WEBVTT

NOTE duration: "00:58:39.4880000"

NOTE language:en-us

NOTE Confidence: 0.83658075

00:00:22.530 --> 00:00:24.428 OK, hello everyone. I'm Bri

NOTE Confidence: 0.83658075

 $00:00:24.428 \longrightarrow 00:00:26.690$ and minor I'm subbing in today

NOTE Confidence: 0.83658075

 $00:00:26.762 \longrightarrow 00:00:28.019$ for Lauren Tobias,

NOTE Confidence: 0.83658075

 $00{:}00{:}28.020 \dashrightarrow 00{:}00{:}30.757$ who will be working in the ICU.

NOTE Confidence: 0.83658075

 $00{:}00{:}30.760 \dashrightarrow 00{:}00{:}33.336$ Thank you to her for her service

NOTE Confidence: 0.83658075

 $00:00:33.336 \longrightarrow 00:00:35.753$ and I'd like to welcome you

NOTE Confidence: 0.83658075

00:00:35.753 --> 00:00:38.207 all to our Yale Sleep Seminar,

NOTE Confidence: 0.83658075

 $00{:}00{:}38.210 \dashrightarrow 00{:}00{:}40.170$ afew brief announcements before I

NOTE Confidence: 0.83658075

00:00:40.170 --> 00:00:41.738 introduce today's speaker first,

NOTE Confidence: 0.83658075

 $00:00:41.740 \longrightarrow 00:00:43.700$ please take a moment to

NOTE Confidence: 0.83658075

 $00:00:43.700 \longrightarrow 00:00:45.660$ ensure that you are muted.

NOTE Confidence: 0.83658075

 $00:00:45.660 \longrightarrow 00:00:48.796$ I think we all know from our

NOTE Confidence: 0.83658075

 $00:00:48.796 \longrightarrow 00:00:50.692$ zoom experience that this

NOTE Confidence: 0.83658075

 $00:00:50.692 \longrightarrow 00:00:52.977$ is a very important step.

 $00:00:52.980 \longrightarrow 00:00:54.690$ In order to receive CME

NOTE Confidence: 0.83658075

 $00:00:54.690 \longrightarrow 00:00:55.716$ credit for attendance,

NOTE Confidence: 0.83658075

 $00:00:55.720 \longrightarrow 00:00:58.107$ please see the chat room for instructions.

NOTE Confidence: 0.83658075

00:00:58.110 --> 00:01:00.886 You can text the unique ID for this

NOTE Confidence: 0.83658075

 $00:01:00.886 \longrightarrow 00:01:03.057$ conference anytime until 3:15 PM if

NOTE Confidence: 0.83658075

 $00{:}01{:}03.057 \dashrightarrow 00{:}01{:}05.630$ you're not already registered with the LC ME.

NOTE Confidence: 0.83658075

 $00:01:05.630 \longrightarrow 00:01:09.200$ You will need to do so first.

NOTE Confidence: 0.83658075

 $00:01:09.200 \longrightarrow 00:01:10.628$ If you have questions

NOTE Confidence: 0.83658075

00:01:10.628 --> 00:01:11.699 during the presentation,

NOTE Confidence: 0.83658075

 $00:01:11.700 \longrightarrow 00:01:13.480$ if they are burning questions,

NOTE Confidence: 0.83658075

 $00:01:13.480 \longrightarrow 00:01:15.979$ you may put them in the chat.

NOTE Confidence: 0.83658075

00:01:15.980 --> 00:01:17.836 Otherwise our speaker kindly

NOTE Confidence: 0.83658075

 $00{:}01{:}17.836 \dashrightarrow 00{:}01{:}20.156$ requests that you leave questions

NOTE Confidence: 0.83658075

 $00:01:20.156 \longrightarrow 00:01:22.079$ till the end of the talk.

NOTE Confidence: 0.83658075

00:01:22.080 --> 00:01:24.516 A recorded version of this lecture

 $00:01:24.516 \longrightarrow 00:01:26.903$ will be available online within two

NOTE Confidence: 0.83658075

 $00:01:26.903 \longrightarrow 00:01:29.655$ weeks at the link provided in the chat,

NOTE Confidence: 0.83658075

 $00:01:29.660 \longrightarrow 00:01:30.842$ and finally, Pete.

NOTE Confidence: 0.83658075

 $00:01:30.842 \longrightarrow 00:01:33.206$ Please feel free to share the

NOTE Confidence: 0.83658075

 $00:01:33.206 \longrightarrow 00:01:35.019$ announcements for this weekly lecture

NOTE Confidence: 0.83658075

00:01:35.019 --> 00:01:37.999 series to anyone else who may be interested,

NOTE Confidence: 0.83658075

00:01:38.000 --> 00:01:39.890 or contact Debbie Lovejoy to

NOTE Confidence: 0.83658075

 $00:01:39.890 \longrightarrow 00:01:41.921$ be added to our email lists.

NOTE Confidence: 0.83658075

 $00:01:41.921 \longrightarrow 00:01:44.000$ So now I will move on to

NOTE Confidence: 0.83658075

00:01:44.075 --> 00:01:45.959 introduce today's speaker,

NOTE Confidence: 0.83658075

00:01:45.960 --> 00:01:47.073 doctor Jason Ellis,

NOTE Confidence: 0.83658075

 $00{:}01{:}47.073 \dashrightarrow 00{:}01{:}50.522$ who is hailing all the way from the United

NOTE Confidence: 0.83658075

 $00:01:50.522 \longrightarrow 00:01:53.238$ Kingdom to join us for our afternoon.

NOTE Confidence: 0.83658075

 $00:01:53.240 \longrightarrow 00:01:55.265$ His early evening.

NOTE Confidence: 0.83658075

 $00:01:55.265 \longrightarrow 00:01:57.290$ So doctor Ellis.

NOTE Confidence: 0.83658075

 $00:01:57.290 \longrightarrow 00:01:59.624$ Has done all of his training

 $00:01:59.624 \longrightarrow 00:02:01.180$ in the United Kingdom,

NOTE Confidence: 0.83658075

 $00:02:01.180 \longrightarrow 00:02:03.580$ first starting with a bachelors degree

NOTE Confidence: 0.83658075

 $00:02:03.580 \longrightarrow 00:02:05.976$ in psychology and clearly had an

NOTE Confidence: 0.83658075

 $00:02:05.976 \longrightarrow 00:02:08.178$ interest in insomnia from the beginning.

NOTE Confidence: 0.83658075

 $00:02:08.180 \longrightarrow 00:02:09.756$ He did his dissertation,

NOTE Confidence: 0.83658075

 $00:02:09.756 \longrightarrow 00:02:11.726$ which was entitled is chronic

NOTE Confidence: 0.83658075

00:02:11.726 --> 00:02:13.629 insomnia a resource loss spiral?

NOTE Confidence: 0.83658075

00:02:13.630 --> 00:02:16.038 He went on to do his Masters work

NOTE Confidence: 0.83658075

00:02:16.038 --> 00:02:18.493 at the University of Surry where

NOTE Confidence: 0.83658075

 $00{:}02{:}18.493 \dashrightarrow 00{:}02{:}21.157$ he studied the role of rumination

NOTE Confidence: 0.83658075

 $00:02:21.234 \longrightarrow 00:02:23.264$ and thought control and sleep

NOTE Confidence: 0.83658075

 $00{:}02{:}23.264 \dashrightarrow 00{:}02{:}25.704$ disturbance and he got a PhD

NOTE Confidence: 0.83658075

00:02:25.704 --> 00:02:28.128 also at the University of Surry.

NOTE Confidence: 0.83658075

00:02:28.130 --> 00:02:29.814 Looking at the cognitive

NOTE Confidence: 0.83658075

00:02:29.814 --> 00:02:31.498 consolidation model of insomnia,

 $00:02:31.500 \longrightarrow 00:02:34.326$ an examination of the predictors and

NOTE Confidence: 0.83658075

 $00{:}02{:}34.326 \dashrightarrow 00{:}02{:}36.980$ consequences of late life insomnia.

NOTE Confidence: 0.83658075

00:02:36.980 --> 00:02:37.706 And finally,

NOTE Confidence: 0.83658075

 $00:02:37.706 \longrightarrow 00:02:40.247$ in 2014 he was recognized by the

NOTE Confidence: 0.83658075

 $00{:}02{:}40.247 \dashrightarrow 00{:}02{:}42.868$ European Sleep Research Society as an

NOTE Confidence: 0.83658075

 $00:02:42.868 \longrightarrow 00:02:45.053$ expert in behavioral Sleep Medicine.

NOTE Confidence: 0.83658075

 $00:02:45.060 \longrightarrow 00:02:47.573$ He now serves as a professor of

NOTE Confidence: 0.83658075

 $00:02:47.573 \longrightarrow 00:02:50.287$ sleep science and the director of

NOTE Confidence: 0.83658075

 $00{:}02{:}50.287 \dashrightarrow 00{:}02{:}52.887$ the Sleep Research Laboratory at

NOTE Confidence: 0.83658075

 $00:02:52.887 \longrightarrow 00:02:54.959$ Northumbria University in Newcastle.

NOTE Confidence: 0.83658075

 $00{:}02{:}54.960 \dashrightarrow 00{:}02{:}56.616$ He has editorial appointments

NOTE Confidence: 0.83658075

00:02:56.616 --> 00:02:58.686 for journals of Behavioral Sleep

NOTE Confidence: 0.83658075

00:02:58.686 --> 00:03:00.149 Medicine and sleep health.

NOTE Confidence: 0.83658075

 $00:03:00.150 \longrightarrow 00:03:02.050$ He serves on committees for

NOTE Confidence: 0.83658075

00:03:02.050 --> 00:03:03.950 the Sleep Research Society and

NOTE Confidence: 0.83658075

 $00{:}03{:}04.023 \dashrightarrow 00{:}03{:}05.727$ the British Sleep Society.

 $00:03:05.730 \longrightarrow 00:03:07.850$ He has many different interests

NOTE Confidence: 0.83658075

 $00:03:07.850 \longrightarrow 00:03:10.919$ that have been sort of that I was,

NOTE Confidence: 0.83658075

00:03:10.920 --> 00:03:11.716 you know,

NOTE Confidence: 0.83658075

00:03:11.716 --> 00:03:14.502 looking through in his very long CV,

NOTE Confidence: 0.83658075

 $00:03:14.510 \longrightarrow 00:03:17.542$ and so I just wanted to to highlight

NOTE Confidence: 0.83658075

 $00:03:17.542 \longrightarrow 00:03:20.496$ a couple here that I thought were,

NOTE Confidence: 0.83658075

00:03:20.500 --> 00:03:22.490 you know, recent and interesting.

NOTE Confidence: 0.83658075

 $00:03:22.490 \longrightarrow 00:03:24.902$ He is looking at optimizing sensory

NOTE Confidence: 0.83658075

 $00:03:24.902 \longrightarrow 00:03:27.190$ information for sleep in toddlers.

NOTE Confidence: 0.83658075

 $00{:}03{:}27.190 \dashrightarrow 00{:}03{:}29.566$ The effects of a multi ingredient

NOTE Confidence: 0.83658075

 $00{:}03{:}29.566 \dashrightarrow 00{:}03{:}32.096$ night time tea on sleep quality well

NOTE Confidence: 0.83658075

 $00:03:32.096 \longrightarrow 00:03:34.700$ being an markers of immune function.

NOTE Confidence: 0.83658075

 $00{:}03{:}34.700 \dashrightarrow 00{:}03{:}36.878$ He is looking at development of

NOTE Confidence: 0.83658075

 $00:03:36.878 \longrightarrow 00:03:38.865$ of a fatigue management program

NOTE Confidence: 0.83658075

 $00:03:38.865 \longrightarrow 00:03:41.210$ for training health care personnel

 $00:03:41.210 \longrightarrow 00:03:42.617$ following shift work.

NOTE Confidence: 0.83658075

 $00{:}03{:}42.620 \dashrightarrow 00{:}03{:}44.152$ Behavioral treatment for insomnia

NOTE Confidence: 0.83658075

 $00{:}03{:}44.152 \dashrightarrow 00{:}03{:}46.957$ in a dults with autism and he has

NOTE Confidence: 0.83658075

 $00{:}03{:}46.957 {\:\dashrightarrow\:} 00{:}03{:}48.713$ interesting projects and consulting

NOTE Confidence: 0.83658075

 $00:03:48.713 \longrightarrow 00:03:50.908$ looking at determining the most

NOTE Confidence: 0.8455968

 $00:03:50.973 \longrightarrow 00:03:52.209$ super riffic reason,

NOTE Confidence: 0.8455968

 $00{:}03{:}52.210 \dashrightarrow 00{:}03{:}53.878$ anthems and developing evidence

NOTE Confidence: 0.8455968

 $00:03:53.878 \longrightarrow 00:03:55.546$ based sleep hygiene guidelines.

NOTE Confidence: 0.8455968

 $00{:}03{:}55.550 \dashrightarrow 00{:}03{:}58.469$ He has over 50 peer reviewed publications,

NOTE Confidence: 0.8455968

00:03:58.470 --> 00:04:00.630 multiple book chapters. Anna book.

NOTE Confidence: 0.8455968

 $00{:}04{:}00.630 \dashrightarrow 00{:}04{:}02.556$ Called the one week Insomnia cure

NOTE Confidence: 0.8455968

 $00:04:02.556 \longrightarrow 00:04:04.500$ learned to solve your sleep problems

NOTE Confidence: 0.8455968

 $00:04:04.500 \longrightarrow 00:04:06.884$ and he has been invited as a key note

NOTE Confidence: 0.8455968

00:04:06.944 --> 00:04:08.980 speaker for multiple professional

NOTE Confidence: 0.8455968

 $00:04:08.980 \longrightarrow 00:04:10.507$ societies and universities.

NOTE Confidence: 0.8455968

 $00:04:10.510 \longrightarrow 00:04:11.974$ An multiple public engagement

00:04:11.974 --> 00:04:14.170 talks and in fact Doctor Tobias,

NOTE Confidence: 0.8455968

 $00{:}04{:}14.170 \longrightarrow 00{:}04{:}16.634$ who couldn't be here today, saw him,

NOTE Confidence: 0.8455968

 $00:04:16.634 \longrightarrow 00:04:18.853$ gave a similar talk to this when

NOTE Confidence: 0.8455968

 $00:04:18.853 \longrightarrow 00:04:21.369$ he proposes to talk to us today

NOTE Confidence: 0.8455968

00:04:21.369 --> 00:04:23.685 about found him very engaging and

NOTE Confidence: 0.8455968

 $00:04:23.685 \longrightarrow 00:04:26.151$ so he very kindly accepted the

NOTE Confidence: 0.8455968

 $00:04:26.151 \longrightarrow 00:04:29.548$ invitation to speak with us today.

NOTE Confidence: 0.8455968

 $00:04:29.550 \longrightarrow 00:04:30.758$ So without further ado,

NOTE Confidence: 0.8455968

 $00:04:30.758 \longrightarrow 00:04:32.570$ thank you Doctor Ellis and we're

NOTE Confidence: 0.8455968

00:04:32.632 --> 00:04:34.197 looking forward to your talk.

