

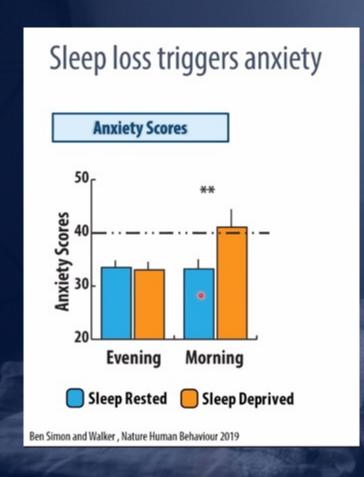
Sleep and our daytime moods interact on a day-to-day basis

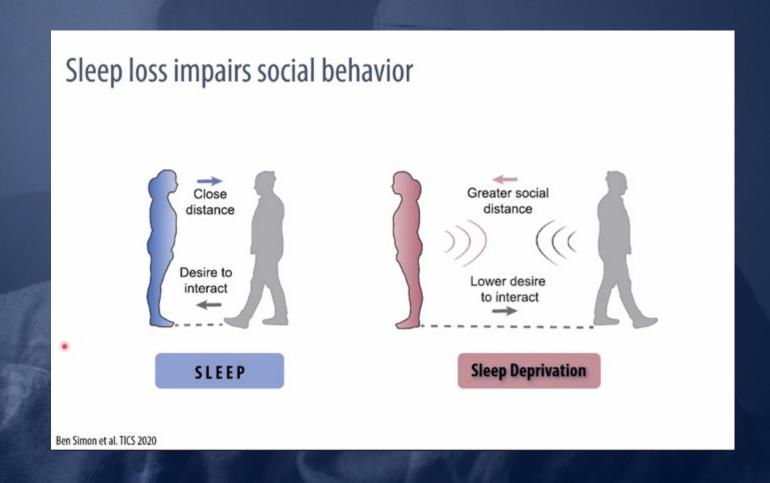
for example, for healthy young women...



Kalmbach et al (2014) The interplay between daily affect and sleep: a 2-week study of young women, n=171 Hierarchical regression analyses adjusted for baseline levels of depression and previous day's sleep metrics

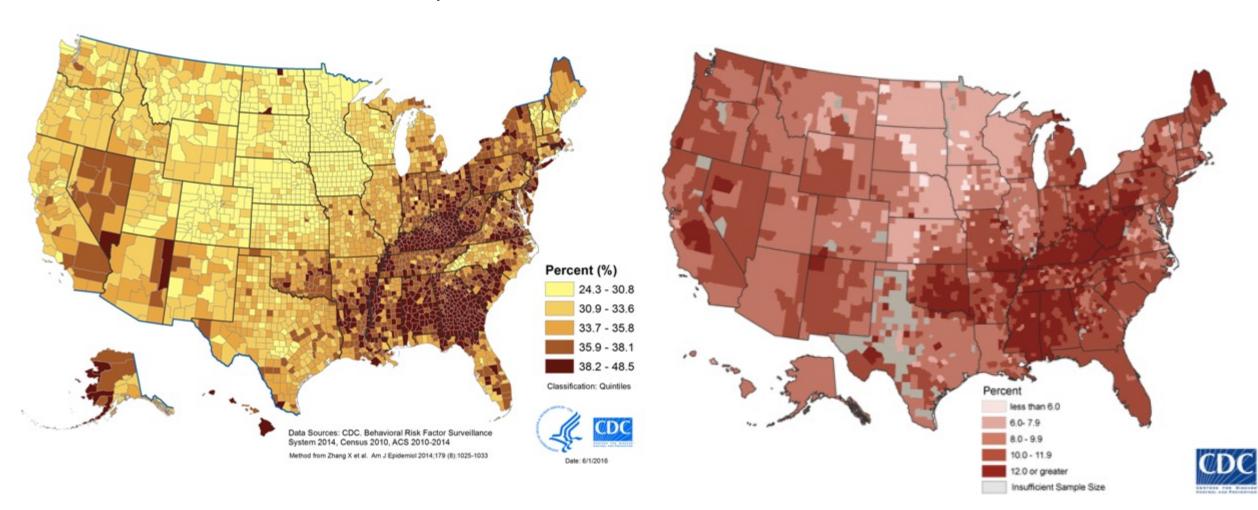
Sleep and our daytime moods interact on a day-to-day basis





<7 Hours Sleep

Mental distress



Dissatisfaction with sleep at least 3 nights a week, for 3 months or more with a negative impact on daytime function

