

Cognitive behavioral therapy for insomnia (CBT-I) should be the first line of treatment when addressing chronic sleep problems. Unlike pharmacological treatments, CBT-I helps patients overcome the underlying causes of their sleep problems through cognitive restructuring and behavioral modifications. Patients may also find the use of mobile apps helpful to develop and maintain positive sleep habits.

Common CBT-I Techniques

The below recommendations were prepared in consultation with [Dr. Katie Angelova, MD](#), Assistant Professor of Psychiatry, Consultation-Liaison Psychiatry Division, Icahn School of Medicine at Mount Sinai. Dr. Angelova uses the following guidelines developed by [Mayo Clinic](#).

Stimulus control therapy

Remove factors that condition your mind to resist sleep. Examples include setting consistent sleep and wake times, using the bed only for sleep and sex, and leaving the bedroom if unable to fall asleep in a designated amount of time.

Sleep restriction

Reduces the amount of time spent in bed causing partial sleep deprivation and making the patient more tired the following night.

Sleep hygiene

Changing basic lifestyle habits to support healthy sleep. Review these [sleep hygiene guidelines](#) with your patients to promote healthier habits.

Sleep environment improvement

Create a comfortable sleep environment by keeping the bedroom quiet, dark, and cool, television-free, and clock out of view.

Relaxation training

Meditation, muscle relaxation, or other methods to calm the mind and body.

Remaining passively awake

Stress about not sleeping makes it more difficult to actually fall asleep; letting go of this worry may help with relaxation and ability to fall asleep.

Mobile Apps

The VA has developed two mobile apps that patients may use to help create and maintain positive sleep habits.

[CBT-i Coach](#) can help develop positive sleep routines and improved sleep environments. It also includes relaxation tools and a sleep diary to track wake and sleep times. CBT-i Coach can be used independently, but it is not intended to replace clinical care for those who need it.

[Insomnia Coach](#) can be used as a stand-alone education and self-care tool, or as an adjunct to clinical care. Insomnia Coach begins with a 5-week training plan; after completion the patient can continue to use it for tracking and maintenance.