NOTE Confidence: 0.85668224

 $00:04:34.760 \longrightarrow 00:04:37.656$ Read that if you want to sit on

NOTE Confidence: 0.85668224

00:04:37.656 --> 00:04:40.000 my promotions board at any point,

NOTE Confidence: 0.85668224

 $00{:}04{:}40.000 \dashrightarrow 00{:}04{:}41.116$ please feel free.

NOTE Confidence: 0.85668224

00:04:41.116 --> 00:04:42.604 That's a beautiful introduction.

NOTE Confidence: 0.85668224

00:04:42.610 --> 00:04:44.480 Thank you to Doctor Miller.

00:04:44.480 --> 00:04:46.730 Minor for that introduction. Of course,

NOTE Confidence: 0.85668224

 $00:04:46.730 \longrightarrow 00:04:49.348$ Dr Tobias for the invitation and Debbie,

NOTE Confidence: 0.85668224

 $00:04:49.350 \longrightarrow 00:04:51.594$ of course for making sure that

NOTE Confidence: 0.85668224

 $00:04:51.594 \longrightarrow 00:04:53.090$ I'm correct and appropriate.

NOTE Confidence: 0.85668224

 $00:04:53.090 \longrightarrow 00:04:56.830$ OK, So what are we going to talk about today?

NOTE Confidence: 0.85668224

00:04:56.830 --> 00:04:58.695 We're going to talk really

NOTE Confidence: 0.85668224

 $00:04:58.695 \longrightarrow 00:04:59.814$ about acute insomnia.

NOTE Confidence: 0.85668224

 $00:04:59.820 \longrightarrow 00:05:02.804$ So when does sleep actually become the enemy,

NOTE Confidence: 0.85668224

 $00:05:02.810 \longrightarrow 00:05:06.765$ and what can we do about it?

NOTE Confidence: 0.85668224

00:05:06.770 --> 00:05:08.882 Before we continue, I'm going to

NOTE Confidence: 0.85668224

 $00{:}05{:}08.882 \dashrightarrow 00{:}05{:}11.520$ have to use that just disclosure.

NOTE Confidence: 0.85668224

 $00{:}05{:}11.520 \dashrightarrow 00{:}05{:}13.310$ There's no commercial support for

NOTE Confidence: 0.85668224

 $00:05:13.310 \longrightarrow 00:05:16.048$ the grand rounds an any conflicts of

NOTE Confidence: 0.85668224

00:05:16.048 --> 00:05:18.248 interest have already been resolved,

NOTE Confidence: 0.85668224

 $00:05:18.250 \longrightarrow 00:05:21.024$ and more than happy to discuss that

NOTE Confidence: 0.85668224

 $00{:}05{:}21.024 \dashrightarrow 00{:}05{:}24.870$ if anyone wishes to do so, alright.

00:05:24.870 --> 00:05:27.806 Now I always like to start the talk

NOTE Confidence: 0.85668224

 $00:05:27.806 \longrightarrow 00:05:30.933$ at the very end and the reason that

NOTE Confidence: 0.85668224

 $00:05:30.933 \longrightarrow 00:05:34.308$ I like to start a talk at the very

NOTE Confidence: 0.85668224

 $00:05:34.308 \longrightarrow 00:05:36.770$ end is in case people fall asleep.

NOTE Confidence: 0.85668224

 $00:05:36.770 \longrightarrow 00:05:38.545$ So let's start with cognitive

NOTE Confidence: 0.85668224

 $00:05:38.545 \longrightarrow 00:05:40.533$ behavioral therapy for insomnia, CBT.

NOTE Confidence: 0.85668224

 $00:05:40.533 \longrightarrow 00:05:43.144$ I what do we know about CBT?

NOTE Confidence: 0.85668224

 $00:05:43.150 \longrightarrow 00:05:45.342$ It's been around for about 30 years now

NOTE Confidence: 0.85668224

 $00:05:45.342 \longrightarrow 00:05:48.168$ and we know it demonstrates very good

NOTE Confidence: 0.85668224

 $00:05:48.168 \longrightarrow 00:05:49.936$ efficacy and comparative effectiveness

NOTE Confidence: 0.85668224

 $00:05:49.936 \longrightarrow 00:05:52.469$ when compared directly to fund the rapy.

NOTE Confidence: 0.85668224

 $00:05:52.470 \longrightarrow 00:05:55.200$ It's durable, we know that studies where.

NOTE Confidence: 0.85668224

00:05:55.200 --> 00:05:56.872 CPT is being employed.

NOTE Confidence: 0.85668224

 $00:05:56.872 \longrightarrow 00:06:00.366$ We can see at least five to 10

NOTE Confidence: 0.85668224

 $00:06:00.366 \longrightarrow 00:06:03.036$ years in terms of treatment gains.

 $00:06:03.040 \longrightarrow 00:06:04.584$ Wilson Heights complex cases.

NOTE Confidence: 0.85668224

 $00:06:04.584 \longrightarrow 00:06:07.290$ It's just as effective as it is

NOTE Confidence: 0.85668224

 $00:06:07.290 \longrightarrow 00:06:09.228$ with the pure cases and anyone.

NOTE Confidence: 0.85668224

 $00:06:09.230 \longrightarrow 00:06:11.015$ Whoever finds that pure case

NOTE Confidence: 0.85668224

 $00:06:11.015 \longrightarrow 00:06:13.230$ of insomnia do let me know.

NOTE Confidence: 0.85668224

 $00:06:13.230 \longrightarrow 00:06:17.145$ I have been looking for them for 20 years.

NOTE Confidence: 0.85668224

00:06:17.150 --> 00:06:18.290 And finally.

NOTE Confidence: 0.85668224

00:06:18.290 --> 00:06:20.570 It confers benefits EBT.

NOTE Confidence: 0.85668224

00:06:20.570 --> 00:06:22.760 I confers benefits above and

NOTE Confidence: 0.85668224

 $00:06:22.760 \longrightarrow 00:06:24.074$ beyond sleep itself.

NOTE Confidence: 0.85668224

 $00{:}06{:}24.080 \dashrightarrow 00{:}06{:}26.270$ We see reductions in anxiety,

NOTE Confidence: 0.85668224

 $00:06:26.270 \longrightarrow 00:06:26.718$ depression,

NOTE Confidence: 0.85668224

 $00:06:26.718 \longrightarrow 00:06:29.854$ paying and so it's a gift that

NOTE Confidence: 0.85668224

 $00:06:29.854 \longrightarrow 00:06:32.455$ keeps on giving so that really

NOTE Confidence: 0.85668224

 $00:06:32.455 \longrightarrow 00:06:35.868$ leads us to the point of this is

NOTE Confidence: 0.85668224

 $00{:}06{:}35.868 \dashrightarrow 00{:}06{:}38.568$ the evidence base that we've got.

 $00:06:38.570 \longrightarrow 00:06:41.754$ So we've got at least 20 meter analysis

NOTE Confidence: 0.85668224

 $00{:}06{:}41.754 \dashrightarrow 00{:}06{:}45.147$ now which demonstrate that CBT eye works.

NOTE Confidence: 0.85668224

 $00:06:45.150 \longrightarrow 00:06:47.435$ It's effective and it confers

NOTE Confidence: 0.85668224

 $00:06:47.435 \longrightarrow 00:06:48.806$ these additional benefits.

NOTE Confidence: 0.85668224

 $00:06:48.810 \longrightarrow 00:06:50.470$ So really, we're done.

NOTE Confidence: 0.85668224

 $00{:}06{:}50.470 \dashrightarrow 00{:}06{:}53.570$ That's the end of the talk, sorry.

NOTE Confidence: 0.85668224

 $00:06:53.570 \longrightarrow 00:06:56.620$ Give everyone CBT I fantastic.

NOTE Confidence: 0.85668224

 $00:06:56.620 \longrightarrow 00:07:01.216$ We've beaten the Beast of Insomnia.

NOTE Confidence: 0.85668224

 $00{:}07{:}01.220 \dashrightarrow 00{:}07{:}03.508$ There are a couple of issues however,

NOTE Confidence: 0.85668224

00:07:03.508 --> 00:07:05.704 that we have to be mindful

NOTE Confidence: 0.85668224

 $00:07:05.704 \longrightarrow 00:07:07.529$ of in terms of CBT I.

NOTE Confidence: 0.85668224

 $00{:}07{:}07.530 \dashrightarrow 00{:}07{:}09.505$ There still very few trained

NOTE Confidence: 0.85668224

 $00{:}07{:}09.505 \dashrightarrow 00{:}07{:}12.540$ clinicians and so that is a problem

NOTE Confidence: 0.85668224

 $00:07:12.540 \longrightarrow 00:07:14.995$ in terms of widespread dissemination.

NOTE Confidence: 0.85668224

 $00:07:15.000 \longrightarrow 00:07:16.770$ It's also prone to quite

 $00:07:16.770 \longrightarrow 00:07:18.186$ high levels of attrition.

NOTE Confidence: 0.85668224

00:07:18.190 --> 00:07:21.019 We see up to 50% of people who

NOTE Confidence: 0.85668224

00:07:21.019 --> 00:07:23.137 will enroll into a CBT program,

NOTE Confidence: 0.85668224

 $00:07:23.140 \longrightarrow 00:07:25.618$ either clinically or in terms of research,

NOTE Confidence: 0.85668224

 $00:07:25.620 \longrightarrow 00:07:28.180$ and then drop out.

NOTE Confidence: 0.85668224

00:07:28.180 --> 00:07:31.717 A lot of clinicians and a lot of patience,

NOTE Confidence: 0.85668224

 $00{:}07{:}31.720 \dashrightarrow 00{:}07{:}34.072$ C CBT is quite labor intensive

NOTE Confidence: 0.85668224

 $00:07:34.072 \longrightarrow 00:07:35.248$ and time intensive,

NOTE Confidence: 0.85668224

 $00{:}07{:}35.250 \dashrightarrow 00{:}07{:}36.823$ and therefore that prevents

NOTE Confidence: 0.85668224

 $00:07:36.823 \longrightarrow 00:07:39.540$ them from engaging fully.

NOTE Confidence: 0.85668224

 $00{:}07{:}39.540 \to 00{:}07{:}42.620$ Even when we get people into doing CBT,

NOTE Confidence: 0.85668224

 $00{:}07{:}42.620 \longrightarrow 00{:}07{:}46.976$ I what we see is that we get about a 70

NOTE Confidence: 0.85668224

00:07:46.976 --> 00:07:49.202 or 80% therapeutic response from CBT.

NOTE Confidence: 0.85668224

 $00:07:49.202 \longrightarrow 00:07:52.630$ I but only about 50 to 60% of those

NOTE Confidence: 0.85668224

 $00:07:52.630 \longrightarrow 00:07:55.710$ responders go on to achieve a full remission.

NOTE Confidence: 0.85668224

00:07:55.710 --> 00:07:57.635 So even though we've beaten

 $00:07:57.635 \longrightarrow 00:07:59.175$ the Beast of Insomnia,

NOTE Confidence: 0.85798454

 $00:07:59.180 \longrightarrow 00:08:01.630$ there's still a few things

NOTE Confidence: 0.85798454

 $00:08:01.630 \longrightarrow 00:08:04.490$ that we need to clear up.

NOTE Confidence: 0.85798454

 $00:08:04.490 \longrightarrow 00:08:06.800$ How we managed to try to address

NOTE Confidence: 0.85798454

 $00{:}08{:}06.800 \dashrightarrow 00{:}08{:}09.475$ some of these issues with CBT in

NOTE Confidence: 0.85798454

 $00:08:09.475 \longrightarrow 00:08:11.887$ terms of very few trained clinicians,

NOTE Confidence: 0.85798454

00:08:11.890 --> 00:08:14.440 we offer in Group therapy which

NOTE Confidence: 0.85798454

 $00:08:14.440 \longrightarrow 00:08:16.525$ certainly reduces our waiting times

NOTE Confidence: 0.85798454

 $00:08:16.525 \longrightarrow 00:08:19.288$ and we can now afford to do it online,

NOTE Confidence: 0.85798454

 $00:08:19.290 \longrightarrow 00:08:21.510$ so there's lots of online programs,

NOTE Confidence: 0.85798454

00:08:21.510 --> 00:08:24.948 so that's one way in which we've tried to

NOTE Confidence: 0.85798454

 $00:08:24.948 \dashrightarrow 00:08:28.140$ address the problem of very few clinicians.

NOTE Confidence: 0.85798454

00:08:28.140 --> 00:08:30.695 What about that levels of

NOTE Confidence: 0.85798454

00:08:30.695 --> 00:08:32.228 attrition and nonadherence?

NOTE Confidence: 0.85798454

 $00:08:32.230 \longrightarrow 00:08:33.942$ We've been looking more

 $00:08:33.942 \longrightarrow 00:08:35.226$ recently adjuvant therapy,

NOTE Confidence: 0.85798454

 $00:08:35.230 \longrightarrow 00:08:38.126$ so can we combine CBT to increase the

NOTE Confidence: 0.85798454

 $00{:}08{:}38.126 \dashrightarrow 00{:}08{:}39.968$ overall efficacy and effectiveness

NOTE Confidence: 0.85798454

 $00:08:39.968 \longrightarrow 00:08:42.068$ by incorporating a stimulant?

NOTE Confidence: 0.85798454

 $00{:}08{:}42.070 --> 00{:}08{:}42.926 \ {\rm For \ example},$

NOTE Confidence: 0.85798454

00:08:42.926 --> 00:08:45.922 to keep people awake during the day?

NOTE Confidence: 0.85798454

 $00:08:45.930 \longrightarrow 00:08:48.975$ What about with a hypnotic to keep

NOTE Confidence: 0.85798454

00:08:48.975 --> 00:08:51.808 them asleep when you are affording

NOTE Confidence: 0.85798454

 $00:08:51.808 \longrightarrow 00:08:55.154$ them that opportunity to get into bed?

NOTE Confidence: 0.85798454

00:08:55.160 --> 00:08:55.530 Unfortunately,

NOTE Confidence: 0.85798454

 $00:08:55.530 \longrightarrow 00:08:57.750$ in both cases the results really

NOTE Confidence: 0.85798454

 $00:08:57.750 \longrightarrow 00:09:00.162$ didn't add much in terms of

NOTE Confidence: 0.85798454

 $00:09:00.162 \longrightarrow 00:09:01.810$ increasing efficacy or effectiveness.

NOTE Confidence: 0.85798454

 $00:09:01.810 \longrightarrow 00:09:02.592$ More recently,

NOTE Confidence: 0.85798454

 $00:09:02.592 \longrightarrow 00:09:04.156$ researchers these crazy researchers

NOTE Confidence: 0.85798454

 $00{:}09{:}04.156 \dashrightarrow 00{:}09{:}05.720$ from England include partners.

00:09:05.720 --> 00:09:08.450 What about including a partner in CBT?

NOTE Confidence: 0.85798454

 $00:09:08.450 \longrightarrow 00:09:11.187$ And that's because we can see when

NOTE Confidence: 0.85798454

00:09:11.187 --> 00:09:13.975 we've looked at it that partners can

NOTE Confidence: 0.85798454

 $00:09:13.975 \longrightarrow 00:09:16.670$ be quite a strong barrier to CBT.