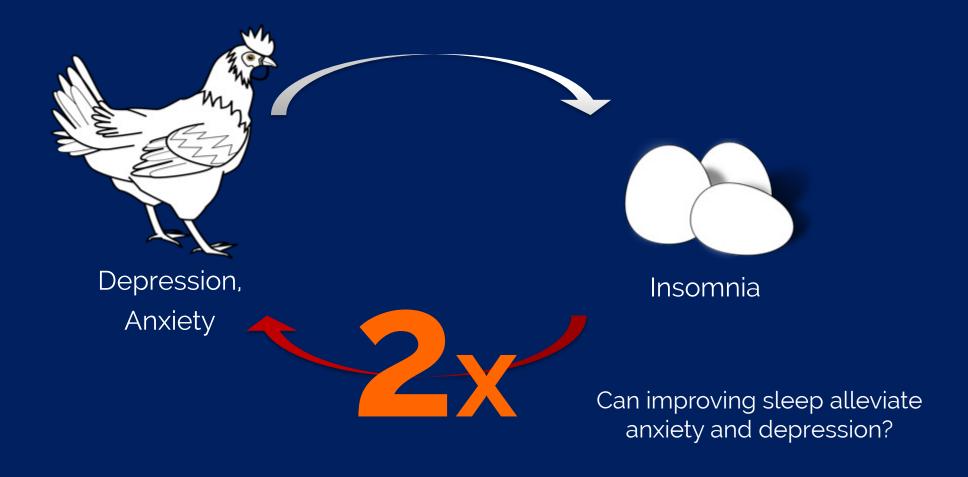
Insomnia

- Persistent worry or anxiety disproportionate to event
- Restlessness, on edge
- Difficulty concentrating
- Easily fatigued
- Sleep disturbance
- Irritability
- Muscle tension and other physical symptoms such as palpitations

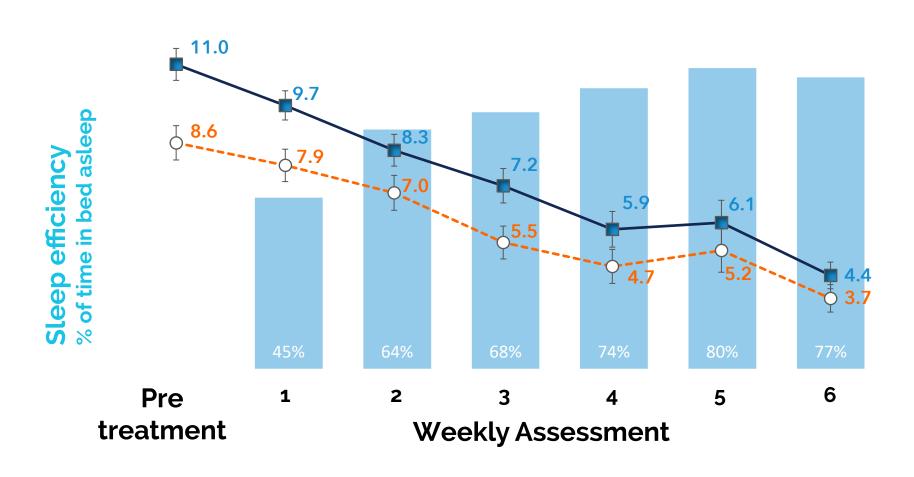
Anxiety

Depression

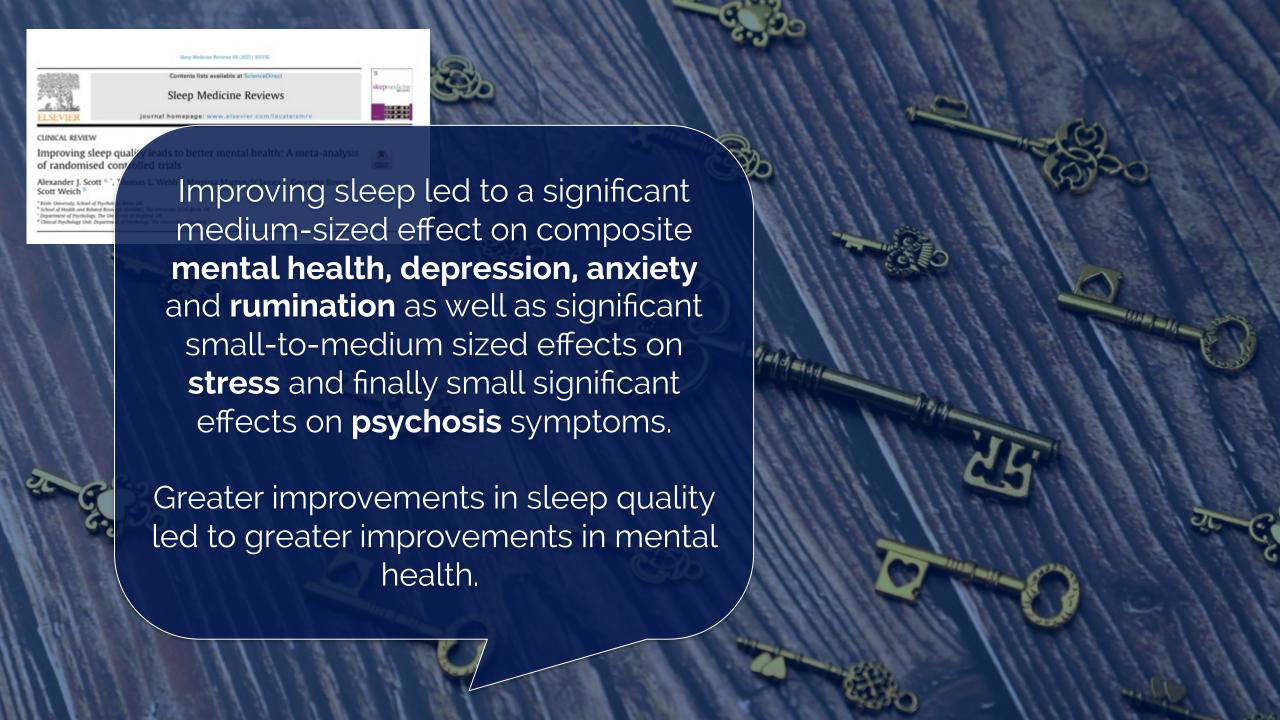
- Persistent depressed mood
- Loss of interest or pleasure in normal activities
- Changes in appetite
- Unusually slow or agitated movement
- Decreased energy or fatigue
- Difficulty sleeping or oversleeping
- Excessive guilt or worthlessness
- Difficulty concentrating or making decisions
- Thoughts of death or suicide



