

First Aid for Insomnia

1. Wake up at a regular time.

Sleep is a 24-hour cycle, and the time that you fall asleep is just one point in that cycle. It's also the hardest point to control. Instead of struggling with the evening side, pour your efforts into the morning by rising out of bed at a regular time. The rest of the cycle is anchored to the morning, and irregular wake times make it harder to fall asleep when you need to. Insomnia doesn't make it easy to wake up in the morning, but stick to this rule even if it means you'll be sleep deprived that day. Follow the tips in Chapter 4 to help you get out of bed. Sleep deprivation is actually the best antidote to insomnia. It increases *sleep drive*, a biological force that helps people fall asleep.

2. Avoid daytime naps.

Napping drains the fuel that the body needs to fall asleep. That fuel is called *sleep drive*, and it builds up the longer you stay awake. If you still can't sleep after sticking to a regular wake-up schedule and avoiding daytime naps, you may wonder why that fuel isn't kicking in. There's another force that can override it: anxiety.

Anxiety trumps sleep drive, and for a good reason. It's not safe to fall asleep if danger is near. Unfortunately, the body can't tell the difference between anxiety about a predator and anxiety about sleep.

What if you're calm and worry-free but still can't sleep? It may be that your circadian rhythm is off. That rhythm, which is regulated by the time you wake up and the cycle of sunrise and sunset, has to be in place for sleep drive to take effect. The circadian rhythm breaks down when you wake at irregular times, have too much activity or light in the evening, or have an active mood problem like depression or hypo/mania.

3. Only use the bed for sleep.

The goal of this step is to train your body to associate the bed with sleep. That means no electronics, eating, worrying, or reading in bed. Sex and intimacy are allowed. Stay out of the bedroom, and definitely out of the bed, unless it is evening and you are falling asleep. Worry is one bedroom activity that's particularly hard to control. A dark bedroom is necessary for sleep, but the empty space invites worries, including the "what if I don't fall asleep" worry. It's tempting to turn to television or electronics to distract from the worry, but that will only prolong the insomnia. Two solutions:

- *Change your space.* If you're unable to sleep after about 20 minutes (just approximate - don't watch the clock!), then move to another room and sit in the dark until you feel tired. Then try again. If sitting in the dark is difficult, use a low-level yellow light and wear blue light blocking glasses.
- *Schedule time for worry.* Set aside a regular time in the afternoon to do all the worrying, problem solving, and planning you need to. *Worry on purpose* for 20 minutes, and do it in a room other than your bedroom. Think about everything you need to do and all that could go wrong. Write the worries down. If you run out of worries, go over the same ones again, but don't stop until the 20 minutes are up. By inviting worry in, this paradoxical technique gradually reduces anxiety and trains the brain to worry at an earlier hour.

4. Only go to bed when sleepy.

Trust your body to sleep when it needs to. As long as you don't nap in the day or fall asleep so early that you're up most of the night, this principle will not steer you wrong. When insomnia goes on too long, people lose trust in their body's natural sleep mechanisms. They try to take control of the sleep gears, but those were not designed for manual operation. The result is frustration and further breakdown of the gears.

There's a good reason that the sleep gears weren't designed for stick-shift mode. When you drive a stick shift, you have to be awake to operate the gears. Otherwise, the car would crash. That's the paradox of insomnia. Falling asleep is about as complicated as landing an airplane. There is no way that your body would let you operate such delicate controls unless you were wide awake, which means you'd never fall asleep.

Instead, you'll need to restore trust in your built-in sleep mechanisms in order to fall asleep. There are two:

- *Sleep drive*: The more sleep deprived you are, the more your sleep drive increases. Stay up too long, like two to three days, and eventually you'll crash. Guaranteed.
- *Circadian rhythm*: This is the 24-hour cycle that regulates sleep and other basic functions, like appetite and temperature. The circadian rhythm is regulated by morning light, evening darkness, the time you get out of bed, and other daily activities.