NOTE Confidence: 0.85798454

 $00:09:16.670 \longrightarrow 00:09:20.072$ I if we think about some of the things

NOTE Confidence: 0.85798454

 $00:09:20.072 \longrightarrow 00:09:22.919$ that we do when we're doing CBT,

NOTE Confidence: 0.85798454

 $00:09:22.920 \longrightarrow 00:09:25.626$ I we ask people to do.

NOTE Confidence: 0.85798454

 $00:09:25.630 \longrightarrow 00:09:27.570$ Things that really don't make

NOTE Confidence: 0.85798454

 $00:09:27.570 \longrightarrow 00:09:30.388$ that much sense to them in terms

NOTE Confidence: 0.85798454

00:09:30.388 --> 00:09:31.996 of managing their sleep,

NOTE Confidence: 0.85798454

 $00:09:32.000 \longrightarrow 00:09:33.985$ and that can create some

NOTE Confidence: 0.85798454

 $00:09:33.985 \longrightarrow 00:09:35.176$ difficulties in dyads,

NOTE Confidence: 0.85798454

 $00:09:35.180 \dashrightarrow 00:09:37.966$ whereby if you actually help manage that,

NOTE Confidence: 0.85798454

 $00:09:37.970 \longrightarrow 00:09:40.640$ it does increase efficacy somewhat.

NOTE Confidence: 0.85798454

00:09:40.640 --> 00:09:41.198 And finally,

 $00:09:41.198 \longrightarrow 00:09:42.872$ the most crazy thing at all

NOTE Confidence: 0.85798454

00:09:42.872 --> 00:09:44.519 is lucid dreaming training.

NOTE Confidence: 0.85798454

 $00:09:44.520 \longrightarrow 00:09:46.566$ If we include lucid dreaming training

NOTE Confidence: 0.85798454

00:09:46.566 --> 00:09:49.679 on top of CBT I does it impact on both,

NOTE Confidence: 0.85798454

 $00:09:49.680 \longrightarrow 00:09:51.618$ and that's a trial that we're

NOTE Confidence: 0.85798454

 $00:09:51.618 \longrightarrow 00:09:52.910$ doing at the moment,

NOTE Confidence: 0.85798454

 $00{:}09{:}52.910 \dashrightarrow 00{:}09{:}55.654$ which is please feel free to ask me

NOTE Confidence: 0.85798454

00:09:55.654 --> 00:09:57.922 anything about how I managed to get

NOTE Confidence: 0.85798454

 $00{:}09{:}57.922 \dashrightarrow 00{:}10{:}00.120$ myself hooked up into a study on.

NOTE Confidence: 0.85798454

00:10:00.120 --> 00:10:02.900 Lucid dreaming.

NOTE Confidence: 0.85798454

00:10:02.900 --> 00:10:03.280 Alright,

NOTE Confidence: 0.85798454

 $00:10:03.280 \longrightarrow 00:10:06.320$ So what about this issue of it being

NOTE Confidence: 0.85798454

00:10:06.320 --> 00:10:08.779 perceived and time and labor intensive?

NOTE Confidence: 0.85798454

00:10:08.780 --> 00:10:09.141 Well,

NOTE Confidence: 0.85798454

00:10:09.141 --> 00:10:11.668 the question really is how low can

NOTE Confidence: 0.85798454

 $00{:}10{:}11.668 \dashrightarrow 00{:}10{:}14.389$ you go for a the rapeutic effect and

 $00:10:14.389 \longrightarrow 00:10:17.634$ we can see that there are quite a

NOTE Confidence: 0.85798454

 $00:10:17.634 \longrightarrow 00:10:20.124$ few studies on the brief interventions

NOTE Confidence: 0.85798454

00:10:20.124 --> 00:10:22.108 for people with chronic insomnia

NOTE Confidence: 0.85798454

 $00{:}10{:}22.108 \dashrightarrow 00{:}10{:}24.460$ by Jack Edinger and Anne Germain.

NOTE Confidence: 0.85798454

 $00:10:24.460 \longrightarrow 00:10:26.812$ When we look at the average

NOTE Confidence: 0.85798454

00:10:26.812 --> 00:10:27.988 treatment effect sizes,

NOTE Confidence: 0.85798454

00:10:27.990 --> 00:10:28.406 however,

NOTE Confidence: 0.85798454

00:10:28.406 --> 00:10:30.486 there moderate to large and

NOTE Confidence: 0.85798454

 $00:10:30.486 \longrightarrow 00:10:33.190$ they're good and we can see that.

NOTE Confidence: 0.85798454

 $00{:}10{:}33.190 \dashrightarrow 00{:}10{:}35.416$ We can incorporate brief interventions for

NOTE Confidence: 0.85798454

 $00:10:35.416 \longrightarrow 00:10:38.029$ insomnia with a certain degree of efficacy,

NOTE Confidence: 0.85798454

 $00:10:38.030 \longrightarrow 00:10:40.998$ so that's another way to address the issue.

NOTE Confidence: 0.85798454

 $00{:}10{:}41.000 \dashrightarrow 00{:}10{:}42.860$ The challenge with that, however,

NOTE Confidence: 0.85798454

 $00:10:42.860 \longrightarrow 00:10:44.720$ as with the other issues,

NOTE Confidence: 0.85798454

 $00:10:44.720 \longrightarrow 00:10:46.946$ is that they're not standardized practice,

 $00:10:46.950 \longrightarrow 00:10:49.182$ and so where some people might

NOTE Confidence: 0.85798454

00:10:49.182 --> 00:10:50.670 want to do group,

NOTE Confidence: 0.85798454

00:10:50.670 --> 00:10:52.530 other people may not want

NOTE Confidence: 0.85798454

 $00:10:52.530 \longrightarrow 00:10:54.018$ to engage with that.

NOTE Confidence: 0.85798454

00:10:54.020 --> 00:10:55.880 Other people don't want brief

NOTE Confidence: 0.85798454

 $00{:}10{:}55.880 \rightarrow 00{:}10{:}57.368$ the rapies for chronic insomnia,

NOTE Confidence: 0.85798454

 $00:10:57.370 \longrightarrow 00:10:59.974$ so maybe we need to think about

NOTE Confidence: 0.85798454

 $00:10:59.974 \longrightarrow 00:11:01.090$ an alternative perspective.

NOTE Confidence: 0.85798454

 $00{:}11{:}01.090 --> 00{:}11{:}03.730$ So we're going to go to.

NOTE Confidence: 0.85798454

 $00:11:03.730 \longrightarrow 00:11:04.628$ Plan B.

NOTE Confidence: 0.85798454

00:11:04.628 --> 00:11:07.322 What's the Plan B will to

NOTE Confidence: 0.85798454

 $00:11:07.322 \longrightarrow 00:11:09.815$ start looking at what we might

NOTE Confidence: 0.85798454

 $00{:}11{:}09.815 --> 00{:}11{:}12.820$ think of in terms of a Plan B.

NOTE Confidence: 0.85798454

00:11:12.820 --> 00:11:15.277 Let's look at how insomnia is diagnosed.

NOTE Confidence: 0.85798454

 $00:11:15.280 \longrightarrow 00:11:17.730$ We've got the DSM 5 wonderful thing.

NOTE Confidence: 0.86734164

00:11:17.730 --> 00:11:19.872 It starts to talk about no issues

 $00:11:19.872 \longrightarrow 00:11:21.950$ between primary and secondary insomnia.

NOTE Confidence: 0.86734164

 $00{:}11{:}21.950 \dashrightarrow 00{:}11{:}25.910$ It's one of its greatest benefits in my mind.

NOTE Confidence: 0.86734164

 $00:11:25.910 \longrightarrow 00:11:28.157$ When we start looking down at the

NOTE Confidence: 0.86734164

00:11:28.157 --> 00:11:30.320 symptom profile, one of the things that

NOTE Confidence: 0.86734164

00:11:30.320 --> 00:11:32.576 jumped out was the problem has been

NOTE Confidence: 0.86734164

 $00:11:32.576 \longrightarrow 00:11:34.580$ evident for at least three months.

NOTE Confidence: 0.86734164

00:11:34.580 --> 00:11:37.148 In order for it to be diagnosis chronic,

NOTE Confidence: 0.86734164

 $00:11:37.150 \longrightarrow 00:11:39.710$ it's gotta be present for three months now.

NOTE Confidence: 0.86734164

 $00{:}11{:}39.710 \dashrightarrow 00{:}11{:}42.022$ It's always been a question of mine is

NOTE Confidence: 0.86734164

 $00:11:42.022 \longrightarrow 00:11:44.526$ to how do we determine three months?

NOTE Confidence: 0.86734164

00:11:44.530 --> 00:11:46.777 Because in past iterations of all of

NOTE Confidence: 0.86734164

00:11:46.777 --> 00:11:48.704 the masallah, geez, we've gone right

NOTE Confidence: 0.86734164

 $00:11:48.704 \longrightarrow 00:11:50.630$ the way through from one month,

NOTE Confidence: 0.86734164

 $00:11:50.630 \longrightarrow 00:11:52.550$ right way through to six months.

NOTE Confidence: 0.86734164

00:11:52.550 --> 00:11:54.797 So how did we choose three months?

00:11:54.800 --> 00:11:56.428 How do we know?

NOTE Confidence: 0.86734164

00:11:56.428 --> 00:11:57.649 Insomnia is insomnia.

NOTE Confidence: 0.86734164

 $00:11:57.650 \longrightarrow 00:12:01.790$ At three months, the easy answer is we don't.

NOTE Confidence: 0.86734164

 $00:12:01.790 \longrightarrow 00:12:04.090$ It seems that that's quite

NOTE Confidence: 0.86734164

00:12:04.090 --> 00:12:05.930 an arbitrary cutting point.

NOTE Confidence: 0.8604247

 $00:12:08.070 \longrightarrow 00:12:11.220$ When the DSM five was being.

NOTE Confidence: 0.8604247

 $00:12:11.220 \longrightarrow 00:12:13.500$ Conceptualize one of the other things

NOTE Confidence: 0.8604247

00:12:13.500 --> 00:12:16.540 that they put out in one of their

NOTE Confidence: 0.8604247

 $00{:}12{:}16.540 \dashrightarrow 00{:}12{:}18.440$ position statements was this statement

NOTE Confidence: 0.8604247

00:12:18.440 --> 00:12:20.720 saying although a minimal duration of

NOTE Confidence: 0.8604247

 $00{:}12{:}20.720 \dashrightarrow 00{:}12{:}23.000$ three months is required, in somnia of

NOTE Confidence: 0.848947

 $00:12:23.000 \longrightarrow 00:12:24.960$ shorter duration may still

NOTE Confidence: 0.848947

00:12:24.960 --> 00:12:26.430 need clinical attention.

NOTE Confidence: 0.848947

 $00:12:26.430 \longrightarrow 00:12:29.386$ So this starts to give us a

NOTE Confidence: 0.848947

00:12:29.386 --> 00:12:31.920 very new opportunity out Plan B,

NOTE Confidence: 0.848947

 $00:12:31.920 \longrightarrow 00:12:34.818$ which is why don't we address asamia

00:12:34.818 --> 00:12:37.398 when it's during its acute phase,

NOTE Confidence: 0.848947

00:12:37.400 --> 00:12:41.236 when it's not reached its chronic phase.

NOTE Confidence: 0.848947

00:12:41.240 --> 00:12:43.520 Now, why would that be important?

NOTE Confidence: 0.848947

 $00:12:43.520 \longrightarrow 00:12:45.800$ What are the benefits of this?

NOTE Confidence: 0.848947

00:12:45.800 --> 00:12:46.751 And believe me,

NOTE Confidence: 0.848947

00:12:46.751 --> 00:12:49.493 I used to have about 6 slides justifying

NOTE Confidence: 0.848947

00:12:49.493 --> 00:12:52.636 why I think acute insomnia is important,

NOTE Confidence: 0.848947

 $00:12:52.640 \longrightarrow 00:12:55.300$ and then a very dear friend and

NOTE Confidence: 0.848947

 $00{:}12{:}55.300 \dashrightarrow 00{:}12{:}57.200$ colleague of mine from Upenn,

NOTE Confidence: 0.848947

 $00:12:57.200 \longrightarrow 00:13:00.688$ Michael Careless, said to me look decent.

NOTE Confidence: 0.848947

 $00:13:00.690 \longrightarrow 00:13:03.606$ An ounce of early intervention with acute

NOTE Confidence: 0.848947

 $00:13:03.606 \longrightarrow 00:13:07.169$ insomnia may be worth a pound of CBT I,

NOTE Confidence: 0.848947

 $00{:}13{:}07.170 \dashrightarrow 00{:}13{:}09.600$ in the context of chronic insomnia.

NOTE Confidence: 0.848947

00:13:09.600 --> 00:13:11.886 In essence, what we're saying here

NOTE Confidence: 0.848947

 $00:13:11.886 \longrightarrow 00:13:14.869$ is if we can address it early,

 $00:13:14.870 \longrightarrow 00:13:17.698$ we could probably do a lighter touch,

NOTE Confidence: 0.848947

 $00:13:17.700 \longrightarrow 00:13:20.094$ because there's going to be less

NOTE Confidence: 0.848947

 $00:13:20.094 \longrightarrow 00:13:22.160$ conditioned arousal at this point,

NOTE Confidence: 0.848947

 $00:13:22.160 \longrightarrow 00:13:24.830$ and less self schemata around

NOTE Confidence: 0.848947

 $00:13:24.830 \longrightarrow 00:13:27.500$ having the identity of insomnia.

NOTE Confidence: 0.848947

 $00{:}13{:}27.500 \dashrightarrow 00{:}13{:}29.708$ We can also help in terms of reducing

NOTE Confidence: 0.848947

 $00:13:29.708 \longrightarrow 00:13:32.588$ all of those direct and indirect costs

NOTE Confidence: 0.848947

 $00:13:32.588 \longrightarrow 00:13:34.400$ associated with chronic insomnia.

NOTE Confidence: 0.848947

 $00:13:34.400 \longrightarrow 00:13:37.190$ One of those, of course being.

NOTE Confidence: 0.848947

 $00:13:37.190 \longrightarrow 00:13:39.010$ Depression.

NOTE Confidence: 0.848947

 $00:13:39.010 \longrightarrow 00:13:40.090$ So really,

NOTE Confidence: 0.848947

 $00:13:40.090 \longrightarrow 00:13:43.090$ we've got a good rationale

NOTE Confidence: 0.848947

 $00:13:43.090 \longrightarrow 00:13:45.610$ for intervening early.

NOTE Confidence: 0.848947

00:13:45.610 --> 00:13:48.450 In terms of not only helping people,

NOTE Confidence: 0.848947

 $00:13:48.450 \longrightarrow 00:13:51.690$ but also in terms of impacting on costs,

NOTE Confidence: 0.848947

 $00:13:51.690 \longrightarrow 00:13:54.294$ and we could do it lighter and

 $00:13:54.294 \longrightarrow 00:13:57.358$ easier than a full CBT eye protocol.