Improving sleep patterns leads to improvements in depression and anxiety symptoms



Depression (PHQ9) Anxiety (GAD 7)



The Components of Anxiety







Cognitive, Thoughts

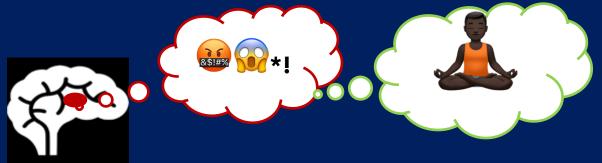




Physiological, Sensations







Sweat, muscular blood flow, tension

Heart rate, BP, beathing rate

Blood glucose, inflammation

Digestion, repair, sexual arousal, sleep

> Adrenaline Cortisol



Everyday anxiety

Acute panic

- Triggered by worry about future events

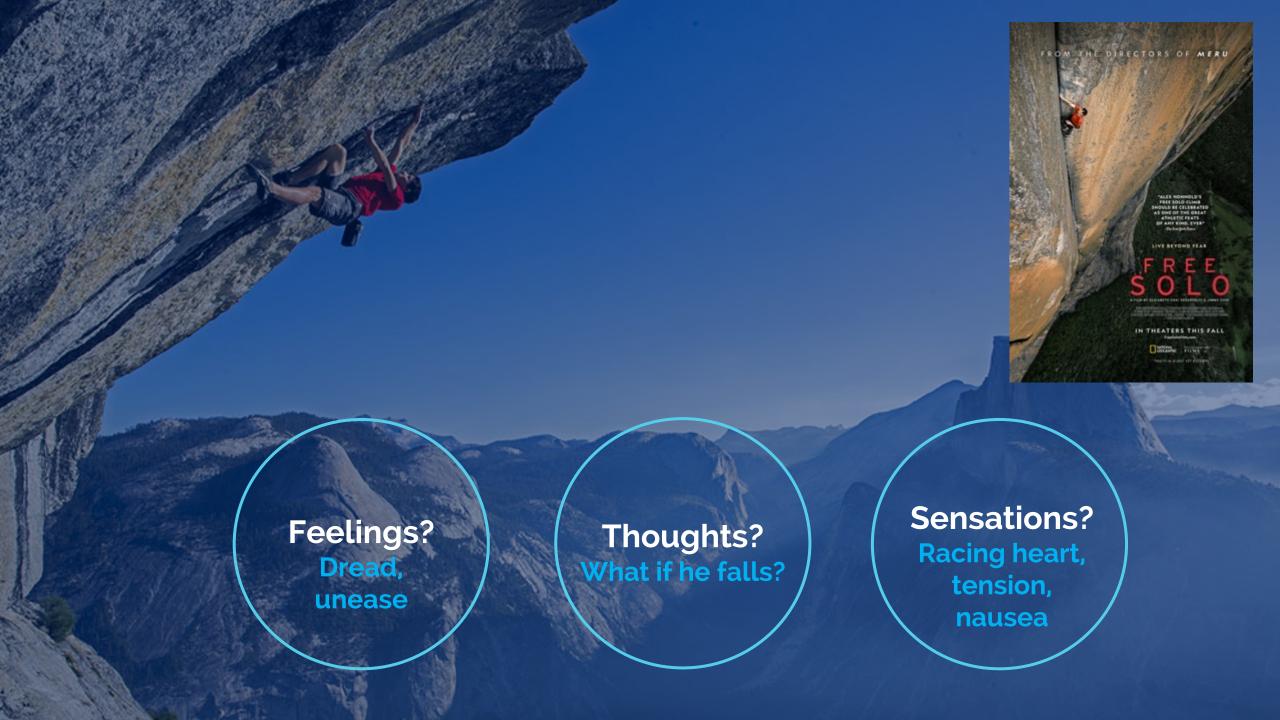
Excessive Anxiety

- Narrows attention towards the threat

Potential to improve performance by improved physical effort or problem-solving

- Fleeting, or eases when the stressor ceases

Everyday anxiety



Disordered anxiety.. persistent and disproportionate

- Disrupts our lives, normal behaviours or routines
- Constant and chronic; may also appear unexpectedly
- Focus on our internal world, at the expense of the 'here and now'

Feelings?

Dread, unease, doom, on edge, helplessness, fear, terror, frustration, anger, irritability, sadness

Thoughts?

