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Insomnia: Can relaxation therapies or training to change sleep habits help?



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Everyone has a bad night's sleep every now and then, especially before an important event or if we are very worried. But if you have problems sleeping on more than three nights a week and this goes on for longer than one month, you may have chronic insomnia (sleeplessness). To help you get an idea of what normal sleep is at different ages, we have summed up the research on that for you here (URL:

<http://www.informedhealthonline.org/index.409.en.html>).

Insomnia is a common problem: about 20 out of 100 people are probably affected (20%). They may have problems getting to sleep, wake up several times during the night or wake up much too early in the morning. This can leave the person feeling tired or irritable during the day, and they could have trouble concentrating. People with insomnia are also more likely to have accidents.

There are many reasons why people develop insomnia. It could be caused by an illness like depression or anxiety, but also by shift work or a life crisis. Insomnia can in turn cause depression and other psychological problems.

People may try out many things to help themselves sleep better, including exercise, complementary therapies and traditional techniques (like drinking warm milk before bedtime), autogenic training, bright light therapy and medications ("sleeping pills"). This summary will focus on behavioural and relaxation therapies.

Do behavioural and relaxation therapies help?

Researchers from the University of Alberta in Canada were commissioned by the US Agency for Healthcare Research and Quality to study and summarise the evidence about treatments for chronic insomnia in adults. One of their questions was whether or not behaviour and relaxation therapies help people with insomnia sleep better and/or longer. The researchers found 21 trials that looked at many different therapies, and were mostly only small trials. Altogether, relaxation techniques were tested in under 400 people and behavioural therapies were tested in less than 300 people. All of the participants had insomnia that was not caused by a medical condition and they were all over 18 years old, but only a few were older than 60. Most of them were women.

The researchers concluded that relaxation therapy could help people sleep longer, but the quality of their sleep did not really improve. The benefit mainly came from getting to sleep more quickly. The therapies that worked in these trials were breathing training and training people in self-hypnosis. The typical amount of training that people received was one session a week for four weeks.

The various types of behaviour training in the trials were so different from each other, that it is really not possible to conclude much with certainty about these types of treatments. In these trials, people did not really sleep much longer in general, but there was an improvement in the quality of their sleep. That is, they did not get to sleep more quickly or sleep for longer, but while they did sleep, they slept more soundly and woke up less often during the night. Again, the typical amount of training involved was one session a week for four weeks.

Many different techniques were used, ranging from one trial with an envelope of instructions about what to do every morning and every night, to a course of training sessions on habits like "stimulus control" (where you use the bed only for sleeping and sex and avoiding reading, eating or watching TV in bed).

Evidence suggests that certain approaches can help, but more research is needed

It seemed from these trials as though relaxation training might have had better results than the behaviour change training, but it is too soon to know which treatments will turn out to be better than others. To be sure about this, good-quality trials with enough people in them need to compare different types of treatment with each other. There has also been very little research comparing these therapies with "sleeping pills". And it is not clear whether a combination of different treatments in a training package would perhaps make a bigger difference to people's sleep.

The researchers said that none of the trials reported whether people had adverse effects from the relaxation or behaviour training. They also concluded that the trials have not shown that longer training courses are needed. The trials did not follow people up for a long time after they had the training, so we do not know whether the insomnia returned.

If you want to manage your insomnia without medication of any kind, the trials provide some clues as to what

might help. The research suggests that if you are having a lot of trouble getting to sleep, learning the techniques of progressive muscle relaxation might help. Changing your sleep habits could help you sleep more soundly through the night - but it is not yet clear exactly which out of the different sleep habit methods is most worth trying. You can read more about them in our fact sheet (URL: <http://www.informedhealthonline.org/index.411.en.html>).

Glossary

evidence

Evidence is what we call scientific proof from well-conducted, good-quality scientific trials that have been carefully designed to answer specific questions. Depending on the types of questions, different scientific research methods (types of study) are most appropriate to find reliable answers to these questions. Randomized controlled trials (RCTs), for example, are the best way to get reliable evidence on the effectiveness of medical treatments (interventions). This type of study, however, is not the best form of evidence for all possible questions, and does not provide the best answers to all kinds of questions, either. Epidemiological studies, for example, are very suitable for establishing well-founded proof for the spreading of a disease in the population.

depression

Depression is one of the most common mental illnesses, and it can be mild, moderate or serious. There are several different types of depression that can be recognised by different signs. Which symptoms of depression occur and how strong and frequent they are vary from person to person. People in any social or age group can be affected, both women and men. If someone has had at least two of the following symptoms for longer than two weeks, it might mean that they are depressed: deep sadness; listlessness; loss of interest in the things they usually care about.

Agency for Healthcare Research and Quality

The Agency for Healthcare Research and Quality (AHRQ) is an agency of the US Department of Health and Human Services. Its mission is to improve the quality, safety, efficiency, and effectiveness of health care for all Americans. Information from AHRQ's research aims to help people make more informed decisions and to improve the quality of health care services. AHRQ was formerly known as the Agency for Health Care Policy and Research. You can read more about AHRQ at its website: www.ahrq.gov

Sources

Agency for Healthcare Research and Quality (AHRQ). *Manifestation and management of chronic insomnia in adults. Evidence Report/Technology Assessment Number 125*. Rockville: AHRQ. 2005. [Full text (URL: <http://www.ahrq.gov/downloads/pub/evidence/pdf/insomnia/insomnia.html>)]

The German Institute for Quality and Efficiency in Health Care (IQWiG)

The German Institute for Quality and Efficiency in Health Care (IQWiG) was established by legislation to provide evaluations of the effectiveness, quality and efficiency of healthcare services. This includes the assessment of medicines as well as the publication of health information for consumers and patients.

Evidence basis of our health information

Our information is based primarily on systematic reviews of the effects of health care. Systematic reviews are necessary to gain an objective picture of health care. In order to do this, a clear question is formulated. Researchers then find all the relevant studies that could answer this question. They then evaluate those studies.

You can find a list of the evidence and other scientific literature on which this information is based at [**www.informedhealthonline.org**](http://www.informedhealthonline.org)

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