

Teen insomnia is linked with depression and anxiety

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A study of high school students by University of Adelaide psychology researchers has shed new light on the links between insomnia-related mental health conditions among teens.

School of Psychology PhD student Pasquale Alvaro surveyed more than 300 Australian <u>high</u> <u>school</u> students aged 12-18 to better understand their <u>sleep habits</u>, mental health condition and the time of day they were most active (known as their "chronotype").

The results, now published in the journal *Sleep Medicine*, may have implications for the clinical treatment of teens experiencing sleep and <u>mental</u> <u>health issues</u>.

"People with insomnia find it difficult to fall asleep or stay asleep for as long as they need to. This is a widespread sleep disorder among the general public, and in most countries about 11% of teens aged 13-16 years experience insomnia at some stage," Mr Alvaro says.

"There is a growing awareness among the scientific community that insomnia, depression and anxiety disorders are linked with each other, and these disorders contain overlapping neurobiological, psychological, and social risk factors.

"Having insomnia in addition to anxiety or depression can further intensify the problems being experienced with each individual disorder. It can lead to such problems as alcohol and drug misuse during adolescence," he says.

Mr Alvaro's study found that the presence of insomnia was independently linked with depression, <u>generalized anxiety disorder</u> and panic disorder among teens.

Teens who were more active in the evenings were more likely to have depression and/or insomnia.

This group was also more likely to have obsessivecompulsive disorder, separation anxiety, and social phobia, although these disorders were often not independently linked with insomnia.

"These findings suggest that the 'eveningness' chronotype – being more active in the evenings – is an independent risk factor for insomnia and depression. This is important because adolescents tend to develop a preference for evenings, which sometimes becomes a syndrome whereby they keep delaying going to sleep," Mr Alvaro says.

"Based on our evidence, we believe that prevention and treatment efforts for insomnia and depression should consider this combination of <u>mental health</u>, sleep, and the eveningness chronotype, in addition to current mainstream behavioral approaches. Prevention and treatment efforts for anxiety subtypes should also consider focusing on insomnia and depression."

More information: *Sleep Medicine*, <u>DOI:</u> <u>10.1016/j.sleep.2014.03.019</u>

Provided by University of Adelaide



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