What if I never get better?
What if I have another panic attack?
What if I am broken?
What if it's a heart attack?

Sensations?

Derealisation, pounding heart, tension, headaches, nausea, bloating, sensitivity to light, muscle twitching

Types of anxiety disorder

Panic disorder

Fear of anxiety, and panic attacks

Health anxiety

Misinterpreting symptoms of anxiety as something catastrophic

Social anxiety

Fear of social gatherings, prone to misinterpreting other's facial expressions, worry about giving offence

Phobias e.g. agoraphobia

Fear of being overwhelmed outside of a perceived safe space

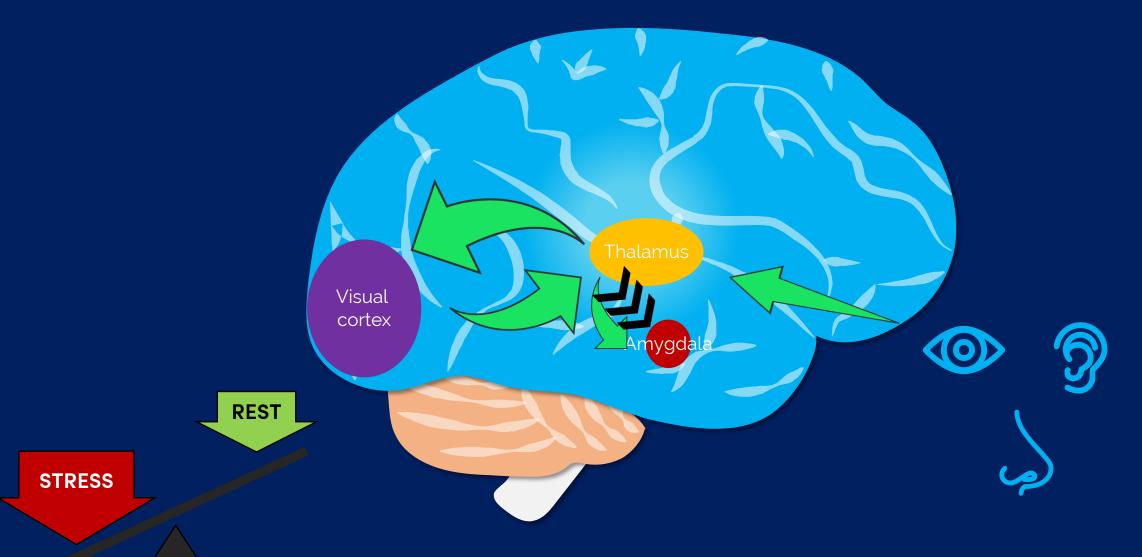
Obsessive Compulsive Disorder (OCD)

Rituals to prevent imagined disaster.. 'If I don't do X, Y will happen"

Post-Traumatic Stress (PTSD)

Anxiety surfacing due to unprocessed trauma.
Hyper-arousal, re-experiencing, avoidance

Anxiety 'disorder'? A more 'efficient' threat response





What causes anxiety?

Genetic risk factors

 Family history of anxiety or depression

Environmental risk factors

- Poverty
- Traumatic events
- Early childhood trauma

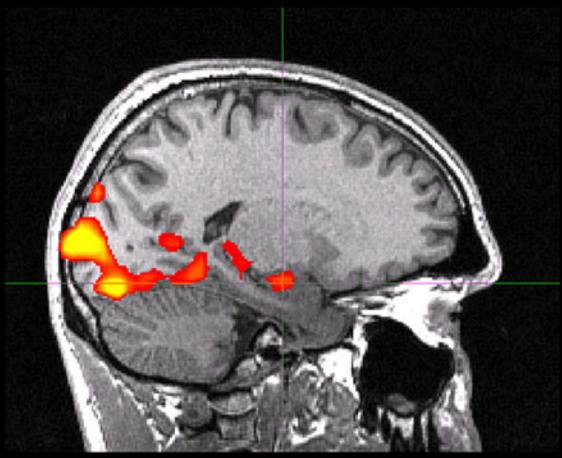
Stress

- Loss
- Health Issues
- Interpersonal Conflict
- Work dissatisfaction
- Financial stress
- Transitions/role change

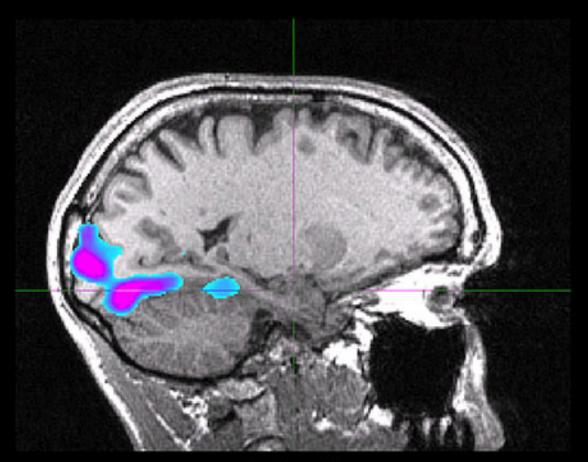
Protective factors

- Social support
- Personal resources (strength, skills, physical resources
- Coping skills
- Positive lifestyle factors