NOTE Confidence: 0.8515425

 $00:14:01.870 \longrightarrow 00:14:03.640$ The problem remains, however,

NOTE Confidence: 0.8515425

 $00:14:03.640 \longrightarrow 00:14:06.640$ is to what is acute insomnia.

NOTE Confidence: 0.8515425

00:14:06.640 --> 00:14:08.440 Believe it or not,

NOTE Confidence: 0.8515425

 $00:14:08.440 \longrightarrow 00:14:10.690$ considering the pattern ACOLOGY switch

NOTE Confidence: 0.8515425

 $00:14:10.690 \longrightarrow 00:14:13.468$ have covered insomnia since the 70s.

NOTE Confidence: 0.8515425

00:14:13.470 --> 00:14:15.556 Acute insomnia has always been

NOTE Confidence: 0.8515425

 $00:14:15.556 \longrightarrow 00:14:18.334$ defined on the basis of exclusion.

NOTE Confidence: 0.8515425

 $00:14:18.340 \longrightarrow 00:14:19.738$ In other words,

NOTE Confidence: 0.8515425

 $00:14:19.738 \longrightarrow 00:14:22.534$ in most instances it's assumed that

NOTE Confidence: 0.8515425

 $00:14:22.534 \longrightarrow 00:14:25.890$ insomnia that meets all of the criteria.

NOTE Confidence: 0.8515425

 $00:14:25.890 \longrightarrow 00:14:27.190$ For insomnia,

NOTE Confidence: 0.8515425

 $00:14:27.190 \longrightarrow 00:14:31.054$ except duration is classified as acute.

NOTE Confidence: 0.8515425

 $00:14:31.054 \longrightarrow 00:14:33.618$ Now that's a problem,

NOTE Confidence: 0.8515425

00:14:33.620 --> 00:14:36.764 because we don't really know enough about it,

 $00:14:36.770 \longrightarrow 00:14:39.128$ and it's never really been studied.

NOTE Confidence: 0.8515425

 $00{:}14{:}39.130 \dashrightarrow 00{:}14{:}42.136$ In order for us to see whether it might

NOTE Confidence: 0.8515425

 $00{:}14{:}42.136 \dashrightarrow 00{:}14{:}44.777$ actually be different and warrant a

NOTE Confidence: 0.8515425

00:14:44.777 --> 00:14:47.007 different form of treatment strategy,

NOTE Confidence: 0.8515425

 $00:14:47.010 \longrightarrow 00:14:48.975$ it might respond better to

NOTE Confidence: 0.8515425

 $00:14:48.975 \longrightarrow 00:14:50.555$ a stress based protocol.

NOTE Confidence: 0.8515425

 $00:14:50.555 \longrightarrow 00:14:51.740$ So in 2012,

NOTE Confidence: 0.8515425

 $00:14:51.740 \longrightarrow 00:14:54.498$ one of the first things that we

NOTE Confidence: 0.8515425

 $00:14:54.500 \longrightarrow 00:14:57.246$ did was created our own definition.

NOTE Confidence: 0.8515425

 $00:14:57.246 \longrightarrow 00:15:00.900$ Our own working definition of acute insomnia.

NOTE Confidence: 0.8515425

 $00{:}15{:}00.900 \dashrightarrow 00{:}15{:}04.850$ Anyone who's familiar with the work of Art,

NOTE Confidence: 0.8515425

 $00:15:04.850 \longrightarrow 00:15:07.812$ Spielman, will understand his 3P model

NOTE Confidence: 0.8515425

00:15:07.812 --> 00:15:11.270 that insomnia is made up of predisposing,

NOTE Confidence: 0.8515425

 $00{:}15{:}11.270 --> 00{:}15{:}11.898 \ \mathrm{precipitating},$

NOTE Confidence: 0.8515425

 $00:15:11.898 \longrightarrow 00:15:13.782$ and perpetuating factors.

NOTE Confidence: 0.8515425

 $00:15:13.782 \longrightarrow 00:15:16.708$ Now, one of the things that Spielman

 $00:15:16.708 \longrightarrow 00:15:19.010$ said in his model, of course,

NOTE Confidence: 0.8515425

 $00{:}15{:}19.010 \dashrightarrow 00{:}15{:}20.924$ is that acute in somnia starts

NOTE Confidence: 0.8515425

00:15:20.924 --> 00:15:22.834 because of a precipitating event,

NOTE Confidence: 0.8515425

00:15:22.840 --> 00:15:25.514 a life event that he's talking about,

NOTE Confidence: 0.8515425

 $00:15:25.520 \longrightarrow 00:15:27.052$ something like a divorce,

NOTE Confidence: 0.8515425

00:15:27.052 --> 00:15:29.350 or he's talking about a bereavement,

NOTE Confidence: 0.8515425

 $00:15:29.350 \longrightarrow 00:15:31.770$ something that is a major

NOTE Confidence: 0.8515425

 $00:15:31.770 \longrightarrow 00:15:33.706$ impact on somebody's life.

NOTE Confidence: 0.8515425

 $00:15:33.710 \longrightarrow 00:15:36.848$ One of the first things that we

NOTE Confidence: 0.8515425

 $00:15:36.850 \longrightarrow 00:15:39.546$ felt was that actually there are

NOTE Confidence: 0.8515425

 $00:15:39.546 \longrightarrow 00:15:41.786$ going to be other circumstances

NOTE Confidence: 0.8515425

 $00:15:41.790 \longrightarrow 00:15:44.486$ which will lead somebody over that

NOTE Confidence: 0.8515425

 $00:15:44.486 \longrightarrow 00:15:47.123$ threshold of insomnia into having

NOTE Confidence: 0.8515425

 $00{:}15{:}47.123 \dashrightarrow 00{:}15{:}50.028$ that diagnosis of acute in somnia.

NOTE Confidence: 0.8515425

 $00:15:50.030 \longrightarrow 00:15:51.806$ So the main differentiation that

00:15:51.806 --> 00:15:54.650 we've had from the DSM and the ICS D

NOTE Confidence: 0.8515425

 $00:15:54.727 \longrightarrow 00:15:57.422$ is really we've taken account of the

NOTE Confidence: 0.8515425

 $00:15:57.422 \longrightarrow 00:16:00.255$ fact that not only might there be,

NOTE Confidence: 0.8515425

 $00:16:00.255 \longrightarrow 00:16:03.540$ as you can see on the left hand side,

NOTE Confidence: 0.8515425

 $00:16:03.540 \longrightarrow 00:16:05.360$ significant life event that takes

NOTE Confidence: 0.8515425

 $00:16:05.360 \longrightarrow 00:16:07.582$ somebody over a threshold of insomnia.

NOTE Confidence: 0.8515425

 $00:16:07.582 \longrightarrow 00:16:10.200$ But it could also be an accumulation

NOTE Confidence: 0.8515425

00:16:10.270 --> 00:16:11.910 of daily hassles, for example,

NOTE Confidence: 0.8515425

00:16:11.910 --> 00:16:14.150 and I think that many of us have

NOTE Confidence: 0.8515425

 $00:16:14.214 \longrightarrow 00:16:16.080$ experienced this and we're seeing a

NOTE Confidence: 0.8515425

 $00{:}16{:}16.080 \dashrightarrow 00{:}16{:}19.220$ lot of this at the moment due to the

NOTE Confidence: 0.8515425

 $00:16:19.220 \longrightarrow 00:16:21.334$ circumstances that we're living in is

NOTE Confidence: 0.8515425

 $00:16:21.334 \longrightarrow 00:16:23.460$ that it's not one thing that people

NOTE Confidence: 0.8515425

00:16:23.460 --> 00:16:25.839 pinpoint that is kicked off their insomnia,

NOTE Confidence: 0.8515425

 $00:16:25.840 \longrightarrow 00:16:27.576$ but in accumulation of

NOTE Confidence: 0.8515425

 $00:16:27.576 \longrightarrow 00:16:29.746$ things that have built up.

 $00:16:29.750 \longrightarrow 00:16:32.406$ The third group that we talk about in

NOTE Confidence: 0.8515425

 $00{:}16{:}32.406 \dashrightarrow 00{:}16{:}35.318$ terms of the precipitants for insomnia.

NOTE Confidence: 0.8515425

00:16:35.320 --> 00:16:37.310 Somebody who's chronically stressed if

NOTE Confidence: 0.8515425

00:16:37.310 --> 00:16:39.300 we've got somebody who's caregiving,

NOTE Confidence: 0.8515425

 $00:16:39.300 \longrightarrow 00:16:40.096$ for example.

NOTE Confidence: 0.8515425

 $00:16:40.096 \longrightarrow 00:16:42.086$ That's going to keep them

NOTE Confidence: 0.8515425

 $00:16:42.090 \longrightarrow 00:16:44.005$ quite close to that threshold.

NOTE Confidence: 0.8515425

 $00:16:44.005 \longrightarrow 00:16:45.505$ That stress threshold that

NOTE Confidence: 0.8515425

 $00:16:45.505 \longrightarrow 00:16:47.260$ goes over into insomnia.

NOTE Confidence: 0.8515425

00:16:47.260 --> 00:16:50.846 And it might just take one or two things

NOTE Confidence: 0.8515425

 $00{:}16{:}50.846 \to 00{:}16{:}54.030$ that push them over the edge into insomnia.

NOTE Confidence: 0.8515425

 $00:16:54.030 \longrightarrow 00:16:56.808$ So we've rejected the idea that it

NOTE Confidence: 0.8515425

 $00:16:56.810 \longrightarrow 00:16:59.988$ has to be a significant life event.

NOTE Confidence: 0.8515425

 $00{:}16{:}59.990 \dashrightarrow 00{:}17{:}02.556$ But they also could be daily

NOTE Confidence: 0.8515425

 $00:17:02.556 \longrightarrow 00:17:04.328$ hassles that have accumulated

 $00:17:04.328 \longrightarrow 00:17:06.870$ or indeed a chronic stressor.

NOTE Confidence: 0.8515425

 $00:17:06.870 \longrightarrow 00:17:07.650$ Beyond that,

NOTE Confidence: 0.8515425

00:17:07.650 --> 00:17:09.585 we generally keeping within the

NOTE Confidence: 0.8515425

 $00:17:09.585 \longrightarrow 00:17:12.746$ framework of the DSM 5 in that it's

NOTE Confidence: 0.8515425

 $00:17:12.746 \longrightarrow 00:17:15.427$ a problem of getting off to sleep,

NOTE Confidence: 0.8515425

 $00:17:15.430 \longrightarrow 00:17:16.286$ staying asleep,

NOTE Confidence: 0.8515425

 $00:17:16.286 \longrightarrow 00:17:18.854$ waking too early in the morning

NOTE Confidence: 0.8515425

00:17:18.854 --> 00:17:20.590 despite adequate opportunity.

NOTE Confidence: 0.8515425

 $00:17:20.590 \longrightarrow 00:17:22.341$ Three nights a week.

NOTE Confidence: 0.8515425

00:17:22.341 --> 00:17:24.705 And causing significant daytime

NOTE Confidence: 0.8515425

 $00{:}17{:}24.705 --> 00{:}17{:}26.478 \ \mathrm{impairment} \ \mathrm{or} \ \mathrm{distress}.$

NOTE Confidence: 0.8515425

 $00:17:26.480 \longrightarrow 00:17:30.353$ But what we're talking about here is period.

NOTE Confidence: 0.8515425

00:17:30.353 --> 00:17:32.284 Generally between two weeks,

NOTE Confidence: 0.8515425

 $00:17:32.284 \longrightarrow 00:17:33.248$ three months.

NOTE Confidence: 0.7757681

 $00:17:35.950 \longrightarrow 00:17:39.316$ OK, so we've now got a working

NOTE Confidence: 0.7757681

00:17:39.316 --> 00:17:41.240 definition for acute insomnia.

 $00:17:41.240 \longrightarrow 00:17:44.240$ That's fantastic. Yay me.

NOTE Confidence: 0.7757681

 $00:17:44.240 \longrightarrow 00:17:46.900$ Do we need to do after that?

NOTE Confidence: 0.7757681

 $00:17:46.900 \longrightarrow 00:17:47.980$ Well, you know.

NOTE Confidence: 0.7757681

00:17:47.980 --> 00:17:50.140 As with anything that we're dealing

NOTE Confidence: 0.7757681

00:17:50.140 --> 00:17:52.531 with in terms of looking for

NOTE Confidence: 0.7757681

 $00:17:52.531 \longrightarrow 00:17:54.491$ resource is for healthcare resources,

NOTE Confidence: 0.7757681

 $00:17:54.500 \longrightarrow 00:17:57.540$ we need to know what the prevalence is.

NOTE Confidence: 0.7757681

00:17:57.540 --> 00:17:59.820 We need to know the Epidemiology

NOTE Confidence: 0.7757681

 $00:17:59.820 \longrightarrow 00:18:01.340$ of acute insomnia becausw,

NOTE Confidence: 0.7757681

00:18:01.340 --> 00:18:04.000 is it worth plowing money into this?

NOTE Confidence: 0.7757681

00:18:04.000 --> 00:18:05.900 If indeed it doesn't exist

NOTE Confidence: 0.7757681

 $00:18:05.900 \longrightarrow 00:18:07.800$ and it's not very problematic.

NOTE Confidence: 0.7757681

 $00{:}18{:}07.800 \dashrightarrow 00{:}18{:}10.338$ So we conducted the first study

NOTE Confidence: 0.7757681

00:18:10.338 --> 00:18:12.443 looking at the Epidemiology of

NOTE Confidence: 0.7757681

 $00:18:12.443 \longrightarrow 00:18:14.767$ acute insomnia in both the US and.

 $00:18:14.770 \longrightarrow 00:18:17.008$ Can you take?

NOTE Confidence: 0.7757681

 $00:18:17.010 \longrightarrow 00:18:20.426$ What we found from that is that the

NOTE Confidence: 0.7757681

 $00:18:20.426 \longrightarrow 00:18:22.679$ point prevalence of acute insomnia

NOTE Confidence: 0.7757681

 $00:18:22.679 \longrightarrow 00:18:25.307$ is somewhere between 8 and 9%.

NOTE Confidence: 0.7757681

 $00:18:25.310 \longrightarrow 00:18:28.152$ So 8 or 9% of the population

NOTE Confidence: 0.7757681

 $00:18:28.152 \longrightarrow 00:18:30.389$ are suffering from the acute

NOTE Confidence: 0.7757681

00:18:30.389 --> 00:18:33.173 insomnia at any given time point.

NOTE Confidence: 0.7757681

 $00:18:33.180 \longrightarrow 00:18:35.920$ What about its incidence, however?

NOTE Confidence: 0.7757681

 $00{:}18{:}35.920 \dashrightarrow 00{:}18{:}38.685$ When we start to talk about incidents,

NOTE Confidence: 0.7757681

 $00:18:38.690 \longrightarrow 00:18:41.455$ we see quite a high incidence rate.

