

# Regular Sleep Treats Depression



In November 2013 the *New York Times* announced that the most important advance in the treatment of depression since the release of prozac in 1987 had just been discovered: sleep.

Psychologists have known for years that a simple but counter-intuitive method can improve sleep. Studies have even found this method works better than sleep medication. What is new is the discovery that this method can double the rate of recovery from depression.

In some ways, this isn't too surprising, for depression disrupts the biology of sleep as much as it does the biology of mood.

The actual therapy took place over 4 hour-long sessions. During those sessions people learned how to apply a few sleep-rules to their lives. Below are the rules as quoted in the therapy guide-book:

**“Rule 1:** First it is important that you choose a standard wake-up time and stick to it every day regardless of how much sleep you actually get on any given night. This practice will help you develop a more stable sleep pattern. Changes in your sleep-wake schedule can disturb your sleep. In fact, you can create the type of sleep problem that occurs in jetlag by varying your wake-up time from day to day. If you stick to a standard wake-up time, you will soon notice that you usually will become sleepy at about the right time each evening to allow you to get the sleep you need.

**Rule 2:** While in bed, you should avoid doing things that you do when you are awake. Do not read, watch T.V., eat, study, use the phone, or do other things that require you to be awake while you are in bed. If you frequently use your bed for activities other than sleep, you are unintentionally training yourself to stay awake in bed. If you avoid these activities while in bed, your bed will eventually become a place where it is easy to go to sleep and stay asleep. Sexual activity is the only exception to this rule.

**Rule 3:** Never stay in bed, either at the beginning of the night or during the middle of the night, for extended periods without being asleep. Long periods of being awake in bed usually lead to tossing and turning, becoming frustrated, or

worrying about not sleeping. These reactions, in turn, make it more difficult to fall asleep. Also, if you lie in bed awake for long periods, you are training yourself to be awake in bed. When sleep does not come on or return quickly, it is best to get up, go to another room, and only return to bed when you feel sleepy enough to fall asleep quickly. Generally speaking, you should get up if you find yourself awake for 20 minutes or so and you do not feel as though you are about to go to sleep.

**Rule 4:** Do not worry, mull over your problems, plan future events, or do other thinking while in bed. These activities are bad mental habits. If your mind seems to be racing or you can't seem to shut off your thoughts, get up and go to another room until you can return to bed without this thinking interrupting your sleep. If this disruptive thinking occurs frequently, you may find it helpful to routinely set aside a time early each evening to do the thinking, problem-solving, and planning you need to do. If you start this practice you probably will have fewer intrusive thoughts while you are in bed.

**Rule 5:** You should avoid all daytime napping. Sleeping during the day partially satisfies your sleep needs and, thus, will weaken your sleep drive at night.

**Rule 6:** In general, you should go to bed when you feel sleepy. However, you should not go to bed so early that you find yourself spending far more time in bed each night than you need for sleep. Spending too much time in bed results in a very broken night's sleep. If you spend too much time in bed, you may actually make your sleep problem worse. We will help you to decide the amount of time to spend in bed and what times you should go to bed at night and get out of bed in the morning."

That's a great list to get you started. I've added a few more ideas below:

**Chemicals:** Avoid caffeine (chocolate has lots of caffeine), nicotine, sodas, and alcohol, especially at night. Although alcohol can make you fall asleep, it disturbs sleep-waves so that the sleep is

not restorative. Also, continued use can cause insomnia.

**Light:** Avoid bright lights and noise/activity in the evening, but use light in the morning. Light from the TV and computer (called "blue light") is especially bad at tricking our minds into thinking it is morning; learn how to reduce blue light at: [www.moodtreatmentcenter.com/bluelight.pdf](http://www.moodtreatmentcenter.com/bluelight.pdf) Morning light can help your internal clock, and the best method for this is sunlight or a dawn simulator; learn more at: [www.moodtreatmentcenter.com/dawnsimulator.pdf](http://www.moodtreatmentcenter.com/dawnsimulator.pdf) Sleeping in darkness is important, as even a brief flash of light can disrupt melatonin, a hormone involved in sleep.

**Exercise:** Avoid exercise at night, but do exercise in the afternoon (this can improve sleep).

**Temperature:** A drop in temperature triggers your body to sleep. Sleep specialists recommend a hot bath (as hot as you can touch, and not shower) before bed, and then sleeping in a colder room (60-65 degrees).

**Prepare for sleep:** Develop an evening routine in the 30-60 minutes before sleep. Relaxation in this time will deepen your sleep, while stimulating activity or problem-solving will lighten it (e.g. try [moodtreatmentcenter.com/mindfulness.htm](http://moodtreatmentcenter.com/mindfulness.htm))

The second part of the therapy, called *CBT-Insomnia*, involves a behavioral method of adjusting the time you allow yourself to stay in bed depending on how well you sleep. If you are motivated, there are several self-guided versions of this therapy:

- 1) Paper and pencil version: [moodtreatmentcenter.com/cbtinsomnia.pdf](http://moodtreatmentcenter.com/cbtinsomnia.pdf)
- 2) Free app: "CBT-i Coach"
- 3) Interactive, online videos: [www.myshuti.com](http://www.myshuti.com) (discount code: MOODCTR-NC).

—Updated 11/25/16 by Chris Aiken, MD

(Therapy rules extracted from *Treatment Manual for CBT-Insomnia* by Jack Edinger, PhD)