

INSOMNIA MANAGEMENT KIT

Stimulus Control Therapy

The Insomnia Management Kit is intended to be used in conjunction with your GP. To access further instructions on the use of this fact sheet and other components of the Insomnia Management Kit, go to 'Insomnia management' on the SA Health website: www.sahealth.sa.gov.au.

Sleep problems can result from stressful or disturbing life events such as serious illness, hospitalisation, divorce, death or exams. Once the situation or issues surrounding the event has been resolved sleep usually returns to normal.

Sometimes however, although the original cause of the sleep problem has disappeared the insomnia can remain.

Conditioned insomnia

Being unable to sleep may be because an association has developed between going to bed and not sleeping. The bed, bedroom, turning the lights out and attempting to go to sleep has become the stimulus that triggers negative emotions such as frustration and worry that will increase wakefulness and delay sleep.

The process of going to bed has developed into an automatic trigger for negative emotions. This is conditioned insomnia. Many insomniacs report feeling very tired before bed but then becoming alert when they go to bed. This is a sign that conditioned insomnia is present.

Can these responses be changed?

YES! The conditioned insomnia has been learned by frequent association. It can be unlearned and replaced by new responses. This will make the bed and bedroom become a positive trigger for sleep, ensuring that when you go to bed sleepy, or wake up during the night you can expect to fall asleep more easily.

This is what you do....

Stimulus Control Therapy

The objective is to train the insomnia patient with a set of instructions.

- > Go to bed only when sleepy
- > Get out of bed when unable to sleep
- > Use the bed/bedroom for sleep only
- > Wake up the same time every morning
- > No napping during the day.

Step 1

Keep your bedroom only for sleep or sexual intimacy. Do not use it for activities such as watching TV, eating, smoking, working, playing computer games, talking on your mobile phone, Sudoku, or talking.

Step 2

Wake up and get out of bed at the same time each morning and try to get into the sun or other bright light. This includes weekends even when you may stay up later at night than usual. Choose a consistent wake up time that suits your usual circumstances and stick to it.

Step 3

Go to bed at night **only when you feel sleepy**, not because you may feel fatigued or exhausted or because of a standard routine. Going to bed **before** you are sleepy or drowsy is likely to result in a long period of wakefulness in bed.

Step 4

If after going to bed and turning out the light, you do not fall asleep in a reasonably short period of time (approx **15 minutes**) get out of bed, go to another room and do something relaxing.

When you feel sleepy again, go back to bed and give yourself another chance to fall asleep. You should **not try hard** to fall asleep, as this will only raise your alertness and prevent sleep. Just relax, let sleep come.

Step 5

If again you do not fall asleep within about a quarter hour, repeat Step 4. Continue this procedure until you fall asleep quickly.

Step 6

Do not nap during the day even after a night of little sleep.

Step 7

Follow the program strictly for several weeks to establish a regular and organised pattern.

What will happen?

At first, it will probably take several times out of bed before you fall asleep quickly. If it is winter and cold in other rooms, have a robe ready to wear and keep one room warm in the expectation that you will need to get up in the first week or two. You will probably get less sleep than usual in the first few weeks. This will result in a build-up of sleepiness and help you to fall asleep more quickly after a few nights to a week. For a while you will experience more sleepiness than you do now.

The more experiences you have of falling asleep quickly after turning out the lights, the stronger the influence your bed and bedroom will have to trigger sleep rather than wakefulness. Gradually, over several days or weeks, you will fall asleep on fewer attempts. You will also notice that you get sleepy earlier in the night and will gradually gain more sleep and feel more refreshed.

The length of treatment required before positive results will depend on how long you have experienced your sleep problem. However, if you follow the instructions for the stimulus control technique it will work and its effects will be long-term.

Once your sleep pattern has improved and your bed and sleep routine has returned, you should not stop using this therapy. If you want to have an occasional sleep-in remember this may delay your falling asleep that night. Remember it is important not to have long periods awake in bed especially if you start to feel worried or frustrated.

It may also be beneficial to consider the promotion of good sleep habits (see Sleep: Facts and hygiene). These minor lifestyle changes can be included into your day, night and bedtime routine and can help you develop a good ongoing sleep pattern.

For more information

Refer to 'Insomnia management' and 'Sleep problems' on the SA Health website: www.sahealth.sa.gov.au.

Non-Pharmacological Management of Insomnia. U. Vyas. British Journal of Medical Practitioners 2013; 6(3)a623.

Professor Leon C Lack and Dr Helen Wright, School of Psychology, Flinders University assisted with the information in this resource.

Drug and Alcohol Services South Australia

75 Magill Road, Stepney SA 5069

Phone: (08) 7425 5000

www.sahealth.sa.gov.au/dassa

© Department for Health and Ageing, Government of South Australia.
September 2017. DASSA:00142



www.ausgoal.gov.au/creative-commons

