Psychology and Health

Psychological interventions for Insomnia

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Management of Insomnia with Cognitive behavioural therapy

Nowadays, "Insomnia" basically contributes a significant range of considerable physical as well as mental health burden. Based on a current Australian study, Chronic Insomnia is likely to be most common among the Australian Citizens and this condition is typically characterised by significant sleep disturbances (Appleton et al., 2022). Furthermore, the majority of Australians mainly experience chronic sleep disturbances or Insomnia at some point of their entire life. As per current estimation, approximately 1 out of 10 individuals have been diagnosed with mild insomnia in their lifetime (Healthdirect, 2022). In essence, symptoms like experiencing difficulties in falling asleep, waking too early, feeling not refreshed are common in Insomnia. The vulnerability to develop Insomnia has directly been affected by a range of genetic variants, exposure to life stress in early life, brain structure, brain function as well as significant life events (Van Someren, 2021). This further addresses the underlying causes of Insomnia. Although there have been no specific underlying causes of this disorder, poor sleep pattern or habit, stress, medical issues, anxiety, depression can make Insomnia worse. In treating the insomnia condition, Cognitive restructuring through a structured psychological intervention like CBT has proven to be beneficial. Research on effectiveness of CBT has shown that "Cognitive behavioural therapy or CBT-I" have made significant improvement in Insomnia or sleep disturbances (Mitchell et al., 2019). Additionally, therapeutic interventions like CBT-I have made improvements in the range of sleep parameters. The current paper will primarily demonstrate typical and sound treatment options for Insomnia, prior to present arguments those psychological interventions like CBT is likely to be an effective treatment approach for alleviating Insomnia symptoms.

There are basically a range of techniques preferred by Psychologists or care practitioners in treating or overcoming the symptoms of Insomnia. For instance, treatment

options like "relaxation training", "stimulus control", "sleep compression", "sleep restriction" including "Sticking to proper sleep schedule" can help in treating the condition. In Australia, medications like "benzodiazepines", "Z-drugs" or "benzodiazepine receptor agonists" including antagonists like "dual orexin receptor" have been approved in testing Insomnia (Grima, Bei & Mansfield, 2019). Regrettably, these aforementioned medication therapy and some measures of physiological changes can alleviate the symptoms of Insomnia to some extent. These medications can lead to other side effects as well. Research has shown that the majority of the medication for insomnia used in medicine therapy can lead to irritation and other associated dangerous side effects (Edinoff et al., 2022). For instance, use of antihistamines can cause dangerous consequences like blurred vision or vision impairment, dry mouth, dizziness, mind state full of confusion upon waking from sleep and such others. As per Norelli, Long & Krepps (2021), Relaxation techniques like relaxation training are some common therapeutic exercises or physical therapeutic interventions; in turn help people in decreasing anxiety and tension. Thus, this aforementioned range of evidence has provided clarified indication that these aforementioned ranges of treatment options may not be effective in assisting all patients of Insomnia. In this context, using psychological intervention like "Cognitive behavioural therapy (CBT)" can be effective in treating Insomnia.

"CBT or Cognitive behavioural therapy for insomnia" is considered to be structured psychological intervention or program, which in turn provides assistance to successfully replace thought and behaviour, causing worsen sleep disturbances (Mayoclinic, 2022). In providing a vivid explanation of the approach or CBT plan, CBT-I involves a range of key intermediate interventions. The interventions involved by CBT-I include "cognitive restructuring", "stimulus control", "sleep hygiene", "relaxation techniques", "sleep consolidation" as well as "Cognitive restructuring therapeutic intervention" (Rossman, 2019). In this context, in administering the CBT, it can be administered with Psychological

therapists during one-on-one sessions. This therapeutic intervention can also be administered in groups by involving other people suffering from an exactly similar condition (National Health Service, 2022). This has highlighted that by administering in both one-on-one session and group session, this therapy works in a systematic fashion to alleviate symptoms of Insomnia among the patients. As per the ideas of Kazdin (2017), in recent years, remarkable progress has mainly been made in successfully developing psychological interventions for a range of disorders which can affect adolescents, adults or children as well. Owing to this fact, use of CBT can be effective in making remarkable progress in patients suffering from Insomnia or sleep disorders. Furthermore, based on the theoretical argument, CBT is such an effective therapeutic intervention that can subdivide the Insomnia problem into five different areas like "Situations", "Thoughts", "emotions", "physical feeling" as well as "actions" (National Health Service, 2022). Thus, in treating insomnia among the Australian population, this Psychological intervention might have been effective. Thus, the effect led by CBT has been considered to be instrumental in comparison to other therapy.

Research has shown that likewise normal people, Insomnia is quite common among the individual suffering from heart disease or cardiac failure. In a review of an article by Redeker et al. (2018), a sub-assessment of RCT or "pilot randomised controlled trial" of around 51 patients has highlighted that administration of "CBT-I" can improve the "biology of insomnia". Along with this, the study has also highlighted that CBT can make improvement in sleep disturbances, although it may create no effects on biomarkers. This study has shown improvement in the Population who are suffering from heart failures and having an issue of sleep disturbances or Insomnia. In determining what ways CBT can make improvement, the article has highlighted that administration of "CBT-I" basically lowers the "C-reactive protein or CRP" (Redeker et al. (2018),. It also reduces the "inflammatory cytokines", including leading vivid impact on "pro-inflammatory gene expression (PIGE)" within the 4 months of

initiation of CBT-I among the older adult, suffering from cardiac failure or heart attack. **Symptoms** like Sleep characteristics, sleep disturbances have been demonstrated to improve along with improvement of Circadian rhythm and autonomic nervous system.

Another study conducted by Alshehri et al. (2020) highlighted that based on another experimental method "RCT part II on another group of people suffering from both T2DM and insomnia". As per this study, the application of CBT-I can improve the insomnia condition of the aforementioned group (Alshehri et al., 2020). This article has shown improvement in symptoms like fatigue, glycemic control and such others. Thus based on point of comparison, the previous study has claimed no improvement of CBT administration on insomnia biomarkers. By contrast, the study by Alshehri et al. (2020) has highlighted vivid improvement in insomnia conditions. Therefore, it might be possible that CBT works on different groups of patients when applied in a completely different manner.

The reason behind considering CBT as effect in comparison to other physiological, meditation and relaxation technique, as Structured and progesive outcome can be achieved by patients without getting fear of any potential side effects like medications. As per Chambless & Ollendick (2001), CBT is considered to be more effective in comparison to non-behavioural treatment interventions like Client-centred or client-oriented counselling sessions. Additionally, CBT helps in providing long-term relief or control in Insomnia patient's irrespective of age and patient's medical history, when provided in a specific way.

Conclusion

In summary, it can be stated that there is much evidence which can show improvement of Insomnia condition among diverse groups of patients while applying Psychological interventions or CBT. Therefore, it can be suggested that by conducting more research on CBT and applying it to treatment or recovery plans of Insomnia patients, instrument and client-centred optimum outcome can be obtained.

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