Anxiety

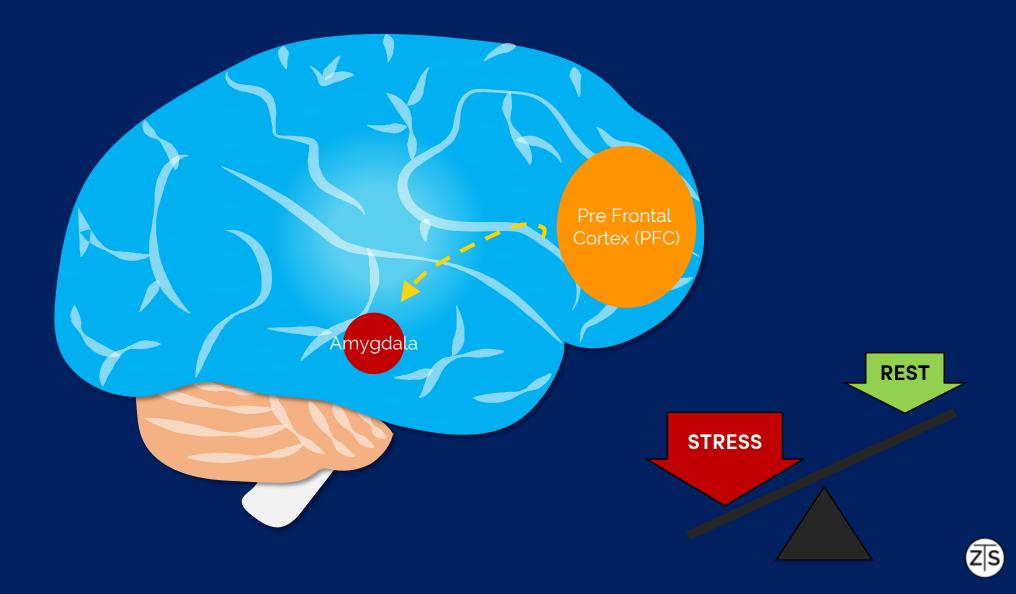


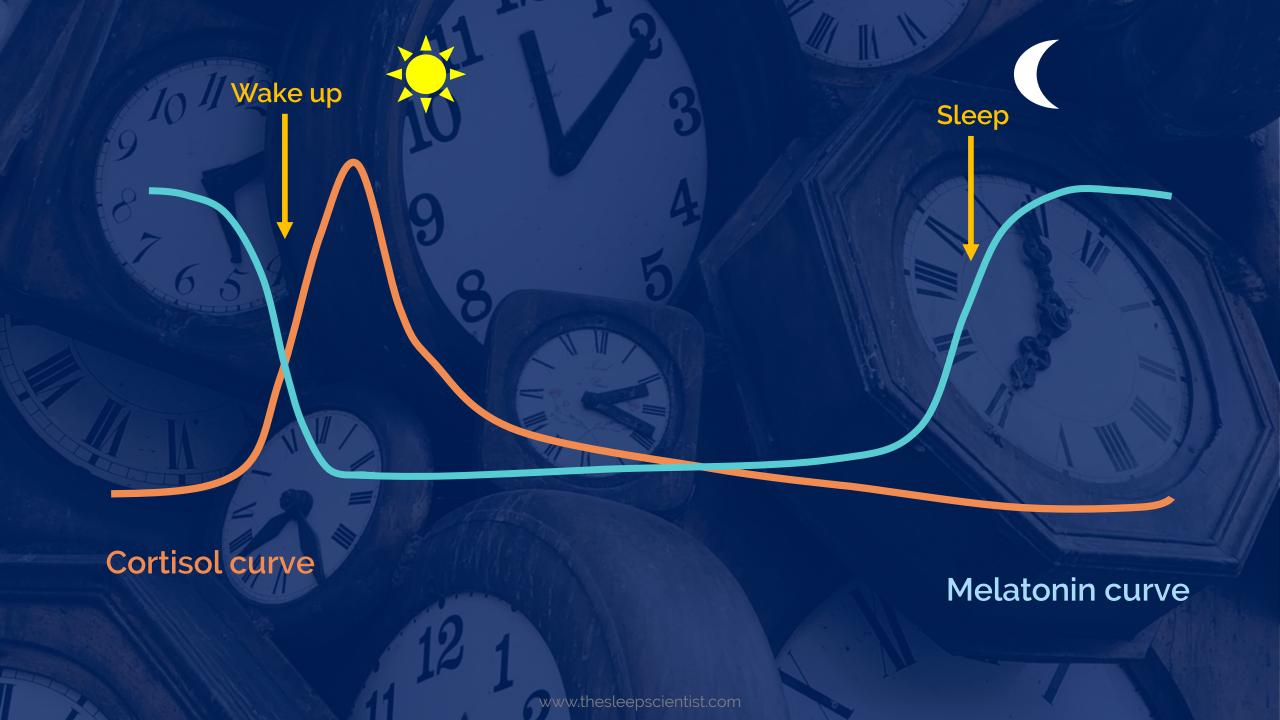
Control subject



Alex Honnold

How is sleep loss linked? Insomnia promotes hyperarousal







Anxiety, stress, depression, burnout

Impaired emotional regulation





Fast food, phone addiction, alcohol, caffeine, work late





Hyperarousal

High BP, HR, sweat, tension, back pain



"Tomorrow is going to be a disaster"

