STEPS IN NON-DRUG MANAGEMENT OF INSOMNIA

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<u>Assessment</u>

- 1. Document typical bedtime and rising time
- 2. Document significant night to night variability in bedtime and rising time (i.e., week nights versus week days)
- 3. Ask whether the patient frequently looks at the clock throughout the night
- 4. Inquire about use of caffeine, alcohol, tobacco
- 5. Inquire about environmental lighting, especially in the last 2-3 hours before bedtime
- 6. Inquire regarding unrealistic expectations
 - a. "I should sleep like I did when I was 20 years old"
 - b. "I should get 8 hours of uninterrupted sleep per night"

Intervention

- 1. Prescribe a fixed rising time, 7-days per week
- 2. Do not go into the bedroom to rest, read, watch TV, etc before the prescribed bedtime
- 3. Use an alarm if necessary to enforce the rising time, but hide the faces of all clocks in the bedroom
- 4. Make sure lighting conditions are extremely dim in the last 2 hours before bedtime
- 5. No caffeine within 15 hours of bedtime
- 6. No alcohol within 4 hours of bedtime
- 7. No tobacco during the night
- 8. Come to a consensus with the patient regarding ultimate sleep expectations
- 9. Tell patient that non-drug management of insomnia works slowly (over weeks), but lasts a long time
- 10. Encourage heart healthy exercise, daily if possible, to be completed more than 4 hours before bedtime
- 11. Encourage bright light environmental conditions upon rising in the morning
- 12. No napping, and no 'sleeping in" to compensate for a bad night