

Has Your Sleep Changed with COVID-19?

Are you having trouble falling asleep, staying asleep or waking up too early? It's no wonder. Some people lost their jobs. Some people are unsure whether they will be able to keep their job. Some people wonder how long they can keep their small business running. Others worry about how they will juggle home schooling children while working from home. All of these situations can affect your stress level and sleep. Or maybe you are an essential medical or health care provider who is exposed to COVID on a regular basis which has another added level of stress. Stress related sleep problems are common.¹

You are not alone if you are suffering from a sleep problem during COVID. According to a recent Washington Post article, "prescriptions for sleep medications jumped 15 percent between mid-February and mid-March in the United States, according to Express Scripts, a major pharmacy benefit manager."² In addition, an April 2020 online survey in Australia reported that 49% of 1491 adults had negative effects for sleep which were associated with higher depression, anxiety and stress.³ Sleep plays an important role in emotion regulation and daily functioning.⁴

Cognitive Behavioral Therapy for insomnia (CBT-I) can help. Several CBT-I techniques to improve insomnia include: good sleep hygiene, relaxation, scheduling "worrying time," and keeping your going to sleep time and waking up time the same. If you have a favorite relaxation method such as deep breathing or yoga, remember to utilize them for self-care. Hypnosis is also a great tool for treating anxiety, where the average participant improved by 79% with hypnosis versus control participants.⁵ Furthermore, in the meta-analysis when hypnosis was combined with psychological treatment participants improved by 84% versus stand-alone treatment.⁵

COVID may also have disrupted your circadian rhythms of when you eat, which ultimately can affect how you sleep. Try to maintain a regular eating time to improve your sleep. To combat loneliness reach out to friends and family during COVID with your phone or tablet, but be sure you stop using blue screens at least 2 hours before bedtime. If you cannot do that wear blue screen blocking glasses and get a blue screen blocker for your desktop computer. Setting your phone to block the blue screen is a help, but for many people it's not enough.

If CBT-I doesn't work, medication can be used, but keep in mind that they are supposed to be only for short-term use and there is a lack of evidence of its usefulness for long-term use.⁴ More physicians are realizing CBT-I is the best treatment for insomnia; however there aren't many therapists who are trained in it and there aren't many physicians who specialize in sleep.

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¹ Alena, E., Micoulaud-Franchi, J.A., Geoffroy, P.A., Sanz-Arigita, E., Bioulac, S., Phillip, P. (2016). The bidirectional relation between emotional reactivity and sleep: From disruption to recovery, *Behavioral Neuroscience*, 130, 336-350.

⁴ Alena, E., Baglioni, C., Espie, C.A., Ellis, J., Gavrilloff, D., Holzinger, B., Schlarb, A., Frase, L., Jernelov, S., Riemann, D. (2020). Dealing with sleep problems during home confinement due to the COVID-19 outbreak: Practical recommendations from a task force of the European CBT-I Academy, *J Sleep Res*, 29, 13052.

² Bruillard, K., Wan, W. (2020, September 3). The Pandemic is ruining our sleep. Experts say “coronasomnia” could imperil public health, *Washington Post*.

³ Stanton, R., Quyen, G.T., Khalesi, Williams, S.L., Alley, S.J., Thwaite, T.L., Fenning, A.S., Vandelanotte, C. (2020). Depression, Anxiety and Stress during COVID-19: Associations with changes in Physical Activity, Sleep, Tobacco and Alcohol Use in Australian Adults, *International Journal of Environmental Research and Public Health*, 17, 4065

⁵ Valentine, K.E., Milling, L.S., Clark, L.J., Moriarty, C.L. (2019). The Efficacy of Hypnosis as A Treatment for Anxiety: A Meta-Analysis, *Int J Clin Exp Hypn*, 67, 336-363.