Chronic Insomnia

- Typically diagnosed when trouble falling or staying asleep occurs at least 3 nights a week for a month or more

- Occurs in an estimated 30% of U.S. adults

- Often co-occurs with depression, anxiety, substance use, chronic pain, and/or medical diagnoses

- Associated with poorer mood, productivity, and health; increases the risk of accidents

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Have questions or want to schedule an appointment?

Christa Marshall, Psy.D.

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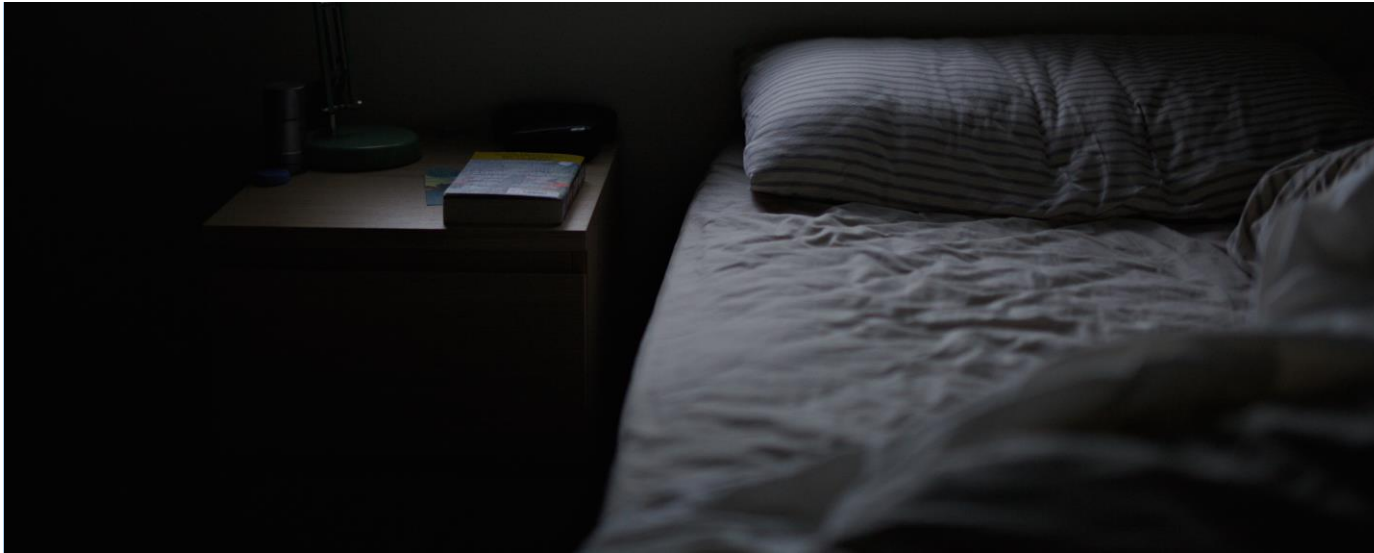
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MARSHALL
Psychological Services, LLC

Cognitive-Behavioral Therapy for Chronic Insomnia

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Is CBT-I right for you?

About CBT-I Treatment

According to current treatment research, Cognitive-Behavioral Therapy for Insomnia (CBT-I) is the safest, most effective treatment for people who experience consistent difficulty falling or staying asleep. CBT-I can be delivered in a group or individual format and typically takes four to eight sessions to work.

Serious sleep problems such as sleep apnea or restless legs syndrome should be addressed before beginning CBT-I. Treatment then starts with a sleep intake appointment, and you'll be asked to start keeping a sleep diary.

During CBT-I treatment, you will focus on changing the thoughts (*cognitions*) and actions (*behaviors*) interfering with your sleep. You'll learn how to:

- Practice good sleep hygiene
- Train your body to associate your bedroom environment with sleep
- Relax your body and mind
- Change problematic beliefs you may have about sleep

FAQs

Does CBT-I really work?

Yes! Research consistently shows that CBT-I is the most effective treatment for insomnia, including insomnia due to medical conditions like cancer or chronic pain. People who receive CBT-I often report improvements in their pain and mood as well as their sleep.

How long will this treatment take?

Consistent with clinical research findings, in Dr. Marshall's experience it typically takes four to eight sessions for a patient's insomnia to resolve.

What about my sleep medication?

Dr. Marshall will work with you and your prescribing provider; you may decide to reduce or eliminate medication use, although this is not required.