



Sleep Problems Update

Number 5

Case Study: Insomnia Complicated by a Circadian Clock Problem

Patient: J.S., a 48 y/o male in good health.

Problem: For the last six years J.S. reported averaging only 2½ hours of sleep per night. Mainly he was not able to return to sleep easily after he woke up, but he often also had trouble falling asleep. Some nights he never slept at all. In an effort to get some additional rest, the time that he got out of bed in the morning varied greatly from one day to the next. His sleep log showed that he tended to sleep better if he went to bed after midnight, rather than before. He told me that he had no regular relaxing bedtime routine; rather he did things such as emailing. During the day he felt tired, had trouble concentrating, and was an emotional roller coaster. He said he was getting desperate and wondered if he would ever sleep well again.

Before the onset of his insomnia, he had a night job for about a year, but was not able to sleep well during the day. He had tried multiple prescription drugs (including antidepressants) and herbals that sometimes helped his sleeping - but for only a few weeks.

Diagnosis: Psychophysiological Insomnia (307.42) with elements of Circadian Rhythm Sleep Disorder, Delayed Sleep Phase Type (327.31).

Treatment: I began by helping J.S. improve his sleep hygiene, especially keeping a more regular sleep

schedule and establishing a consistent, relaxing bedtime routine. I also introduced him to a relaxation technique that helped him to

prepare his body for sleep. A few weeks later, I had him both regularize and restrict his time in bed to improve his sleep efficiency. At the same time, I had him be in dim light before and bright light after his sleep period to nudge his circadian sleep phase earlier. This helped, but soon I had to switch him to dim light in morning because he was waking too early. Cognitive Restructuring also helped him to improve his thoughts and attitude about his sleep.

Outcome: J.S. reports that it is now easier for him to get to sleep and to return to sleep. As a result, he is now regularly getting 4-5 hours of sleep per night, which appears to be close to his sleep need. Importantly, he is feeling much better during the day with better alertness and mood. (Please turn over.)

Did You Know?

There are three things that people with insomnia often do that make their insomnia worse:

- *In an effort to recover lost sleep, they develop bad habits such as sleeping in on weekends. This disrupts their circadian sleep clock and reduces their sleep drive the following night. The result is more insomnia.*
- *They dwell on thoughts about their lack of ability to sleep and the negative consequences that will follow. The result is anxiety associated with sleep that reduces their ability to get to sleep or return to sleep.*
- *Many also do things that they do not realize are causing them problems, such as reading in bed or watching television in bed. Subconsciously they become confused about whether they should be asleep or awake when in bed.*

Dr. Moorcroft of Northern Colorado Sleep Consultants welcomes referrals for cognitive-behavioral treatment insomnia and children's sleep problems. Offices in Fort Collins, Loveland, Greeley, and Denver.

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