

Sleep Health Tips

Transcript

Host: When you're tossing and turning and your mind is spinning, what's the best way to get to sleep? I'm Marianne Jacobbi. Welcome to this LifeWorks podcast. Our guest is Dr. Colleen Carney, a leading expert on insomnia. She's an Associate Professor and Director of the Sleep and Depression Laboratory at Ryerson University in Toronto, and the co-author of *Goodnight Mind: Turn Off Your Noisy Thoughts and Get a Good Night's Sleep*. She's joining us from Toronto. Dr. Carney, thank you for being here.

Colleen Carney: Thanks for having me.

Host: How many people suffer from insomnia and other sleep problems?

Colleen Carney: I mean if we're going to talk about insomnia only, which is a difficulty falling asleep or staying asleep, we're probably looking at about 10 percent of the population. But when we think about insomnia a little bit more loosely, the estimates go up to about 30 percent. And if we think about people who are sort of middle aged and older, then those rates jump up even higher.

Host: Instead of prescribing drugs, you treat insomnia with cognitive behavioral therapy, or CBT. You teach people how to change their sleep habits. How does it work?

Colleen Carney: CBT is a sort of a general system that was developed out of research, and you can have CBT for a variety of different problems, including depression or anxiety or whatever and so for insomnia, there are three main causes for chronic insomnia that show up again and again and again in the research, and you can have one, two, or all three. One is a circadian issue, which is the body clock. A problem with the homeostat, which is really a system that naturally compensates for sleep loss, but it also reduces sleep when you're not very active, right, so this is a deep sleep driving problem. And then the third problem that we see in chronic insomnia is an arousal problem, that sort of racing mind that you have or tension, or what's most common in insomnia that your bed has become this signal to your body for alertness because it's been paired with wakefulness over and over again.

Host: How do I go about adopting healthier sleep habits?

Colleen Carney: I always say that if you want to sleep like a baby, you have to act like one. So one of the things you have to do is you have to keep a routine. And the reason why you have to keep a routine is that we have clock. We have an internal clock and that clock requires input into it to tell what time it is. So when the cues for that clock are either irregular or discrepant with what it's expecting. So a good example would be

when you travel, right, so your internal clock may say, you know, it's 5:00 pm, and then you fly somewhere and it says that it's 10:00 pm. Well at that point your body, the sun will be down, the moon will be out and it's getting time to go to bed, but your body is not prepared for that. It thinks it's 5 o'clock pm and so there's going to be a discrepancy. And that's what we suffer from when we suffer from jetlag. Right? And so when we get into bed at a certain time and it varies from day to day or awake time varies from day to day, then it changes the input into that clock and you'll suffer from essentially jetlag, so jetlag without the travel. So one of the best things that you can do is to pick a schedule that is well suited to your body and to stick to it seven days a week. If you're somebody with insomnia, the clock really needs to be regulated. So I think the clock is sort of a really big one.

The other one is, I said that there was a problem with that system that actually determines how much deep sleep you get, and getting deep sleep really depends on building up a chemical throughout the day that is really produced by your cells working. And so in order for that system to be in a state where it thinks that you require deep sleep, you have to be pretty active. And one of the first things that goes when somebody has a bad night or two of sleep is they, you know, they'll hit the snooze bar once or twice. They feel tired, still linger a little bit in the morning. They may attempt to nap. They usually start cutting out activities like working out because they feel tired. They may go to bed early to get a more opportunity for sleep. So what we see is an increase in the time at rest and maybe even in bed in a 24-hour period in somebody with insomnia, and then that sends a message to the system that you actually require less deep sleep and so it becomes a vicious cycle. So certainly restricting the amount of time that you spend at rest, limiting your time in bed over the course of two weeks to about what you sleep. So if you're sleeping on average about six hours, then you probably shouldn't be spending more than about six and a half hours in bed night after night after night. What will happen is your system will say, "Oh, you need more sleep," and it will start producing more deep sleep and then you can start filling up the time. And when that starts happening, then you can increase the time in bed because you'll start to get sleepy and fill out the entire time.

