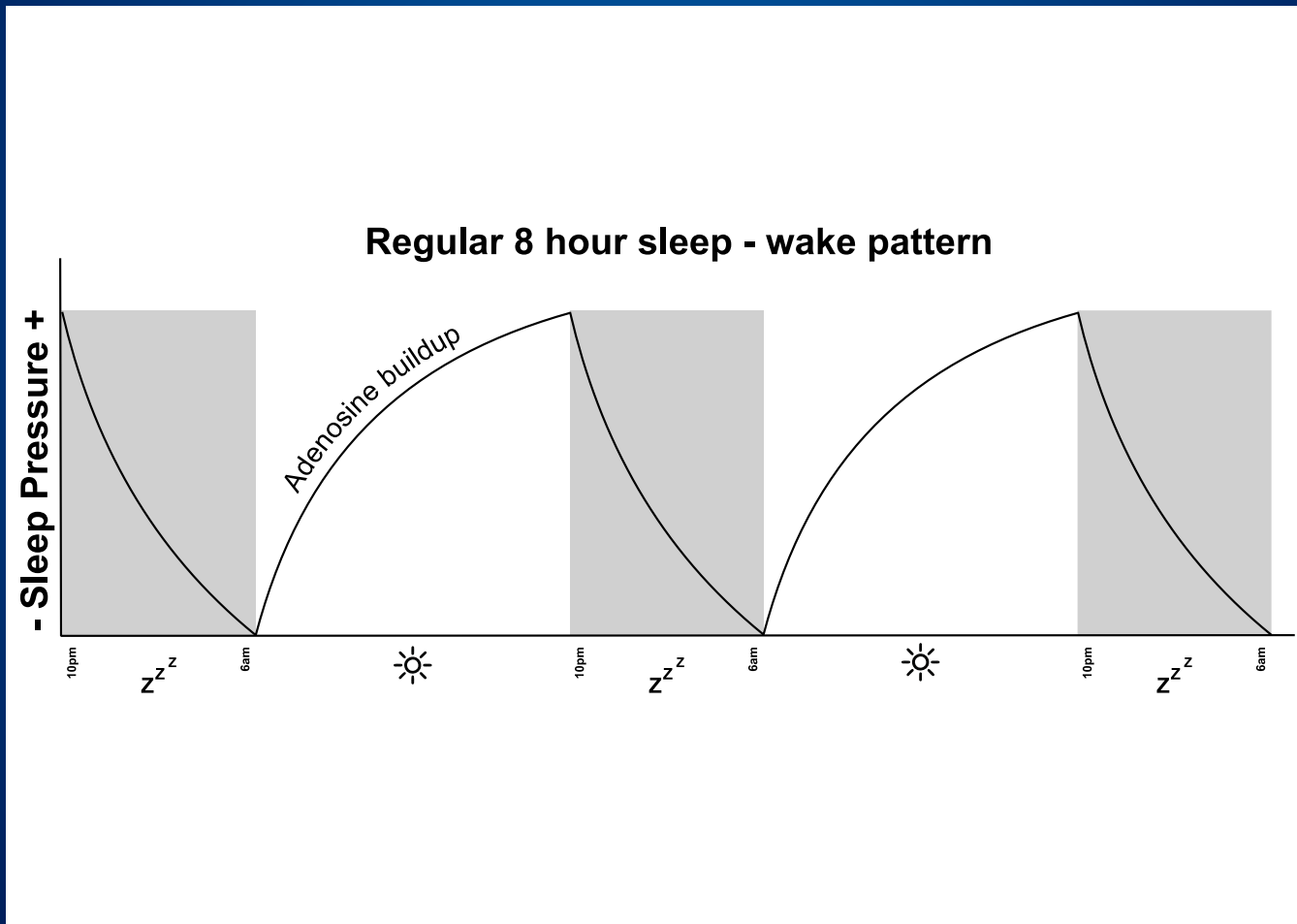
- Same waking/rising time daily
- Early morning sunlight + exercise
- No naps during the day or <30min nap (build 14-16hr sleep pressure over day)
- Bedtime routine (cool, quiet, dark)
- Go to bed only when sleepy (devices after 9?)
- Get out of bed if frustrated/anxious/>20min
- Keep expectations realistic