NOTE Confidence: 0.7757681

 $00:18:41.460 \longrightarrow 00:18:43.950$ We're looking at an annual incidence

NOTE Confidence: 0.7757681

 $00:18:43.950 \longrightarrow 00:18:46.219$ rate of between 31 to 36%,

NOTE Confidence: 0.7757681

 $00:18:46.220 \longrightarrow 00:18:49.780$ so almost a third of the population will

NOTE Confidence: 0.7757681

 $00{:}18{:}49.780 \dashrightarrow 00{:}18{:}52.817$ develop acute in somnia in a given year.

NOTE Confidence: 0.7757681

00:18:52.820 --> 00:18:56.005 But for a large majority of those,

NOTE Confidence: 0.7757681

00:18:56.010 --> 00:18:58.754 they will naturally rumic as opposed to

00:18:58.754 --> 00:19:01.938 going on to develop chronic insomnia,

NOTE Confidence: 0.7757681

 $00:19:01.940 \longrightarrow 00:19:03.608$ just as a sideline.

NOTE Confidence: 0.7757681

00:19:03.608 --> 00:19:06.110 You know what we're dealing with

NOTE Confidence: 0.7757681

 $00:19:06.198 \longrightarrow 00:19:08.844$ at the moment in terms of covert,

NOTE Confidence: 0.7757681

 $00:19:08.850 \dashrightarrow 00:19:11.258$ what we're seeing in terms of a cute

NOTE Confidence: 0.7757681

 $00:19:11.258 \longrightarrow 00:19:13.120$ insomnia is increasing by about 40%,

NOTE Confidence: 0.7757681

 $00:19:13.120 \longrightarrow 00:19:15.648$ so we're going to see over this year

NOTE Confidence: 0.7757681

00:19:15.648 --> 00:19:19.190 and the next year, acute insomnia.

NOTE Confidence: 0.7757681

 $00:19:19.190 \longrightarrow 00:19:20.004$ Prevalence rates,

NOTE Confidence: 0.7757681

 $00:19:20.004 \longrightarrow 00:19:22.853$ probably in their 20s or even 30s.

NOTE Confidence: 0.7757681

 $00{:}19{:}22.860 \dashrightarrow 00{:}19{:}25.266$ Lot of people suffering from a cute

NOTE Confidence: 0.7757681

 $00{:}19{:}25.266 \dashrightarrow 00{:}19{:}28.164$ in somnia at the moment there's a lot

NOTE Confidence: 0.7757681

00:19:28.164 --> 00:19:30.108 of uncertainty, anxiety and worry.

NOTE Confidence: 0.7757681

00:19:30.108 --> 00:19:30.484 Alright,

NOTE Confidence: 0.7757681

00:19:30.484 --> 00:19:33.470 so now we've got a definition fantastic,

 $00:19:33.470 \longrightarrow 00:19:35.510$ and that made me famous.

NOTE Confidence: 0.7757681

 $00:19:35.510 \longrightarrow 00:19:38.366$ Now we've got the prevalence and incidents,

NOTE Confidence: 0.7757681

 $00:19:38.370 \longrightarrow 00:19:41.626$ so now we've got some good data behind.

NOTE Confidence: 0.7757681

00:19:41.630 --> 00:19:45.018 How popular and common it is and

NOTE Confidence: 0.7757681

 $00:19:45.018 \longrightarrow 00:19:48.699$ whether we need to address it or not.

NOTE Confidence: 0.7757681

 $00:19:48.700 \longrightarrow 00:19:51.017$ So now we really need to know

NOTE Confidence: 0.7757681

00:19:51.017 --> 00:19:53.118 more about what it looks like.

NOTE Confidence: 0.7757681

00:19:53.120 --> 00:19:56.200 What does acute insomnia actually look like?

NOTE Confidence: 0.7757681

 $00{:}19{:}56.200 \to 00{:}19{:}58.354$ Going back to the apea and

NOTE Confidence: 0.7757681

 $00:19:58.354 \longrightarrow 00:20:00.240$ what they suggested in 2012.

NOTE Confidence: 0.7757681

 $00{:}20{:}00.240 --> 00{:}20{:}00.647 \ \mathrm{Well},$

NOTE Confidence: 0.7757681

 $00{:}20{:}00.647 \dashrightarrow 00{:}20{:}03.089$ they suggested that this situational or

NOTE Confidence: 0.7757681

 $00{:}20{:}03.089 \dashrightarrow 00{:}20{:}05.622$ acute in somnia is often associated with

NOTE Confidence: 0.7757681

00:20:05.622 --> 00:20:08.520 life events or changes in sleep schedules,

NOTE Confidence: 0.7757681

 $00:20:08.520 \longrightarrow 00:20:12.246$ so that's the first part we want to check.

NOTE Confidence: 0.7757681

 $00{:}20{:}12.250 \dashrightarrow 00{:}20{:}14.095$ Does this trigger actually need

 $00:20:14.095 \longrightarrow 00:20:16.506$ to occur in order for somebody

NOTE Confidence: 0.7757681

 $00:20:16.506 \longrightarrow 00:20:18.458$ to develop acute insomnia?

NOTE Confidence: 0.7757681

 $00:20:18.460 \longrightarrow 00:20:21.016$ Starting now to look more into

NOTE Confidence: 0.7757681

00:20:21.016 --> 00:20:23.010 the analytic Epidemiology of it?

NOTE Confidence: 0.8591417

 $00:20:25.300 \longrightarrow 00:20:28.296$ So what if we got in terms

NOTE Confidence: 0.8591417

 $00:20:28.296 \longrightarrow 00:20:29.580$ of previous research?

NOTE Confidence: 0.8591417

00:20:29.580 --> 00:20:32.052 There's only actually one significant paper

NOTE Confidence: 0.8591417

 $00{:}20{:}32.052 \dashrightarrow 00{:}20{:}34.290$ on precipitating factors in insomnia,

NOTE Confidence: 0.8591417

 $00:20:34.290 \longrightarrow 00:20:38.378$ and this is my cell am Bastian.

NOTE Confidence: 0.8591417

 $00:20:38.380 \longrightarrow 00:20:40.216$ University level from 2004.

NOTE Confidence: 0.8591417

 $00{:}20{:}40.216 \longrightarrow 00{:}20{:}44.386$ An what Celine did is she got a group

NOTE Confidence: 0.8591417

 $00:20:44.386 \longrightarrow 00:20:47.038$ of patients that were coming through

NOTE Confidence: 0.8591417

 $00{:}20{:}47.038 \dashrightarrow 00{:}20{:}50.477$ to clinic for treatment 323 and she

NOTE Confidence: 0.8591417

 $00:20:50.477 \longrightarrow 00:20:53.418$ asked them whether they could recall

NOTE Confidence: 0.8591417

 $00:20:53.418 \longrightarrow 00:20:56.412$ the precipitant event that kicked off

 $00:20:56.412 \longrightarrow 00:20:59.164$ and triggered their insomnia and what

NOTE Confidence: 0.8591417

00:20:59.164 --> 00:21:02.712 she found was 78.3% of them said yes

NOTE Confidence: 0.8591417

 $00{:}21{:}02.712 \dashrightarrow 00{:}21{:}05.520$ they can recall a specific event.

NOTE Confidence: 0.8591417

 $00:21:05.520 \longrightarrow 00:21:08.370$ Now there are two main challenges

NOTE Confidence: 0.8591417

 $00:21:08.370 \longrightarrow 00:21:09.320$ with Celine's.

NOTE Confidence: 0.8591417

 $00:21:09.320 \longrightarrow 00:21:09.968$ Work here.

NOTE Confidence: 0.8591417

 $00{:}21{:}09.968 \dashrightarrow 00{:}21{:}12.560$ The first is that the mean length that

NOTE Confidence: 0.8591417

00:21:12.627 --> 00:21:14.769 people had insomnia when they went

NOTE Confidence: 0.8591417

 $00:21:14.769 \longrightarrow 00:21:17.188$ into the clinic was over 10 years.

NOTE Confidence: 0.8591417

 $00:21:17.190 \longrightarrow 00:21:19.614$ So there's gonna be some memory

NOTE Confidence: 0.8591417

 $00:21:19.614 \longrightarrow 00:21:20.826$ biases around that.

NOTE Confidence: 0.8591417

 $00:21:20.830 \longrightarrow 00:21:23.147$ That we need to be mindful of.

NOTE Confidence: 0.8591417

00:21:23.150 --> 00:21:25.160 The other issue, of course,

NOTE Confidence: 0.8591417

 $00:21:25.160 \longrightarrow 00:21:27.374$ is that she didn't account for

NOTE Confidence: 0.8591417

00:21:27.374 --> 00:21:29.570 a previous history of insomnia,

NOTE Confidence: 0.8591417

 $00:21:29.570 \longrightarrow 00:21:31.986$ and one of the things that we do

00:21:31.986 --> 00:21:34.816 know is that a previous episode of

NOTE Confidence: 0.8591417

00:21:34.816 --> 00:21:37.535 Insomnia is a significant risk factor

NOTE Confidence: 0.8591417

00:21:37.535 --> 00:21:39.985 for the development of insomnia,

NOTE Confidence: 0.8591417

 $00:21:39.990 \longrightarrow 00:21:42.502$ and so we might want to look at

NOTE Confidence: 0.8591417

 $00:21:42.502 \longrightarrow 00:21:44.129$ whether there are differences

NOTE Confidence: 0.8591417

 $00{:}21{:}44.129 \dashrightarrow 00{:}21{:}46.434$ in precipitating events based on

NOTE Confidence: 0.8591417

00:21:46.434 --> 00:21:49.220 whether it's your first ever episode,

NOTE Confidence: 0.8591417

 $00:21:49.220 \longrightarrow 00:21:52.420$ or indeed whether it is a recurrent episode.

NOTE Confidence: 0.8591417

00:21:52.420 --> 00:21:54.424 So small scale study.

NOTE Confidence: 0.8591417

00:21:54.424 --> 00:21:58.210 We've asked people, in essence.

NOTE Confidence: 0.8591417

00:21:58.210 --> 00:21:58.541 Um,

NOTE Confidence: 0.8591417

00:21:58.541 --> 00:22:00.858 if there in the first three months

NOTE Confidence: 0.8591417

 $00:22:00.858 \longrightarrow 00:22:02.990$ of a recurrent episode,

NOTE Confidence: 0.8591417

 $00:22:02.990 \longrightarrow 00:22:05.366$ so they're still in acute insomnia,

NOTE Confidence: 0.8591417

 $00:22:05.370 \longrightarrow 00:22:07.360$ but they're going through a

 $00:22:07.360 \longrightarrow 00:22:09.351$ recurrent episode, not their first.

NOTE Confidence: 0.8591417

00:22:09.351 --> 00:22:11.733 What happens if you ask people?

NOTE Confidence: 0.8591417

 $00:22:11.740 \longrightarrow 00:22:14.617$ Can they identify a precipitant an it's

NOTE Confidence: 0.8591417

00:22:14.617 --> 00:22:17.764 interesting in the sense that 93% of people,

NOTE Confidence: 0.8591417

 $00:22:17.764 \longrightarrow 00:22:20.718$ even though there are increased risk for

NOTE Confidence: 0.8591417

00:22:20.718 --> 00:22:23.679 insomnia because they've had it in the past.

NOTE Confidence: 0.8591417

 $00:22:23.680 \longrightarrow 00:22:26.164$ They can still identify a precipitants

NOTE Confidence: 0.8591417

 $00:22:26.164 \longrightarrow 00:22:28.150$ or precipitant is needed for.

NOTE Confidence: 0.8591417

00:22:28.150 --> 00:22:31.650 Even a recurrent episode.

NOTE Confidence: 0.8591417

00:22:31.650 --> 00:22:34.282 What about if you ask people if

NOTE Confidence: 0.8591417

 $00{:}22{:}34.282 \dashrightarrow 00{:}22{:}36.509$ it's their first ever episode?

NOTE Confidence: 0.8591417

00:22:36.510 --> 00:22:38.784 So you're asking people within the

NOTE Confidence: 0.8591417

 $00:22:38.784 \longrightarrow 00:22:41.239$ 1st three months of their first

NOTE Confidence: 0.8591417

00:22:41.239 --> 00:22:43.394 ever episode of Acute Insomnia?

NOTE Confidence: 0.8591417

 $00:22:43.400 \longrightarrow 00:22:44.518$ Surprise, surprise.

NOTE Confidence: 0.8591417

00:22:44.518 --> 00:22:46.754 100% everyone interviewed could

00:22:46.754 --> 00:22:49.477 identify specific precipitants they may

NOTE Confidence: 0.8591417

 $00{:}22{:}49.477 \dashrightarrow 00{:}22{:}51.955$ have been accumulations of daily hassles.

NOTE Confidence: 0.8591417

 $00:22:51.960 \longrightarrow 00:22:54.618$ They may have been life events

NOTE Confidence: 0.8591417

 $00:22:54.618 \longrightarrow 00:22:56.918$ or chronic stressors with an

NOTE Confidence: 0.8591417

00:22:56.918 --> 00:22:59.158 additional stress burden on it,

NOTE Confidence: 0.8591417

 $00{:}22{:}59.160 \dashrightarrow 00{:}23{:}01.410$ but they could identify something

NOTE Confidence: 0.8591417

 $00:23:01.410 \longrightarrow 00:23:03.660$ that triggered off their insomnia.

NOTE Confidence: 0.8591417

 $00:23:03.660 \longrightarrow 00:23:06.607$ So it seems like the API is

NOTE Confidence: 0.8591417

 $00:23:06.607 \longrightarrow 00:23:08.610$ on the right track.

NOTE Confidence: 0.8591417

 $00:23:08.610 \longrightarrow 00:23:13.965$ It is precipitated by an event of some sort.

NOTE Confidence: 0.8591417

 $00:23:13.970 \longrightarrow 00:23:16.970$ Alright, so now we know.

NOTE Confidence: 0.8591417

 $00{:}23{:}16.970 \dashrightarrow 00{:}23{:}20.266$ But it looks like we now know the

NOTE Confidence: 0.8591417

 $00{:}23{:}20.266 \dashrightarrow 00{:}23{:}23.690$ prevalence of it and we now know that it

NOTE Confidence: 0.8591417

 $00:23:23.690 \longrightarrow 00:23:27.047$ is in response to a precipitating event.

NOTE Confidence: 0.8591417

 $00:23:27.050 \longrightarrow 00:23:28.553$ What about sleep?

 $00:23:28.553 \longrightarrow 00:23:30.557$ It's an interesting thing.

NOTE Confidence: 0.8591417

 $00{:}23{:}30.560 \dashrightarrow 00{:}23{:}33.074$ We would probably take it for

NOTE Confidence: 0.8591417

00:23:33.074 --> 00:23:35.779 granted that its impact is on sleep,

NOTE Confidence: 0.8591417

 $00{:}23{:}35.780 \dashrightarrow 00{:}23{:}38.540$ but we really do need to check that

NOTE Confidence: 0.8591417

 $00:23:38.540 \longrightarrow 00:23:41.790$ and so very small scale study really.