> "I'll never sleep again"



Strained relationships, poor decision making, low productivity

Impaired performance









Treatment approaches for Anxiety

Speak to a doctor if you would like to rule out other explanations, or having difficulty coping

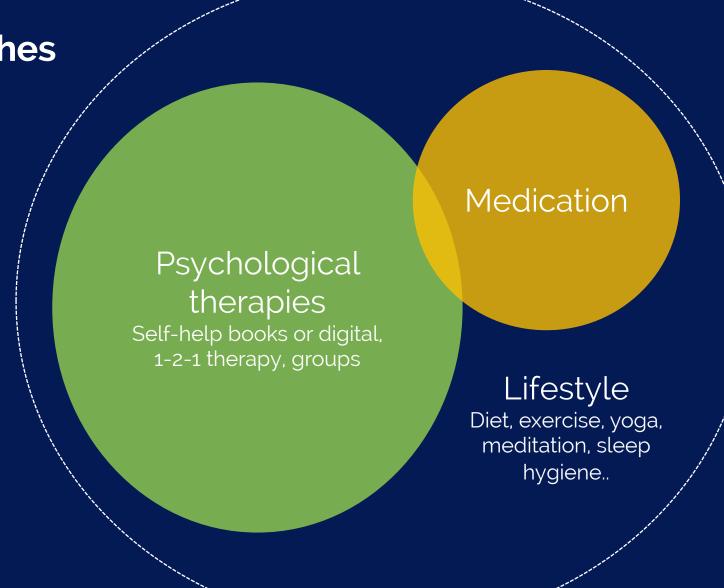
Psychological therapies
Self-help books or digital, 1-2-1 therapy, groups

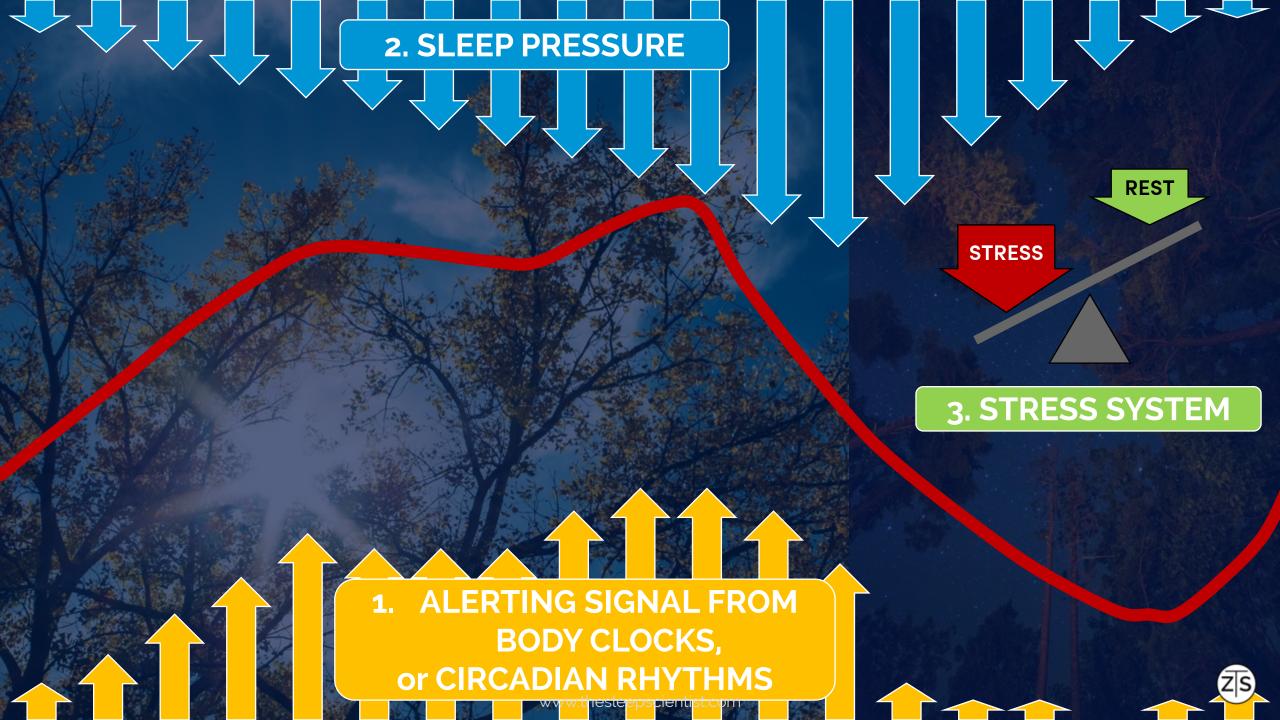
Medication

Lifestyle
Diet, exercise, yoga,
sleep, meditation,
volunteering,
stress management

