



Best Practices in Treating Comorbid Insomnia

Presented by
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Overview

Sleep is something we all do, and occasional sleep problems are common. It is understandable then, that we, like our clients, may gravitate towards common sense solutions to sleep problems. For example, sleep hygiene (e.g., refraining from late afternoon or evening coffee) is the most common strategy used by practitioners, but sleep hygiene is not effective for insomnia disorder and is used as the behavioral placebo condition in clinical trials. Insomnia Disorder is highly comorbid in those with anxiety, trauma, chronic pain, and depression, and using ineffective insomnia strategies in these clients will lead to poorer treatment outcomes, symptom recurrence, and of course, the insomnia disorder will remain. Another common mistake is that providers assume that the symptom overlap between chronic insomnia and comorbid conditions (e.g., worry) is the cause of the insomnia. Focusing on worry strategies, ignores the sleep-specific factors that perpetuate chronic insomnia, and does not address insomnia disorder. So what are “best practices” for insomnia disorder? To improve insomnia recovery in clients with anxiety, trauma, chronic pain, and depression, it is essential to treat the specific causes of the insomnia disorder directly. This webinar emphasizes assessing for the causes of comorbid insomnia, learning how to deliver evidence-based strategies that address these causes, and troubleshooting common issues in comorbid insomnia treatment. This webinar will use a combination of didactic Power point slides, experiential exercise and case studies.

Objectives: Participants will be able to:

- Identify the causes of chronic insomnia in those with comorbid disorders.
- Analyze data from sleep diaries to inform treatment recommendations.
- Identify cases in need of stimulus control.
- Collaborate on a time-in-bed schedule to increase sleep drive and regulate the circadian system.
- Utilize cognitive strategies to modify sleep-interfering thoughts.
- Troubleshoot adherence issues, common in comorbid insomnia cases, e.g., difficulties getting out of bed in the morning.

Introduction (1:30)

- Assessment
- Causes of chronic insomnia
- Sleep regulation

Session 1 (1:27)

- Psychoeducation;
- Stimulus Control
- Time-in-bed scheduling

Sessions 2-4 (1:29)

- Sleep extension
- Cognitive Therapy
- Counter arousal
- Relapse prevention

Implementation issues in Comorbid insomnia (1:31)

- Case examples in depression, pain, trauma, and anxiety

6 CE Hours for Psychologists Counselors Social Workers MFT

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Daniel J. Fox, Ph.D., is a licensed psychologist based in Texas, a renowned international speaker, and a recipient of multiple awards for his work as an author. With over two decades of experience, he has focused on the treatment and evaluation of individuals with personality disorders in various settings, including the state and federal prison system, universities, and private practice. Dr. Fox's expertise lies in personality disorders, ethics, burnout prevention, and emotional intelligence. Dr. Fox has conducted numerous workshops and seminars on topics such as ethics and personality disorders, the relationship between personality disorders and crime, treatment approaches for clients across the antisocial, borderline, narcissistic, and histrionic personality spectrum, emotional intelligence, and mental health management within the prison system, among others. He also has a popular YouTube channel that focuses on mental health and personality disorder issues.

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