NOTE Confidence: 0.8591417

 $00{:}23{:}41.790 \dashrightarrow 00{:}23{:}44.124$ Just looking at people with a cute

NOTE Confidence: 0.8591417

 $00:23:44.124 \longrightarrow 00:23:47.008$ insomnia compared to a group of controls,

NOTE Confidence: 0.8591417

00:23:47.010 --> 00:23:49.145 matched controls and looking at

NOTE Confidence: 0.8591417

 $00{:}23{:}49.145 \dashrightarrow 00{:}23{:}51.280$ their sleep diary information when

NOTE Confidence: 0.8591417

 $00:23:51.348 \longrightarrow 00:23:53.418$ we look at people sleep Diaries,

NOTE Confidence: 0.8591417

 $00{:}23{:}53.420 --> 00{:}23{:}56.556$ what we do see is that there are

NOTE Confidence: 0.8591417

 $00:23:56.556 \longrightarrow 00:23:57.830$ significant differences there.

NOTE Confidence: 0.8591417

00:23:57.830 --> 00:23:59.348 Reporting increased sleep.

NOTE Confidence: 0.8591417

00:23:59.348 --> 00:24:01.372 Latency's increased wake after

NOTE Confidence: 0.8591417

 $00:24:01.372 \longrightarrow 00:24:02.890$ sleep onset and

NOTE Confidence: 0.848126742400001

 $00{:}24{:}02.967 \dashrightarrow 00{:}24{:}05.292$ certainly reduced total sleep time

 $00:24:05.292 \longrightarrow 00:24:07.617$ and a decreased sleep efficiency

NOTE Confidence: 0.848126742400001

 $00{:}24{:}07.688 \dashrightarrow 00{:}24{:}09.908$ compared to our normal sleepers,

NOTE Confidence: 0.848126742400001

 $00:24:09.910 \longrightarrow 00:24:13.333$ so their self reports of sleep are

NOTE Confidence: 0.848126742400001

 $00:24:13.333 \longrightarrow 00:24:16.430$ poor compared to normal sleepers.

NOTE Confidence: 0.848126742400001

 $00:24:16.430 \longrightarrow 00:24:19.006$ When we look at some of their

NOTE Confidence: 0.848126742400001

 $00:24:19.006 \longrightarrow 00:24:20.879$ measures of stress and mood,

NOTE Confidence: 0.848126742400001

 $00:24:20.880 \longrightarrow 00:24:23.848$ they appear to be reporting more life events.

NOTE Confidence: 0.848126742400001

 $00{:}24{:}23.850 \dashrightarrow 00{:}24{:}27.378$ That makes sense with the precipitants.

NOTE Confidence: 0.848126742400001

00:24:27.380 --> 00:24:30.236 Depsite stress over the last month,

NOTE Confidence: 0.848126742400001

 $00:24:30.240 \longrightarrow 00:24:32.615$ that is also significantly higher

NOTE Confidence: 0.848126742400001

00:24:32.615 --> 00:24:35.948 than our normal sleepers, as are our

NOTE Confidence: 0.848126742400001

00:24:35.948 --> 00:24:38.328 symptoms of anxiety and depression,

NOTE Confidence: 0.848126742400001

 $00{:}24{:}38.330 \dashrightarrow 00{:}24{:}41.498$ so it gives us our first indication of

NOTE Confidence: 0.848126742400001

 $00:24:41.498 \longrightarrow 00:24:45.426$ some of the elements that are feeding into

NOTE Confidence: 0.848126742400001

 $00:24:45.426 \longrightarrow 00:24:50.070$ this experience of acute insomnia, wonderful.

 $00:24:50.070 \longrightarrow 00:24:52.320$ What about the actual sleep?

NOTE Confidence: 0.848126742400001

00:24:52.320 --> 00:24:53.664 What's happening with

NOTE Confidence: 0.848126742400001

00:24:53.664 --> 00:24:55.008 somebody's sleep architecture?

NOTE Confidence: 0.848126742400001

00:24:55.010 --> 00:24:56.357 During acute insomnia?

NOTE Confidence: 0.848126742400001

 $00:24:56.357 \longrightarrow 00:24:59.500$ One of the mysteries that we've got,

NOTE Confidence: 0.848126742400001

00:24:59.500 --> 00:25:02.636 certainly in the realm of chronic insomnia,

NOTE Confidence: 0.848126742400001

 $00{:}25{:}02.640 \dashrightarrow 00{:}25{:}05.454$ is that we've never really found a

NOTE Confidence: 0.848126742400001

00:25:05.454 --> 00:25:08.030 biological signal within sleep architecture,

NOTE Confidence: 0.848126742400001

 $00:25:08.030 \longrightarrow 00:25:10.718$ and so would we find one

NOTE Confidence: 0.848126742400001

 $00:25:10.718 \longrightarrow 00:25:12.062$ within acute insomnia.

NOTE Confidence: 0.848126742400001

 $00:25:12.070 \longrightarrow 00:25:14.770$ Let's find out the answer is,

NOTE Confidence: 0.848126742400001

 $00{:}25{:}14.770 \dashrightarrow 00{:}25{:}17.682$ there does appear to be a tradeoff

NOTE Confidence: 0.848126742400001

 $00{:}25{:}17.682 \dashrightarrow 00{:}25{:}20.220$ when somebody has a cute insomnia.

NOTE Confidence: 0.848126742400001

 $00:25:20.220 \longrightarrow 00:25:22.908$ It appears that there seems to

NOTE Confidence: 0.848126742400001

 $00:25:22.908 \longrightarrow 00:25:25.690$ be a switch between N2 and N3.

NOTE Confidence: 0.848126742400001

 $00:25:25.690 \longrightarrow 00:25:28.216$ We reduced the amount of N3,

 $00:25:28.220 \longrightarrow 00:25:30.692$ slow wave sleep and we increase

NOTE Confidence: 0.848126742400001

 $00:25:30.692 \longrightarrow 00:25:32.850$ at about the same rate.

NOTE Confidence: 0.848126742400001

 $00:25:32.850 \longrightarrow 00:25:36.218$ How levels of N2 or stage two sleep?

NOTE Confidence: 0.848126742400001

 $00:25:36.220 \longrightarrow 00:25:39.084$ So there does appear to be a change

NOTE Confidence: 0.848126742400001

 $00:25:39.084 \longrightarrow 00:25:41.263$ in sleep architecture associated

NOTE Confidence: 0.848126742400001

 $00{:}25{:}41.263 \to 00{:}25{:}44.027$ with having acute in somnia.

NOTE Confidence: 0.848126742400001

 $00:25:44.030 \longrightarrow 00:25:45.920$ Now this is all wonderful.

NOTE Confidence: 0.848126742400001

 $00{:}25{:}45.920 \dashrightarrow 00{:}25{:}47.800$ We're mapping out acute in somnia.

NOTE Confidence: 0.848126742400001

 $00:25:47.800 \longrightarrow 00:25:49.190$ It's beautiful,

NOTE Confidence: 0.848126742400001

 $00:25:49.190 \longrightarrow 00:25:50.580$ it's wonderful.

NOTE Confidence: 0.848126742400001

 $00:25:50.580 \longrightarrow 00:25:52.512$ What we really want to know if

NOTE Confidence: 0.848126742400001

 $00:25:52.512 \longrightarrow 00:25:54.721$ we want to start thinking about

NOTE Confidence: 0.848126742400001

 $00{:}25{:}54.721 \dashrightarrow 00{:}25{:}57.343$ intervening and helping is what really

NOTE Confidence: 0.848126742400001

 $00:25:57.343 \longrightarrow 00:25:59.806$ makes somebody go acute to chronic.

NOTE Confidence: 0.848126742400001

 $00:25:59.810 \longrightarrow 00:26:01.286$ That's the key point.

 $00:26:01.286 \longrightarrow 00:26:03.500$ That's what we want to know,

NOTE Confidence: 0.848126742400001

 $00{:}26{:}03.500 \dashrightarrow 00{:}26{:}06.964$ because we know that in the majority of

NOTE Confidence: 0.848126742400001

 $00:26:06.964 \longrightarrow 00:26:10.437$ cases that it should go away on its own.

NOTE Confidence: 0.848126742400001

 $00:26:10.440 \longrightarrow 00:26:12.250$ So.

NOTE Confidence: 0.848126742400001

 $00:26:12.250 \longrightarrow 00:26:13.771$ Let's characterize people.

NOTE Confidence: 0.848126742400001

00:26:13.771 --> 00:26:17.320 So we've taken our group of people

NOTE Confidence: 0.848126742400001

 $00:26:17.407 \longrightarrow 00:26:19.069$ with acute insomnia.

NOTE Confidence: 0.848126742400001

 $00:26:19.070 \longrightarrow 00:26:21.550$ We followed them up.

NOTE Confidence: 0.848126742400001

 $00:26:21.550 \longrightarrow 00:26:23.524$ For the next three months and

NOTE Confidence: 0.848126742400001

 $00:26:23.524 \longrightarrow 00:26:26.098$ we've worked out who's gone on to

NOTE Confidence: 0.848126742400001

 $00:26:26.098 \longrightarrow 00:26:28.088$ develop chronic insomnia and who's

NOTE Confidence: 0.848126742400001

 $00:26:28.088 \longrightarrow 00:26:29.840$ naturally emitted from insomnia.

NOTE Confidence: 0.848126742400001

 $00:26:29.840 \longrightarrow 00:26:31.926$ So we've split that group and we're

NOTE Confidence: 0.848126742400001

 $00:26:31.926 \longrightarrow 00:26:34.092$ going to look at those baseline

NOTE Confidence: 0.848126742400001

00:26:34.092 --> 00:26:35.700 characteristics around the sleep

NOTE Confidence: 0.848126742400001

 $00{:}26{:}35.700 \dashrightarrow 00{:}26{:}37.760$ diary and sleep architecture.

 $00:26:37.760 \longrightarrow 00:26:40.329$ Are there any signals at that early

NOTE Confidence: 0.848126742400001

 $00:26:40.329 \longrightarrow 00:26:42.891$ stage which start to give us an

NOTE Confidence: 0.848126742400001

00:26:42.891 --> 00:26:44.967 indication of who's going to develop

NOTE Confidence: 0.848126742400001

 $00:26:45.046 \longrightarrow 00:26:47.056$ chronic insomnia and who's not

NOTE Confidence: 0.848126742400001

00:26:47.056 --> 00:26:49.583 lose naturally going to get better?

NOTE Confidence: 0.848126742400001

 $00:26:49.583 \longrightarrow 00:26:52.661$ So let's look at sleep diary

NOTE Confidence: 0.848126742400001

 $00:26:52.661 \longrightarrow 00:26:53.687$ information first.

NOTE Confidence: 0.848126742400001

 $00:26:53.690 \longrightarrow 00:26:54.540$ No differences,

NOTE Confidence: 0.848126742400001

 $00:26:54.540 \longrightarrow 00:26:57.515$ so it doesn't appear that the severity

NOTE Confidence: 0.848126742400001

 $00:26:57.515 \longrightarrow 00:27:00.189$ or the perceived severity of symptoms

NOTE Confidence: 0.848126742400001

 $00:27:00.189 \longrightarrow 00:27:02.924$ is the thing that fuels somebody

NOTE Confidence: 0.848126742400001

 $00:27:02.924 \longrightarrow 00:27:05.870$ going from acute to chronic insomnia.

NOTE Confidence: 0.848126742400001

 $00{:}27{:}05.870 \dashrightarrow 00{:}27{:}08.120$ No differences in sleep latency,

NOTE Confidence: 0.848126742400001

 $00:27:08.120 \longrightarrow 00:27:09.473$ number of awakenings,

NOTE Confidence: 0.848126742400001

 $00:27:09.473 \longrightarrow 00:27:11.277$ wake after sleep onset,

 $00:27:11.280 \longrightarrow 00:27:13.293$ total sleep time,

NOTE Confidence: 0.848126742400001

00:27:13.293 --> 00:27:15.977 or indeed sleep efficiency.

NOTE Confidence: 0.848126742400001

00:27:15.980 --> 00:27:16.347 OK,

NOTE Confidence: 0.848126742400001

00:27:16.347 --> 00:27:18.549 so it's not about the severity

NOTE Confidence: 0.848126742400001

 $00:27:18.549 \longrightarrow 00:27:20.636$ of the complaint that drives

NOTE Confidence: 0.848126742400001

 $00:27:20.636 \longrightarrow 00:27:22.460$ acute to chronic insomnia.

NOTE Confidence: 0.82627153

00:27:24.710 --> 00:27:26.620 Let's look at their architecture,

NOTE Confidence: 0.82627153

 $00:27:26.620 \longrightarrow 00:27:27.763$ the baseline architecture.

NOTE Confidence: 0.82627153

 $00:27:27.763 \longrightarrow 00:27:30.430$ And here we see some curious differences.

NOTE Confidence: 0.82627153

 $00:27:30.430 \longrightarrow 00:27:33.967$ What we see is those people who have acute

NOTE Confidence: 0.82627153

 $00:27:33.967 \longrightarrow 00:27:37.135$ in somnia but will remit within three months.

NOTE Confidence: 0.82627153

 $00:27:37.140 \longrightarrow 00:27:39.090$ In terms of REM latency,

NOTE Confidence: 0.82627153

 $00:27:39.090 \longrightarrow 00:27:41.430$ how rapidly there going into REM,

NOTE Confidence: 0.82627153

 $00:27:41.430 \longrightarrow 00:27:44.158$ what we are seeing is that they pretty

NOTE Confidence: 0.82627153

 $00:27:44.158 \longrightarrow 00:27:46.657$ much the same as normal sleepers

NOTE Confidence: 0.82627153

 $00:27:46.657 \longrightarrow 00:27:48.832$ rather than that 9200 minutes.

 $00:27:48.840 \longrightarrow 00:27:51.180$ Other people who go on to

NOTE Confidence: 0.82627153

00:27:51.180 --> 00:27:52.350 develop chronic insomnia,

NOTE Confidence: 0.82627153

00:27:52.350 --> 00:27:55.157 their REM latency is actually quite sure

NOTE Confidence: 0.82627153

00:27:55.157 --> 00:27:57.418 comparatively on average it's 66 minutes.

NOTE Confidence: 0.82627153

00:27:57.420 --> 00:27:57.810 Similarly,

NOTE Confidence: 0.82627153

 $00:27:57.810 \longrightarrow 00:28:01.320$ when we start to look at slow wave sleep,

NOTE Confidence: 0.82627153

 $00:28:01.320 \longrightarrow 00:28:04.296$ we see that there is a linear reduction

NOTE Confidence: 0.82627153

 $00:28:04.296 \longrightarrow 00:28:07.257$ in slow wave sleep by group status.

NOTE Confidence: 0.82627153

 $00:28:07.260 \longrightarrow 00:28:09.600$ With those people who go on

NOTE Confidence: 0.82627153

 $00{:}28{:}09.600 \dashrightarrow 00{:}28{:}11.160$ to develop chronic insomnia,

NOTE Confidence: 0.82627153

 $00{:}28{:}11.160 \dashrightarrow 00{:}28{:}13.012$ demonstrating the shortest amounts

NOTE Confidence: 0.82627153

 $00:28:13.012 \longrightarrow 00:28:15.790$ of slow wave sleep at baseline.