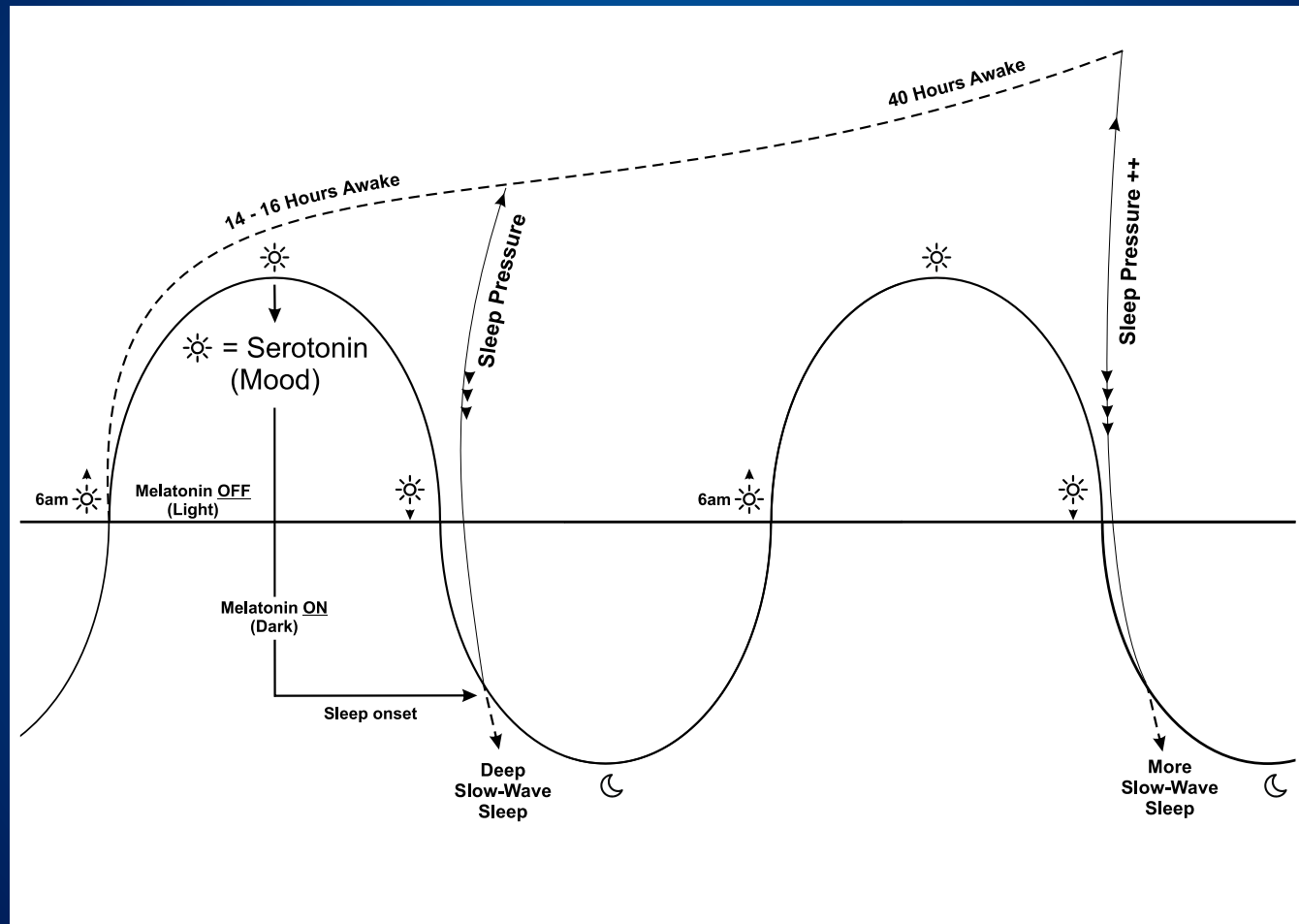
Core: morning sunlight resets our clock & mood



