

Stimulus Control



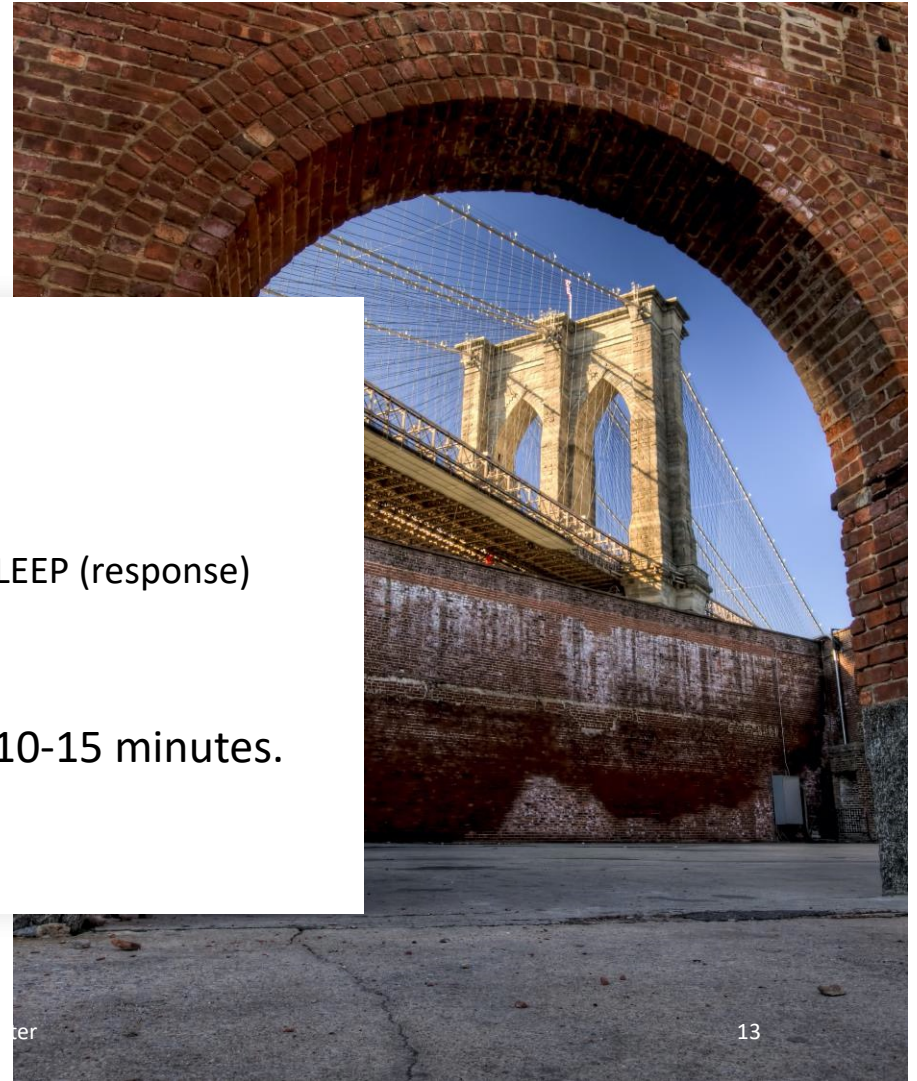
- Based on Classical conditioning



- Trains the brain that BED (stimulus) = SLEEP (response)



1. Bed only for sleep or sex.
2. Get out if awake for more than 10-15 minutes.
3. Return only when sleepy
4. Repeat as needed.



Cognitive therapy



- **Education** is a major part

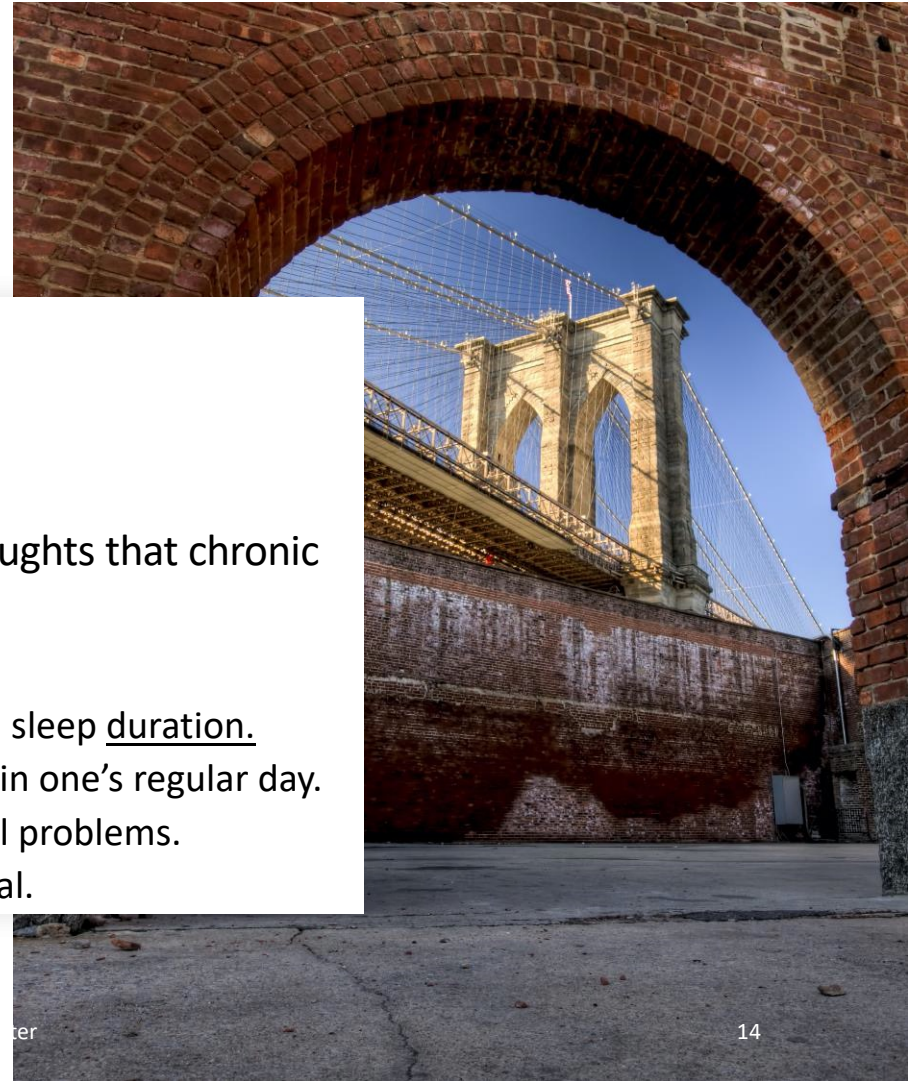


- Targets worry and perpetuating thoughts that chronic insomniacs develop over time



- Essential topics include:

1. Setting expectations around “healthy” sleep duration.
2. Sleep is not the most important point in one’s regular day.
3. Sleep is not the ultimate solution to all problems.
4. Trying harder to sleep increases arousal.



Sleep Restriction

- **Most difficult** part



Establish a rigid routine of sleep and wake time, based on current sleep efficiency.



- Clients are instructed not to sleep at certain times, no naps (i.e partial sleep deprivation)



- **Contraindicated** in:

1. Bipolar disorder
2. Parasomnias
3. Obstructive Sleep Apnea
4. Epilepsy