NOTE Confidence: 0.82627153

 $00{:}28{:}15.790 \dashrightarrow 00{:}28{:}20.398$ So that starts to give us an indication now.

NOTE Confidence: 0.82627153

 $00:28:20.400 \longrightarrow 00:28:21.816$ Is it about stress?

NOTE Confidence: 0.82627153

 $00:28:21.816 \longrightarrow 00:28:24.407$ Is it that stress that is fueling

00:28:24.407 --> 00:28:26.717 these changes in terms of REM

NOTE Confidence: 0.82627153

 $00:28:26.717 \longrightarrow 00:28:29.220$ in terms of slow wave sleep?

NOTE Confidence: 0.82627153

00:28:29.220 --> 00:28:31.380 Looking at Life Events scale scores,

NOTE Confidence: 0.82627153

 $00:28:31.380 \longrightarrow 00:28:32.820$ no real significant difference

NOTE Confidence: 0.82627153

 $00:28:32.820 \longrightarrow 00:28:34.260$ between those two groups,

NOTE Confidence: 0.82627153

 $00:28:34.260 \longrightarrow 00:28:36.675$ so it doesn't appear to be about

NOTE Confidence: 0.82627153

00:28:36.675 --> 00:28:38.940 the veracity of the life events.

NOTE Confidence: 0.82627153

00:28:38.940 --> 00:28:40.444 What about perceived stress,

NOTE Confidence: 0.82627153

 $00{:}28{:}40.444 \dashrightarrow 00{:}28{:}41.948$ scale scores so perceived

NOTE Confidence: 0.82627153

 $00:28:41.948 \longrightarrow 00:28:43.619$ stress over the last month?

NOTE Confidence: 0.82627153

00:28:43.620 --> 00:28:45.420 Again, no significant differences there,

NOTE Confidence: 0.82627153

 $00:28:45.420 \longrightarrow 00:28:47.580$ So what it appears is it's

NOTE Confidence: 0.82627153

 $00:28:47.580 \longrightarrow 00:28:49.020$ not about the stress,

NOTE Confidence: 0.82627153

 $00:28:49.020 \longrightarrow 00:28:51.180$ so we're doing this as a

NOTE Confidence: 0.82627153

 $00:28:51.180 \longrightarrow 00:28:52.260$ process of elimination.

NOTE Confidence: 0.82627153

00:28:52.260 --> 00:28:55.140 That's why it's taking me so many years,

 $00:28:55.140 \longrightarrow 00:28:57.660$ and that's why I look so old.

NOTE Confidence: 0.82627153

00:28:57.660 --> 00:28:59.396 I'm actually only 19.

NOTE Confidence: 0.82627153

 $00:28:59.396 \longrightarrow 00:29:00.698$ But in essence,

NOTE Confidence: 0.82627153

00:29:00.700 --> 00:29:02.510 through our process of elimination,

NOTE Confidence: 0.82627153

00:29:02.510 --> 00:29:04.592 we've determined that it's not really

NOTE Confidence: 0.82627153

 $00:29:04.592 \longrightarrow 00:29:06.869$ about the severity of the complaint,

NOTE Confidence: 0.82627153

 $00:29:06.870 \longrightarrow 00:29:09.480$ and it's not about the

NOTE Confidence: 0.82627153

 $00:29:09.480 \longrightarrow 00:29:12.090$ severity of the stress itself.

NOTE Confidence: 0.82627153

 $00:29:12.090 \longrightarrow 00:29:14.410$ What do we see this pattern in there?

NOTE Confidence: 0.82627153

 $00:29:14.410 \longrightarrow 00:29:16.610$ And this is something that sparked a little

NOTE Confidence: 0.82627153

 $00:29:16.610 \longrightarrow 00:29:18.760$ sideline is we've seen this pattern before.

NOTE Confidence: 0.82627153

 $00:29:18.760 \longrightarrow 00:29:21.686$ We've seen this pattern in the 70s.

NOTE Confidence: 0.82627153

 $00{:}29{:}21.690 \dashrightarrow 00{:}29{:}24.455$ I've seriously reduced REM latency

NOTE Confidence: 0.82627153

 $00:29:24.455 \longrightarrow 00:29:27.220$ and reduced slow wave sleep.

NOTE Confidence: 0.82627153

 $00:29:27.220 \longrightarrow 00:29:29.636$ Is also a marker.

 $00:29:29.636 \longrightarrow 00:29:31.448$ Of potential depression.

NOTE Confidence: 0.82627153

 $00:29:31.450 \longrightarrow 00:29:34.334$ So maybe it's the depression that's firming

NOTE Confidence: 0.82627153

 $00:29:34.334 \longrightarrow 00:29:37.632$ this up so we looked specifically at

NOTE Confidence: 0.82627153

00:29:37.632 --> 00:29:40.608 levels of anxiety levels of depression,

NOTE Confidence: 0.82627153

00:29:40.610 --> 00:29:43.536 and certainly you can see that those

NOTE Confidence: 0.82627153

 $00{:}29{:}43.536 \dashrightarrow 00{:}29{:}47.478$ people who go on to develop chronic in somnia.

NOTE Confidence: 0.82627153

 $00:29:47.480 \longrightarrow 00:29:49.770$ They have more anxious and

NOTE Confidence: 0.82627153

00:29:49.770 --> 00:29:51.602 depressive symptomology at baseline,

NOTE Confidence: 0.82627153

 $00{:}29{:}51.610 \dashrightarrow 00{:}29{:}56.920$ so that may well be one of our drivers.

NOTE Confidence: 0.82627153

 $00:29:56.920 \longrightarrow 00:29:58.504$ Now the thing we got to remember is

NOTE Confidence: 0.82627153

 $00:29:58.504 \longrightarrow 00:29:59.759$ that's actually quite a small sample,

NOTE Confidence: 0.82627153

 $00:29:59.760 \longrightarrow 00:30:00.260$ so we.

NOTE Confidence: 0.82627153

 $00:30:00.260 \longrightarrow 00:30:02.010$ Want to be a bit more mindful

NOTE Confidence: 0.82627153

 $00:30:02.010 \longrightarrow 00:30:03.818$ about larger samples before we

NOTE Confidence: 0.82627153

 $00:30:03.818 \longrightarrow 00:30:05.310$ can make these judgments?

NOTE Confidence: 0.82627153

 $00:30:05.310 \longrightarrow 00:30:07.982$ And I'm going to come on to that

 $00:\!30:\!07.982 --> 00:\!30:\!10.627$ in the next part of the talk.

NOTE Confidence: 0.82627153

 $00:30:10.630 \longrightarrow 00:30:13.078$ So we're going to take a break here.

NOTE Confidence: 0.82627153

00:30:13.080 --> 00:30:15.120 Before I start talking again,

NOTE Confidence: 0.82627153

 $00:30:15.120 \longrightarrow 00:30:16.436$ what do we know?

NOTE Confidence: 0.82627153

 $00:30:16.436 \longrightarrow 00:30:19.018$ So what do we know about sleeping

NOTE Confidence: 0.82627153

 $00:30:19.018 \longrightarrow 00:30:21.628$ with the enemy acute insomnia?

NOTE Confidence: 0.82627153

 $00:30:21.630 \longrightarrow 00:30:24.479$ It is associated with a precipitating event.

NOTE Confidence: 0.82627153

 $00{:}30{:}24.480 \dashrightarrow 00{:}30{:}26.916$ It's got a pretty high prevalence,

NOTE Confidence: 0.82627153

 $00:30:26.920 \longrightarrow 00:30:28.932$ 8-9 percent annual incidence

NOTE Confidence: 0.82627153

 $00:30:28.932 \longrightarrow 00:30:31.447$ is quite high as well.

NOTE Confidence: 0.82627153

 $00:30:31.450 \dashrightarrow 00:30:33.760$ It's associated with increased stage,

NOTE Confidence: 0.82627153

 $00{:}30{:}33.760 \dashrightarrow 00{:}30{:}36.790$ two decrease slow wave sleep at

NOTE Confidence: 0.82627153

 $00{:}30{:}36.790 \dashrightarrow 00{:}30{:}39.336$ transition to chronic insomnia is

NOTE Confidence: 0.82627153

 $00:30:39.336 \longrightarrow 00:30:41.976$ associated with the fast onset of

NOTE Confidence: 0.82627153

 $00{:}30{:}41.976 \dashrightarrow 00{:}30{:}44.652$ REM and decreased slow wave sleep

00:30:44.652 --> 00:30:47.620 that does look quite similar to what

NOTE Confidence: 0.8416653

 $00:30:47.620 \longrightarrow 00:30:51.841$ we see is the onset of an

NOTE Confidence: 0.8416653

00:30:51.841 --> 00:30:53.650 affective disorder alright.

NOTE Confidence: 0.8416653

00:30:53.650 --> 00:30:56.314 Now we've got to a point of thinking right?

NOTE Confidence: 0.8416653

 $00:30:56.320 \longrightarrow 00:30:57.828$ Let's talk about intervention.

NOTE Confidence: 0.8416653

 $00:30:57.828 \longrightarrow 00:31:01.489$ What are we going to do about intervention?

NOTE Confidence: 0.8416653

 $00:31:01.490 \longrightarrow 00:31:04.668$ If we were to create an intervention.

NOTE Confidence: 0.8416653

 $00:31:04.670 \longrightarrow 00:31:06.214$ Where would we intervene?

NOTE Confidence: 0.8416653

 $00{:}31{:}06.214 \dashrightarrow 00{:}31{:}08.530$ What's the point that we intervene?

NOTE Confidence: 0.8416653

 $00:31:08.530 \longrightarrow 00:31:10.744$ And certainly if we think about

NOTE Confidence: 0.8416653

 $00:31:10.744 \longrightarrow 00:31:12.780$ it as a precipitating events,

NOTE Confidence: 0.8416653

 $00:31:12.780 \longrightarrow 00:31:14.705$ you'd maybe want to look

NOTE Confidence: 0.8416653

 $00:31:14.705 \longrightarrow 00:31:16.245$ at a stress framework,

NOTE Confidence: 0.8416653

 $00:31:16.250 \longrightarrow 00:31:19.338$ but that doesn't appear to be the case,

NOTE Confidence: 0.8416653

 $00:31:19.340 \longrightarrow 00:31:21.596$ so perhaps we should study the

NOTE Confidence: 0.8416653

00:31:21.596 --> 00:31:23.580 blue area from Spillmans model.

 $00:31:23.580 \longrightarrow 00:31:25.848$ Maybe we should look to see are

NOTE Confidence: 0.8416653

 $00{:}31{:}25.848 \dashrightarrow 00{:}31{:}27.844$ these perpetuate ING behaviors and

NOTE Confidence: 0.8416653

 $00:31:27.844 \longrightarrow 00:31:29.756$ cognitions and affective issues?

NOTE Confidence: 0.8416653

00:31:29.760 --> 00:31:32.076 I think present during acute insomnia.

NOTE Confidence: 0.8959294

 $00:31:34.890 \longrightarrow 00:31:38.726$ So this is a much larger sample.

NOTE Confidence: 0.8959294

 $00:31:38.730 \longrightarrow 00:31:42.069$ And here we got a group of normal sleepers

NOTE Confidence: 0.8959294

00:31:42.069 --> 00:31:45.349 737 against people with acute insomnia,

NOTE Confidence: 0.8959294

 $00:31:45.350 \longrightarrow 00:31:47.681$ and so we've looked at them in

NOTE Confidence: 0.8959294

00:31:47.681 --> 00:31:50.507 terms of their sleep symptoms and

NOTE Confidence: 0.8959294

 $00:31:50.507 \longrightarrow 00:31:52.835$ predisposing factors of personality,

NOTE Confidence: 0.8959294

 $00{:}31{:}52.840 \dashrightarrow 00{:}31{:}55.045$ arousal predisposition and of course

NOTE Confidence: 0.8959294

 $00:31:55.045 \longrightarrow 00:31:56.809$ stress and insomnia vulnerability.

NOTE Confidence: 0.8959294

 $00:31:56.810 \longrightarrow 00:31:58.574$ Then we've looked at

NOTE Confidence: 0.8959294

 $00:31:58.574 \longrightarrow 00:31:59.897$ these precipitants again.

NOTE Confidence: 0.8959294

 $00:31:59.900 \longrightarrow 00:32:01.768$ Life events, perceived stress,

 $00:32:01.768 \longrightarrow 00:32:05.155$ anxiety and depression and see if that

NOTE Confidence: 0.8959294

 $00:32:05.155 \longrightarrow 00:32:07.710$ anxiety and depression comes forward.

NOTE Confidence: 0.8959294

 $00:32:07.710 \longrightarrow 00:32:10.798$ We just want to take account of coping.

NOTE Confidence: 0.8959294

 $00:32:10.800 \longrightarrow 00:32:13.224$ Of course, it may be that how you

NOTE Confidence: 0.8959294

 $00:32:13.224 \longrightarrow 00:32:15.432$ cope with that initial precipitating

NOTE Confidence: 0.8959294

 $00:32:15.432 \longrightarrow 00:32:18.480$ event that fuels whether you develop

NOTE Confidence: 0.8959294

 $00{:}32{:}18.480 \dashrightarrow 00{:}32{:}20.828$ in somnia in a chronic form or not.

NOTE Confidence: 0.8959294

 $00:32:20.830 \longrightarrow 00:32:23.165$ So we're looking at thought

NOTE Confidence: 0.8959294

 $00{:}32{:}23.165 \dashrightarrow 00{:}32{:}25.033$ control strategies and maladaptive

NOTE Confidence: 0.8959294

 $00:32:25.033 \longrightarrow 00:32:27.339$ and adaptive forms of coping.

NOTE Confidence: 0.8959294

 $00:32:27.340 \longrightarrow 00:32:27.770$ Finally,

NOTE Confidence: 0.8959294

00:32:27.770 --> 00:32:30.332 let's throw in those perpetuating factors

NOTE Confidence: 0.8959294

 $00:32:30.332 \longrightarrow 00:32:33.334$ that really should be plainly tiny tiny.

NOTE Confidence: 0.8959294

00:32:33.334 --> 00:32:35.896 At this point of acute insomnia,

NOTE Confidence: 0.8959294

 $00:32:35.900 \longrightarrow 00:32:38.468$ we're going to look at fatigue,

NOTE Confidence: 0.8959294

 $00:32:38.470 \longrightarrow 00:32:39.326$ dysfunctional beliefs,

 $00:32:39.326 \longrightarrow 00:32:41.462$ cognitive and behavioral sleep preoccupation.

NOTE Confidence: 0.8959294

 $00:32:41.462 \longrightarrow 00:32:44.884$ What we mean by that is when people

NOTE Confidence: 0.8959294

 $00:32:44.884 \longrightarrow 00:32:47.026$ adopt cognitive or behavioral actions

NOTE Confidence: 0.8959294

 $00:32:47.026 \longrightarrow 00:32:49.592$ which are detrimental to their sleep.