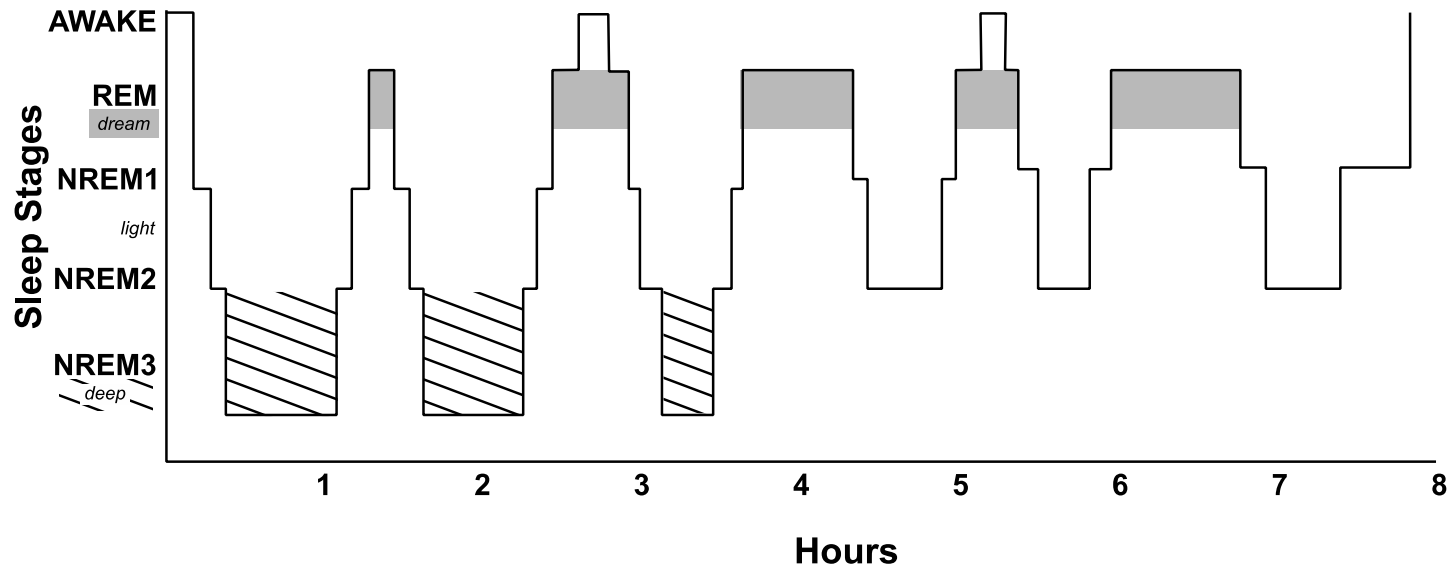
Sleep (homeostatic) “Pressure” builds up during waking hours:



2 processes working together



Our Sleep stages



Expectations: Average shoe size: 8

(Colin Espie, Glasgow Uni)



Thanks! See www.letsleephappen.com.au

LetSleepHappen Workbook Series: UNLEARNING INSOMNIA & SLEEP MEDICATION DEPENDENCE

Insomnia is a common problem with great cost to both individual wellbeing and to society. Despite spending enough time in bed to get needed sleep, many people have difficulties with getting to sleep, staying asleep, and early morning waking. This causes great distress and impairment, and understandably leads many to prescription sleep medication use. Often people start to rely on sleep medications daily, and can experience a range of side effects: next-morning sedation, withdrawal symptoms, increased tolerance to the medication and increased dose as effectiveness reduces over time. Meanwhile daytime tiredness, low energy, frustration and dread about bedtime continue.

The Royal Australian College of General Practitioners, the American College of Physicians, and The European Sleep Research Society all recommend Cognitive Behaviour Therapy as first-line treatment for insomnia.

The aim of the LetSleepHappen workbook series is to promote CBT and acceptance principles for insomnia and circadian sleep-wake problems. This InsomniaCBT program instills good sleep habits and flexible expectations, to build trust and confidence in sleep, improve mood, and make it easier to then gradually reduce reliance on sleep medications.

ROSEMARY CLANCY is an Australian Clinical Psychologist specializing in Insomnia and Sleep-wake Disorders and psychological treatment of sleep medication dependence. She is an Australasian Sleep Association member and Australian Psychological Society Clinical College Fellow. She writes on InsomniaCBT at www.letsleephappen.com.au

The LetSleepHappen Workbook Series:

- Understanding Insomnia: Acceptance & Change
- Unlearning Insomnia & Sleep Medication Dependence



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the struggle is over

Unlearning Insomnia & Sleep Medication Dependence

Rosemary Clancy