

People who worry about insomnia have more health problems than non-worriers, study finds

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People who worry about poor sleep have more emotional and physical problems during the day than those who do not worry, regardless of how well either sleep, according to research conducted at The University of Alabama.

In a review of more than a dozen sleep studies going back more than 20 years, Dr. Kenneth Lichstein, UA professor of psychology, defines something he calls insomnia <u>identity</u>, a person's conviction of having <u>poor sleep</u>. This belief is more indicative of poor health outcomes than poor sleep, he finds.

"We can independently assess people's view of their sleep and their sleep. Insomnia identity is a more potent predictor of daytime impairment than poor sleep," said Lichstein, who has researched sleep for more than 30 years.

The findings were published in October in the journal Behaviour Research and Therapy.

Insomnia is understood as a sleep disorder marked by regular, extended periods of being awake during normal sleep times that increases risk for conditions such as depression, anxiety, hypertension, fatigue and suicidal thoughts.

However, Lichstein's review of sleep studies shows insomnia is also a psychological disorder as those who reported <u>sleep problems</u>, even if they slept well, had insomnia's effects. In fact, people with poor sleep who are not worried about it, called noncomplaining poor sleepers, reported healthier outcomes than those with insomnia identity, according to the paper.

"We thought that poor sleep and insomnia are linked, but now we know this is a soft link," he said. "There are clearly people with poor sleep who are relaxed about it, letting it roll off their back, and they are at low risk for impaired functioning. Insomnia identity drives the daytime dysfunction, not the sleep."

About a third of <u>people</u> who complain of insomnia sleep well, according to the research. Lichstein said insomnia identity comes from anxiety about not getting what the person believes to be perfect sleep such as taking longer to fall asleep or awaking briefly during sleep, even if these are minor problems that, overall, do not constitute actual sleep deprivation.

"Insomnia identity drives worry, and worry is the fuel of stress," Lichstein said. "That stress has physical effects on our life."

In his paper, Lichstein lays out direction for more research on this topic, and he suggests treatments such as cognitive behavioral therapy, meditation, or conversations about sleep perceptions with those who have an insomnia identity.



"This proposes a new way of looking at insomnia," he said. "These findings have been out there, but have never been organized and their implications have not previously been clearly focused on. It's helpful to re-conceptualize our view of insomnia in such a way that focuses on the critical clinical aspects of the disorder."

More information: Kenneth L. Lichstein. Insomnia identity, *Behaviour Research and Therapy* (2017). DOI: 10.1016/j.brat.2017.08.005

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