And another thing that we actually ask people to do is to unpair their bed with wakefulness. Once people get insomnia, they spend increased amount of time in bed when they're awake. And it doesn't matter if you're awake and you're worrying or, you know, doing lists or whatever it is that you're doing, if you're going to pair your bed over and over again with wakefulness, it's no longer that cue for you to fall asleep. So we know that people have this if they tell us this particular story. They say, "You know I was really, really, really tired. I got into bed and you know it was like a switch went off and I'm wide awake." That is a sign that the bed is this symbol or signal rather to become wide awake. So one of the things we're going to ask them to do is they're not to get into bed until they are basically asleep or pretty close to it. Once they're in bed, if they get into bed and that switch goes off, then it's a sign that they are now wide awake and they should not be in the bed, so we ask them to get up out of bed and to do something

else in the other room until they become sleepy again. When they become sleepy, they can come back into the room, and this might have to happen a couple of times before they're sufficiently sleep deprived that they will just fall asleep. When that happens, that means that the bed was paired with sleeping and that's what we want.

Host: This sounds a lot like sleep training for babies.

Colleen Carney: It is a lot like sleep training and like sleep training, some of it is counterintuitive I think. In some ways the best sleep habits are the best day habits. Having regular activity and sufficient activity, like staying active, and that's hard. Having this regular rise time. Getting lots of light. Even at work, like I see people with very dim lighting at work because they like the ambience of it. But I mean light is one of the most important cue givers to our clock, sunlight in particular. So we need lots of light. Light is good for alertness as well. We need good nutrition. If you're going to have a day wherein you are eating things that spike your blood sugars and there are crashes, the crashes are associated with fatigue. And in somebody with insomnia, whenever they experience fatigue, they typically start ruminating about their sleep loss and they start to worry about whether or not it's dangerous. So anything that we can do to help keep things even is really important. Even hydrating, not having excessive amounts of caffeine, which again when you withdraw from the caffeine, you feel tired. Not napping during the day. And also during the day setting aside at least an hour before bed as a wind down, because a lot of times people stay connected to, well mainly devices, and it's not the device itself probably in adults that's activating, but it's the having to stay on. You know, having to problem solve, being reminded of something that you forgot to do, these kinds of things keep people activated and then when they get into bed, they're just not ready for sleep. So having a good self-care wind down, you know, just relax for an hour before bed would be a great thing.

And then the last thing I think is really important, a good daytime habit, is not to sweat sleep loss. And I know that's really strange to say when in the media we're bombarded by information that basically you're going to die early if you don't have good sleep. But the fact of the matter is the main risks for insomnia are actually mental health disorders, right, so we really want people to focus on good self-care, taking care of the insomnia piece, and relaxing about sleep, not trying to force it to happen. Good sleepers don't actually think about sleep and they do nothing to produce sleep. And the problem with insomnia is that everyone is always trying to force sleep, take control of their sleep. You know, oh, I'm going to get, you know, a whale CD so I can hear them singing and I'm going to sleep mask and I'm going to take melatonin and I'm going to do this and this and this. You should just set up your sleep system naturally to compensate for sleep loss, set the clock, and to decompress before you go to bed and these things will take care of themselves.

Host: How long does it take for new sleep routines to take hold?

Colleen Carney: It takes about a week, but I would say it takes actually two weeks before it's really in that second week that we can really see sleep regulated. So in the first week there's lots of ups and downs. People are getting out of bed and their sleep systems are resetting, so there's a little bit of a messy first week. By the end of the week, pretty much most of the work is done and in that second week, then that's when you start to see the really nice recovery.

Host: And people tell you, "I'm sleeping like a baby"?

Colleen Carney: They sleep like adults, which is really nice and the thing is that they're sleep quality has improved and the efficiency of their sleep has improved. That means the amount of time that they are in bed, most of the time they are asleep and that's what we really want. We don't need people to sleep from the moment their head hits the pillow to the moment they wake up. We just want people to have regular adult sleep and that means that they can fall asleep within a normal amount of time, and they are awake in the middle of the night for a normal amount of time and most importantly, that they feel good during the day. And the fact of the matter is that CBT is considered the frontline treatment, it's supposed to be used for chronic insomnia before medications are used. And the reason why is that it has wonderful outcomes, but the best thing is that it works for years and years afterwards.

Host: Dr. Carney, this has been great. Really helpful Thank you for taking the time to talk with us today.

Colleen Carney: You're most welcome.

Host: Our guest was Dr. Colleen Carney, author of *Goodnight Mind*. Visit her website at drcolleencarney.com. On this website, look for the *Sleep Health Toolkit*, it's filled with many helpful resources. Thank you for listening.