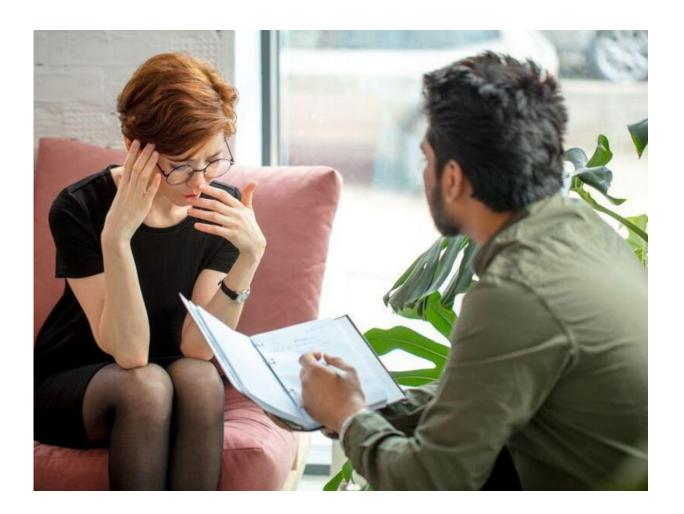


Group therapy for insomnia studied in rheumatoid arthritis patients

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For patients with rheumatoid arthritis (RA) and insomnia, nurse-led



group-based cognitive behavioral therapy for insomnia (CBT-I) does not have an impact on sleep efficiency measured immediately after the intervention, but does improve patient-reported key secondary sleep and RA outcomes, according to a study published online Aug. 11 in *Rheumatology*.

Kristine M. Latocha, Ph.D., from Copenhagen University Hospital-Rigshospitalet in Denmark, and colleagues conducted a <u>randomized</u> <u>controlled trial</u> to compare the effect of CBT-I with usual care on <u>sleep</u> <u>efficiency</u>, measured by polysomnography (PSG) at week seven, immediately after the intervention. The experimental intervention was six weeks of nurse-led group-based CBT-I, and the comparator was usual care. The intention-to-treat population comprised 62 patients (average sleep efficiency, 83.1 percent).

The researchers found that sleep efficiency as measured by PSG at week seven was 88.7 and 83.7 percent in the CBT-I and control groups, respectively. At week 26, there was no improvement in key secondary outcomes measured by PSG. However, statistically significant differences were seen between CBT-I and usual care for all patientreported key secondary sleep- and RA-related outcomes at week 26, including insomnia and the RA impact of disease.

"CBT-I can potentially induce clinically meaningful effects on patientreported outcomes—a finding that could have important clinical implications among patients with RA and insomnia," the authors write.

More information: Kristine M Latocha et al, The effect of groupbased cognitive behavioural therapy for insomnia in patients with rheumatoid arthritis: a randomized controlled trial, *Rheumatology* (2022). <u>DOI: 10.1093/rheumatology/keac448</u>



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