As the popularity of pharmaceutical sleep aids increases, more insomniacs are turning to their doctors for prescriptions and quick-fix solutions. However, in a talk at the National Institutes of Health (NIH), APS Board Member Richard Bootzin, director of the Insomnia Clinic at the University of Arizona Sleep Disorders Center and the Sleep Research Laboratory in the University of Arizona’s Psychology Department, stressed the benefits of behavioral therapy as an alternative for treating sleep disorders.

In his address, “Translating Behavioral Therapy into Treatments for Insomnia,” sponsored by the NIH Office of Behavioral and Social Sciences Research, Bootzin highlighted some of the major impacts insomnia can have on daily life. Insomnia is associated with higher rates of illness; increased absences from work; deficits in memory, concentration, and performance; more accidents on the job; and a higher risk of abusing drugs and alcohol. Insomnia’s underlying causes include physical disorders such as apnea and chronic pain, substance abuse, psychological factors including stress and nightmares, and a poor sleep environment.

Bootzin emphasized the importance of combating insomnia through a combination of behavioral treatments. Most treatment plans use stimulus control, sleep restriction, and cognitive therapy together to achieve the desired results. These behavioral treatments provide patients with the opportunity to gain control over their poor sleep habits and to re-associate the bed and bedroom with successful sleep attempts. Sufferers are able to create a lifestyle change rather than rely on medication each night to catch a few extra winks.
Bootzin developed the stimulus control treatment for insomnia, the only nonpharmacological insomnia treatment to receive the highest standard-of-practice rating from the American Academy of Sleep Medicine, in 1972. It aims to reduce the negative associations of being in bed but unable to sleep by following simple rules, including only lying in bed when tired, using the bed solely for sleep (no eating, reading, or TV), leaving bed if you have not fallen asleep in 15 minutes, getting up at the same time each morning to acquire a consistent sleep rhythm, and avoiding naps during the day.