



**Office:** 337-349-6655 or 1-888-431-2449  
**Fax:** 1-833-561-2443

## ***Sleep Restriction Therapy***

*Sleep Restriction Therapy* is based on the observation that insomniacs tend to spend more time in bed than necessary. Many individuals with chronic insomnia engage in behaviors that contribute to insomnia. For example, someone may stay in bed when unable to sleep with the rationale that "at least I am resting" or "if I am in bed long enough, I will eventually get some sleep."

The goal with sleep restriction therapy is to do the opposite... to reduce the amount of time spent in bed to consolidate sleep. This method may take 3 or 4 weeks before it is effective, so be patient. Eventually you will find that you are *trying to stay awake*, rather than *trying to fall asleep*, which will help to reduce the anxiety usually associated with insomnia and improve your sleep efficiency (the amount of time spent sleeping while in bed). ***This method is not appropriate if you have severe daytime sleepiness. Use caution (i.e., driving) due to the initial sleep deprivation that is required.***

### **Sleep Restriction Therapy Instructions:**

1. Stay in bed for only the amount of time (hours) that you think you sleep. For example...if you think you only sleep 5 hours per night, then only stay in bed for 5 hours. ***Do not plan less than 5 hours in bed. DO NOT GO TO BED EARLY.*** Set a sleep time **Ex. 12 PM – 6 AM (6 Hours)**
2. You **MUST** get up **AT THE SAME TIME EVERY DAY**, no matter how much sleep you got the night before. Use your alarm clock. The time you go to bed depends on the time you set to get out of bed. **DO NOT CHECK TIME ONCE IN ROOM TO SLEEP. DO NOT LOOK AT A CLOCK OR THE PHONE DURING YOUR SLEEP TIME.**
3. **DO NOT NAP DURING THE DAY.** If you feel exhausted or drowsy, get up and do something physical (walk, ride bike, pull weeds, etc.).
4. Bright light is the most powerful controller of the sleep-wake cycle. **GET LIGHT EXPOSURE** for 30 minutes every morning. Go outside for sunshine or use a light box (10,000 Lux), or full-spectrum daylight bulbs if sunshine is not available.
5. After 2-3 days, if your sleep efficiency has improved (i.e., you are sleeping **MOST** of the time in bed), you then go to bed 30 minutes earlier. **WAKING UP ONCE OR TWICE AND GETTING BACK TO SLEEP QUICKLY IS NORMAL.**
6. Sleep **ONLY FOR THE TIME SPECIFIED**, even if you could sleep more. **DO NOT SLEEP LATER** under any circumstances. **Use an ALARM to wake you up.**

*Relapse prevention...* If the problem of initiating sleep returns, start over again by reducing the time spent in bed. People who are good sleepers will occasionally have a night or two of insomnia. If you have a bad night or two, it does not mean your problem will become chronic again. If your problem lasts more than 2 or 3 days, start a sleep diary and begin sleep restriction therapy again. Contact your doctor if the insomnia persists for more than 2-3 weeks.