These mechanisms aren't perfect, but they're all we have. Allow your body to make mistakes, like staying awake at night when it ought to know better. Your sleep gears may be a bit rusty if you've had a tight grip on the steering wheel for a long time. This sleep program will put the right conditions in place so your natural sleep mechanisms can take over at the wheel. Give them time to relearn the road.

5. Avoid caffeine, alcohol, and light in the evening.

Caffeine. For most people, 2:00 p.m. is a good cut-off time for caffeine, but an earlier cut-off may be needed for highly caffeinated drinks or people who metabolize caffeine slowly. Chocolate is also a strong source of caffeine, particularly dark chocolate.

Alcohol. Alcohol is a tempting sedative, but its effects on sleep can be disastrous. For one thing, it's not just a sedative. It has stimulant properties as well. Alcohol also disturbs sleep waves, which means the sleep it brings is not as restorative. It often makes people wake up in the middle of the night, with worse insomnia than they started with. Even when it does work well, the solution is short-lived because tolerance quickly develops, causing an addictive cycle with worse insomnia.

Light. Use dim, yellow light in the evening and avoid electronics for one to three hours before bed (or wear blue light blocking glasses). Sleep in a pitch-dark room, or use an eye mask while in bed. Even small amounts of light (5-10 lux, the equivalent a nightlight) can interfere with melatonin, which is the hormone that enables sleep.

6. Set the stage for sleep.

Start a wind-down routine at the same time each evening. Relaxing activity before bed deepens sleep, while problem solving and engaging activity lightens it. A drop in temperature before bed helps activate sleep hormones. Program the thermostat to go down to the 60-65°F range at night. In the morning, have it rise to a warmer temperature to trigger wakefulness.

When will I see results?

These six steps should work within three to four weeks. After that, you may have occasional nights of insomnia, but sticking to this plan will keep it from spiraling into a full-blown problem. If you don't see results, move on to the advanced steps for insomnia in the following section.

Troubleshooting

"I've heard that insomnia is bad for your health, so isn't it dangerous to allow sleep deprivation?"

Healthy sleep is not just about quantity. Timing and quality are just as important. Irregular circadian rhythms, like oversleeping in the morning or napping during the day, are also bad for your health. They can even be a medical problem in their own right, called *social jet lag*. Brief sleep deprivation, like the type we're using to reset your sleep, actually has a few medical benefits. It treats depression, reduces inflammation, and protects brain cells by raising levels of *brain-derived neurotrophic factor* (BDNF) (Schmitt et al., 2016).

"I can't function if I don't sleep, so I have to sleep in or take naps to catch up."

Sleeping in and taking naps are temporary cures for a chronic problem. They also perpetuate that problem. If they were working for you, you probably wouldn't need this therapy. But if you really have insomnia, you are probably sleep deprived more days than not. This therapy requires you to keep that sleep deprivation at a steady level, and to ignore the urge for temporary relief through a daytime nap. It's similar to managing a skin problem, where the doctor asks you not to scratch the itch. Keep your eyes on the long-term gains, which are greater than the short-lived relief of a nap.

"Napping is part of my daily routine and helps me function."

Napping can be healthy, particularly after age 60. Sleep can improve in that age group when it's divided into two shifts. The first shift involves a brief afternoon nap (45 minutes to two hours long), followed by a longer round of sleep in the evening. However, if you have insomnia it's a different story, even if you are over age 60. Napping needs to stop. Once you've recovered from insomnia, you can reintroduce the napping ritual. If your sleep stays stable, continue with regular naps; otherwise, it's best to give them up.

"My issue is not oversleeping. I wake up too early and can't fall back asleep."

Use the 20-minute rule if you wake up too early. If you're unable to fall asleep after 20 minutes, get up and sit in the dark, or if you have the lights on, wear blue-light filtering glasses. Don't turn on the lights or start your day just yet. Stay in the dark until your wake-up time. That will keep your circadian rhythm from drifting too much.