Treatment approaches for Insomnia

Speak to a doctor if you would like to rule out other explanations, or having difficulty coping





Start with 'Sleep Hygiene'

Only go to bed when you're sleepy

Minimise stimulants (caffeine, nicotine) at least 6hr before bed Exercise regularly Avoid late or long naps



Wake up at the same time each day

Get plenty of natural light in the am
Avoid eating 2 hr before bed
Dim the lights in the evening
Switch off technology before bed
Avoid routinely drinking alcohol

Make your bedroom a calm haven

Repeat wind down rituals 30 min before bed

Find time every day to practice switching off - relaxation Protect the bed for sleep & intimacy



1. CBT for Anxiety: Exposure with education

- Systematic desensitization: to anxiety, and fear of anxiety
- Avoiding 'white knuckling' and safety behaviours
- Wilful tolerance
- In vivo real world exposure vs. imaginal
- Writing exposure: write out irrational thoughts and fears and how likely they are to come true

1. CBT for Insomnia: Exposure to what you fear? Reduce time in bed, and stop trying so hard to sleep

- 1. Don't go to bed unless you're sleepy
- 2. Get out of bed after 20 minutes if can't sleep, and do something else until you feel sleepy

(Maintain the same wake time every day, no matter how well you slept the night before.)

THOUGHTS

- What if I don't sleep again?
- How will I cope tomorrow? It's going to be a disaster.
- What if I can't do x? What if I lose my job? What if I get dumped?

BEHAVIOURS

- Roll over, and over, and over
- Stare at the clock in despair
- Reach for phone as distraction



fall asleep

EMOTIONS

- Helpless
- Frustrated, angry
- Anxious, afraid
- Hopeless, depressed

PHYSICAL SENSATIONS

- Tension
- Heart pounding, sweating,
- Sick in the pit of your stomach

2. CBT for insomnia: Reframing unhelpful thoughts

Thoughts

- It's normal to wake up at night
- Sleep is a biological necessity. I will sleep if I need it.
- I've coped with little sleep before. I know I'll be OK.

Behaviours

- Count slow breaths, e.g .1,2 breathing
- Paradoxical intention
- If not sleepy after 20 minutes, get out of bed and do something dull until sleepy



Emotions

- Calm, content
- Confident
- In control

Physical sensations



- Tension leaving the body
- Long, slow breaths
- Relaxed
- Comfortable

2. CBT for Anxiety: Cognitive reframing

What would you tell your best friend?

Automatic thought

I'm losing my mind and losing control!

I'm a burden on people

Cognitive reframe

I feel vulnerable and can notice that I'm having the thoughts 'what if I lose control'...
These thoughts are just thoughts.
They will pass.

Everyone goes through tough times in their life. This is mine. In the future I'll be able to help others going through this.

3. CBT for Anxiety & Insomnia: Checking in – seeing improvements over time

Sleep diary & habit tracker

Print me out and stick on the fridge for a daily nudge. Fill in your planned wake up and ready-for-bed times at the start of the week. Choose up to 3 pro recovery habits to keep track of. At breakfast each morning, tick successes, and feel good about any successes!

Start date:	Example	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Target wake up time? (Get out of bed within 10 minutes for a tick)	6:30пт							
What's your target bed time? (Only sleep when sleepy)	10:36рт							
How many hours were you in bed for last night?	8 hours							
How many times did you wake up? How long for in total?	2 (0.5hr)							
How many hours were you actually asleep for?	7 hours							
What was your Sleep Efficiency? - hrs sleep/in bed'100	88%							
1. e.g. get outside for 20 min	Υ							
2. e.g. no eating 2hr before bed	Υ							
3. e.g. phone out of bedroom	Υ							
Rate your energy yesterday: 10-best ever, 0 - none	8, good day!							



Anxiety attack tracker

ZIS THE SLEEP SCIENTIST

If you experience acute anxiety symptoms, or panic attacks, keep a track of the triggers, symptoms and any helpful strategies which helped you to overcome them

Date & time	Trigger(s)	Physical symptoms	Thoughts & emotions	Intensity 0-10	Duration (min)	Strategies
Example. Wed 19/1, 10am	Walking to shops, stressed	High HR, sweating, short of breath, dizzy, nausea, chest pain	Fear of heart attack	9	20	Tried to keep walking. Grounding – identified 5 things to see, hear & feel

@ TheSleepScientist.com

4. CBT-I & A: Practice switching off the stress response

What helps you to switch off your stress response?



Having fun, laughter

Meditation

Deep breathing practice

Warm bath or shower

Having a massage

Gentle exercise

Being in nature

Cooking wholesome food

Yoga or Tai Chi

Crafts, colouring, so doku

Cold immersion

How can you improve your cold tolerance? Wim Hof method combines hypoxic breathing techniques, meditation and cold showers Start with 10 seconds cold shower, increase gradually to 3 minutes Kox et al 2014 Voluntary activation of the sympathetic nervous system and attenuation of the innate immune response in humans Mercer (2022): "Health effects of voluntary exposure to cold water — a continuing subject of debate."

5. Get physical

The most powerful antidepressant, with positive side effects?

Lowers inflammation, boosts serotonin, releases endorphins, boosts brain cell repair, improves sleep quality

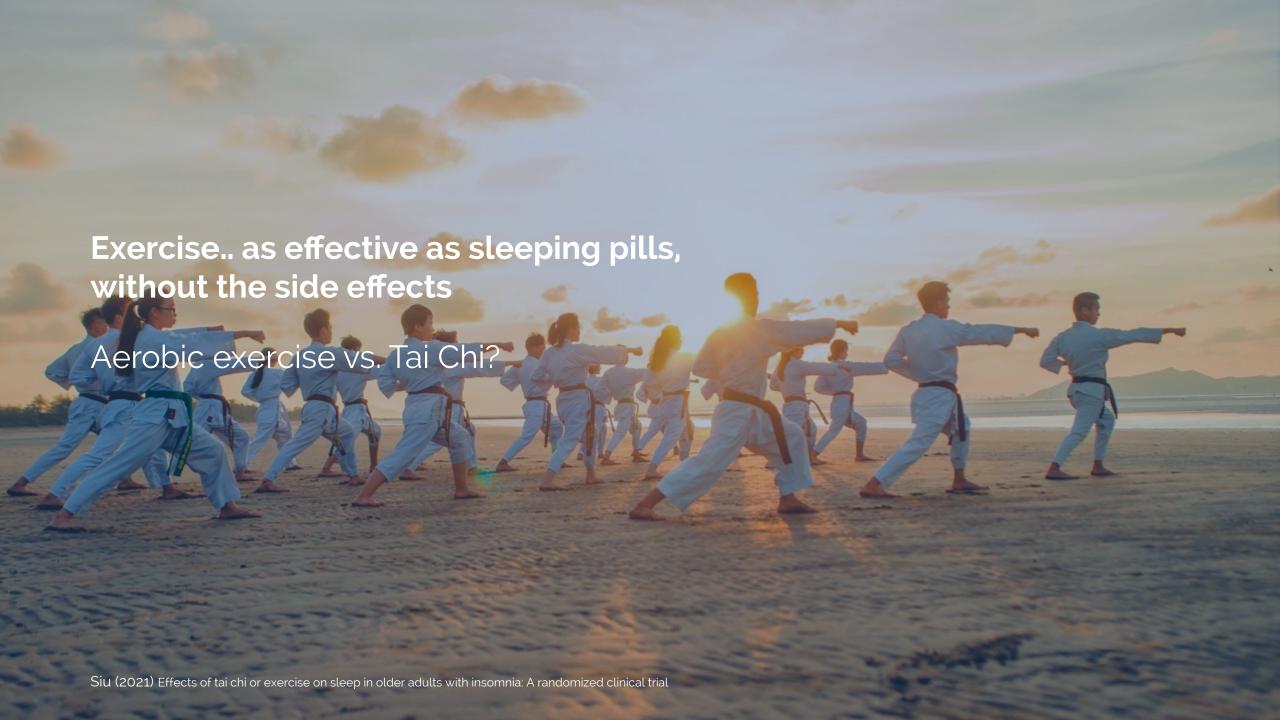
- Builds sleep pressure
- Sends an alerting signal to the master clock

Short of time?

HIIT, but not before bed

- 7 minutes, 2-3 times a week
- 30 sec on, 10 sec rest

Recchia (2022) Comparative effectiveness of exercise, antidepressants and their combination in treating non-severe depression: a systematic review and network meta-analysis of randomised controlled trials



6. Mindful approaches for addressing thoughts...

Adopt an attitude of curiosity and non-judgmental acceptance – notice thoughts, and let them go

Training the brain to improve awareness and attention



HHS Public Access

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Mindfulness on-the-go: Effects of a mindfulness meditation app on work stress and well-being

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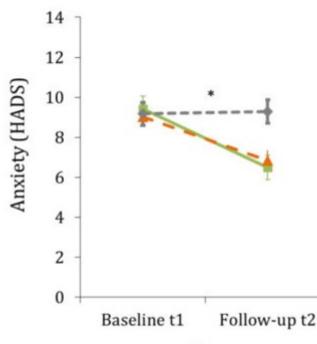
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Abstract

We investigated whether a mindfulness meditation program delivered via a smartphone application

(app) could improve psychological we" pressure during the workday. Participa companies that were randomized to a condition. The app offered 45 pre-rece were asked to complete one meditation throughout one working day, were me also emailed to participants 16 weeks the 8-week intervention period, partici of 17 meditation sessions (range 0 to 4 improvement in well-being, distress, jcompared to the control group. In add decrease in self-measured workday sy Sustained positive effects in the interv 16-week follow-up assessment. This t delivered via smartphone and practice work stress and well-being, with poter



Time

d.



Wholegrains, vegetables (6/day), fruit (3/day), dairy (2/day), raw unsalted nuts (1/day), lean red meat, chicken, eggs, olive oil (daily), wine (up to 2 glasses), max 3 servings per week 'extras'



8. Social support, helping behaviours, and the absence of loneliness

Decrease in social behaviours after a sleepless night.. social withdrawal, reduced helping, and a fall in charitable donations.

Sleeping badly? Be more sociable, not less. Be proactive about helping others!