NOTE Confidence: 0.8959294

 $00:32:49.592 \longrightarrow 00:32:52.164$ Going to bed early, for example,

NOTE Confidence: 0.8959294

00:32:52.164 --> 00:32:54.298 lying in drinking more coffee,

NOTE Confidence: 0.8330811

00:32:54.300 --> 00:32:58.038 worrying about it during the daytime.

NOTE Confidence: 0.8330811

 $00:32:58.040 \longrightarrow 00:33:00.814$ The affect if element of sleep preoccupation

NOTE Confidence: 0.8330811

 $00:33:00.814 \longrightarrow 00:33:03.190$ is much more focused on rumination.

NOTE Confidence: 0.8330811

 $00{:}33{:}03.190 \dashrightarrow 00{:}33{:}05.560$ I can't stop thinking about it.

NOTE Confidence: 0.8330811

00:33:05.560 --> 00:33:09.235 I can't get over the insomnia itself.

NOTE Confidence: 0.8330811

 $00:33:09.240 \longrightarrow 00:33:11.266$ Finally, we also want to

NOTE Confidence: 0.8330811

00:33:11.266 --> 00:33:13.296 look at pre sleep arousal.

NOTE Confidence: 0.8330811

 $00:33:13.300 \longrightarrow 00:33:16.140$ Is it the point that we've actually

NOTE Confidence: 0.8330811

 $00:33:16.140 \longrightarrow 00:33:18.165$ created a form of hyperarousal,

 $00:33:18.170 \longrightarrow 00:33:20.780$ be it somatic or cognitive in

NOTE Confidence: 0.8330811

 $00{:}33{:}20.780 \dashrightarrow 00{:}33{:}23.380$ terms of fueling this in somnia?

NOTE Confidence: 0.8330811

 $00:33:23.380 \longrightarrow 00:33:25.633$ Alright, so looking at differences

NOTE Confidence: 0.8330811

 $00:33:25.633 \longrightarrow 00:33:28.342$ between our normal sleepers and now

NOTE Confidence: 0.8330811

00:33:28.342 --> 00:33:30.703 individuals with acute insomnia, yeah,

NOTE Confidence: 0.8330811

 $00:33:30.703 \longrightarrow 00:33:33.468$ there's differences in each domain.

NOTE Confidence: 0.8330811

 $00{:}33{:}33.470 \dashrightarrow 00{:}33{:}35.885$ Now they don't tell us much about

NOTE Confidence: 0.8330811

 $00:33:35.885 \longrightarrow 00:33:37.890$ what predict who goes chronic,

NOTE Confidence: 0.8330811

 $00{:}33{:}37.890 \dashrightarrow 00{:}33{:}40.347$ what they do do is give us

NOTE Confidence: 0.8330811

 $00:33:40.347 \longrightarrow 00:33:42.299$ an indication of what does.

NOTE Confidence: 0.8330811

 $00:33:42.300 \longrightarrow 00:33:44.876$ Somebody with their cute insomnia look like.

NOTE Confidence: 0.8330811

 $00:33:44.880 \longrightarrow 00:33:47.622$ What are those risks and what

NOTE Confidence: 0.8330811

 $00{:}33{:}47.622 \dashrightarrow 00{:}33{:}49.450$ are those associated outcomes

NOTE Confidence: 0.8330811

 $00{:}33{:}49.528 \to 00{:}33{:}51.620$ with having acute in somnia?

NOTE Confidence: 0.8330811

 $00:33:51.620 \longrightarrow 00:33:54.014$ Again, what we really want to do,

NOTE Confidence: 0.8330811

 $00:33:54.020 \longrightarrow 00:33:56.340$ however, is figure out.

 $00:33:56.340 \longrightarrow 00:34:00.858$ What is predicting who goes chronic?

NOTE Confidence: 0.8330811

 $00{:}34{:}00.860 --> 00{:}34{:}03.368$ Again, got a nice sample here.

NOTE Confidence: 0.8330811

 $00:34:03.370 \longrightarrow 00:34:05.890$ Got 129 people with acute insomnia.

NOTE Confidence: 0.8330811

 $00:34:05.890 \longrightarrow 00:34:07.984$ We've separated them out into

NOTE Confidence: 0.8330811

 $00:34:07.984 \longrightarrow 00:34:10.062$ those people who get better.

NOTE Confidence: 0.8330811

00:34:10.062 --> 00:34:10.476 Naturally,

NOTE Confidence: 0.8330811

 $00:34:10.476 \longrightarrow 00:34:13.864$ Ramit and those people who go on to

NOTE Confidence: 0.8330811

00:34:13.864 --> 00:34:16.354 develop chronic insomnia in the future,

NOTE Confidence: 0.8330811

 $00{:}34{:}16.360 \dashrightarrow 00{:}34{:}19.636$ and we're going to look up all of

NOTE Confidence: 0.8330811

 $00{:}34{:}19.636 \dashrightarrow 00{:}34{:}21.631$ those significant variables that we

NOTE Confidence: 0.8330811

 $00{:}34{:}21.631 \dashrightarrow 00{:}34{:}24.319$ got from our cross sectional study

NOTE Confidence: 0.8566386

 $00:34:24.320 \longrightarrow 00:34:26.420$ to look at what other

NOTE Confidence: 0.850489418181818

 $00{:}34{:}26.420 \dashrightarrow 00{:}34{:}28.608$ predictors. What predicts it

NOTE Confidence: 0.850489418181818

00:34:28.608 --> 00:34:32.540 becoming the enemy a long term enemy?

NOTE Confidence: 0.850489418181818

 $00:34:32.540 \longrightarrow 00:34:33.500$ And Interestingly,

 $00:34:33.500 \longrightarrow 00:34:37.318$ which is not quite what we might expect,

NOTE Confidence: 0.850489418181818

 $00:34:37.320 \longrightarrow 00:34:42.010$ is that it's not about predisposing factors.

NOTE Confidence: 0.850489418181818

 $00:34:42.010 \longrightarrow 00:34:43.934$ In terms of precipitants,

NOTE Confidence: 0.850489418181818

 $00:34:43.934 \longrightarrow 00:34:46.354$ even the anxiety does appear

NOTE Confidence: 0.850489418181818

 $00:34:46.354 \longrightarrow 00:34:49.300$ not to be fueling somebody going

NOTE Confidence: 0.850489418181818

 $00:34:49.300 \longrightarrow 00:34:51.605$ acute to chronic more so.

NOTE Confidence: 0.850489418181818

 $00:34:51.610 \longrightarrow 00:34:53.050$ Depression, depressions, measures,

NOTE Confidence: 0.850489418181818

 $00:34:53.050 \longrightarrow 00:34:55.930$ baseline are a good predictor of

NOTE Confidence: 0.850489418181818

 $00:34:55.930 \longrightarrow 00:34:58.810$ who's going to go chronic against

NOTE Confidence: 0.850489418181818

 $00:34:58.810 \longrightarrow 00:35:02.170$ who is going to go from it.

NOTE Confidence: 0.850489418181818

 $00:35:02.170 \longrightarrow 00:35:04.570$ So higher levels of depression

NOTE Confidence: 0.850489418181818

 $00:35:04.570 \longrightarrow 00:35:06.490$ with about our coping.

NOTE Confidence: 0.850489418181818

 $00:35:06.490 \longrightarrow 00:35:10.030$ Nothing comes through from coping.

NOTE Confidence: 0.850489418181818

 $00:35:10.030 \longrightarrow 00:35:11.334$ But what is interesting?

NOTE Confidence: 0.850489418181818

 $00:35:11.334 \longrightarrow 00:35:13.959$ And I think this talks a lot to

NOTE Confidence: 0.850489418181818

 $00:35:13.959 \longrightarrow 00:35:16.052$ spillmans model is when we look at

 $00:35:16.052 \longrightarrow 00:35:18.210$ the factors that are significant

NOTE Confidence: 0.850489418181818

 $00:35:18.210 \longrightarrow 00:35:20.886$ predictors of who will become chronic.

NOTE Confidence: 0.850489418181818

 $00:35:20.890 \longrightarrow 00:35:24.061$ What we can see is it's focused

NOTE Confidence: 0.850489418181818

00:35:24.061 --> 00:35:25.924 largely around cognitive factors,

NOTE Confidence: 0.850489418181818

 $00{:}35{:}25.924 \dashrightarrow 00{:}35{:}28.394$ behavioral actions which are used

NOTE Confidence: 0.850489418181818

 $00:35:28.394 \longrightarrow 00:35:31.238$ to address the insomnia during the

NOTE Confidence: 0.850489418181818

 $00:35:31.238 \longrightarrow 00:35:33.596$ acute phase going to bed early,

NOTE Confidence: 0.850489418181818

 $00:35:33.600 \longrightarrow 00:35:35.403$ lying in napping.

NOTE Confidence: 0.850489418181818

 $00:35:35.403 \longrightarrow 00:35:38.158$ Also, those affect, if ruminations,

NOTE Confidence: 0.850489418181818

 $00:35:38.158 \longrightarrow 00:35:39.580$ that we see.

NOTE Confidence: 0.850489418181818

00:35:39.580 --> 00:35:42.260 People can't stop thinking about

NOTE Confidence: 0.850489418181818

 $00:35:42.260 \longrightarrow 00:35:44.940$ sleep craving sleep during that

NOTE Confidence: 0.850489418181818

 $00{:}35{:}45.025 \dashrightarrow 00{:}35{:}48.014$ acute phase that also appears to be

NOTE Confidence: 0.850489418181818

 $00:35:48.014 \longrightarrow 00:35:51.139$ driving us into the chronic insomnia.

NOTE Confidence: 0.850489418181818

 $00:35:51.140 \longrightarrow 00:35:54.278$ So what that gives us is the indication

 $00:35:54.278 \longrightarrow 00:35:57.009$ that we don't really want a stressed

NOTE Confidence: 0.850489418181818

 $00:35:57.009 \dashrightarrow 00:35:58.854$ based management system in order

NOTE Confidence: 0.850489418181818

00:35:58.854 --> 00:36:01.359 to try to manage acute insomnia,

NOTE Confidence: 0.850489418181818

 $00:36:01.360 \longrightarrow 00:36:03.718$ we want a cognitive behavioral framework,

NOTE Confidence: 0.850489418181818

 $00:36:03.720 \longrightarrow 00:36:05.932$ so this is what we've let us

NOTE Confidence: 0.850489418181818

00:36:05.932 --> 00:36:08.430 now to our treatment pathway.

NOTE Confidence: 0.8466981

 $00:36:12.010 \longrightarrow 00:36:14.469$ Can we circumvent the transition and

NOTE Confidence: 0.8466981

 $00:36:14.469 \longrightarrow 00:36:17.220$ we stop people going from acute to

NOTE Confidence: 0.8466981

 $00{:}36{:}17.297 \dashrightarrow 00{:}36{:}19.919$ chronic insomnia and we're going to

NOTE Confidence: 0.8466981

 $00:36:19.919 \longrightarrow 00:36:22.640$ use something called A1 single shot.

NOTE Confidence: 0.8466981

 $00{:}36{:}22.640 \dashrightarrow 00{:}36{:}25.608$ That's a single shot of CBT I.

NOTE Confidence: 0.8210517

 $00:36:27.880 \longrightarrow 00:36:30.210$ So let's go back to those brief

NOTE Confidence: 0.8210517

 $00:36:30.210 \longrightarrow 00:36:32.190$ interventions because we need to now

NOTE Confidence: 0.8210517

00:36:32.190 --> 00:36:34.260 frame how much of our intervention,

NOTE Confidence: 0.8210517

 $00:36:34.260 \longrightarrow 00:36:36.660$ how much of that weight do we need

NOTE Confidence: 0.8210517

 $00:36:36.660 \longrightarrow 00:36:39.330$ to put in there in order to do what

 $00:36:39.330 \longrightarrow 00:36:42.021$ we need to do to circumvent the

NOTE Confidence: 0.8210517

 $00:36:42.021 \longrightarrow 00:36:43.675$ transition to chronic insomnia?

NOTE Confidence: 0.8210517

00:36:43.675 --> 00:36:46.020 So going back to those brief interventions,

NOTE Confidence: 0.8210517

 $00:36:46.020 \longrightarrow 00:36:48.378$ what we can see is generally they're

NOTE Confidence: 0.8210517

 $00:36:48.380 \longrightarrow 00:36:50.725$ working on about an hour contact time.

NOTE Confidence: 0.8210517

00:36:50.730 --> 00:36:53.026 Look at the work of Jack Edinger

NOTE Confidence: 0.8210517

 $00:36:53.026 \longrightarrow 00:36:55.428$ and Anne Germain works out at about

NOTE Confidence: 0.8210517

 $00:36:55.430 \longrightarrow 00:36:58.778$ an hour on average contact time.

NOTE Confidence: 0.8210517

 $00:36:58.780 \longrightarrow 00:37:01.884$ And then if we look at the dose

NOTE Confidence: 0.8210517

00:37:01.884 --> 00:37:03.819 response trial by Jack Edinger,

NOTE Confidence: 0.8210517

 $00{:}37{:}03.820 \dashrightarrow 00{:}37{:}05.635$ four sessions helped the greatest

NOTE Confidence: 0.8210517

 $00:37:05.635 \longrightarrow 00:37:08.349$ impact in terms of number of clinical

NOTE Confidence: 0.8210517

 $00:37:08.349 \longrightarrow 00:37:10.419$ remissions followed by one session,

NOTE Confidence: 0.8210517

 $00:37:10.420 \dashrightarrow 00:37:12.748$ 8 sessions, and then two sessions.

NOTE Confidence: 0.8210517

 $00:37:12.750 \longrightarrow 00:37:15.078$ Now I don't know about you,

 $00:37:15.080 \longrightarrow 00:37:17.789$ and if you were maybe do CBT.

NOTE Confidence: 0.8210517

 $00{:}37{:}17.790 \dashrightarrow 00{:}37{:}21.288$ I offering somebody four sessions of 15

NOTE Confidence: 0.8210517

 $00:37:21.288 \longrightarrow 00:37:24.340$ minutes. Will probably have you killed.

NOTE Confidence: 0.8210517

 $00:37:24.340 \longrightarrow 00:37:27.985$ So OK, let's then go back and say next.

NOTE Confidence: 0.8210517

 $00:37:27.990 \longrightarrow 00:37:30.020$ One down is one session,

NOTE Confidence: 0.8210517

 $00:37:30.020 \longrightarrow 00:37:32.239$ so one session of one hour in

NOTE Confidence: 0.8210517

 $00{:}37{:}32.239 \to 00{:}37{:}34.893$ order to get some clinical gain

NOTE Confidence: 0.8210517

 $00:37:34.893 \longrightarrow 00:37:36.516$ within chronic insomnia,

NOTE Confidence: 0.8210517

 $00{:}37{:}36.520 \dashrightarrow 00{:}37{:}39.552$ which should be enough in order to

NOTE Confidence: 0.8210517

 $00:37:39.552 \longrightarrow 00:37:42.057$ affect change in acute insomnia.

NOTE Confidence: 0.8210517

 $00:37:42.060 \longrightarrow 00:37:44.344$ Just as a sideline,

NOTE Confidence: 0.8210517

 $00:37:44.344 \longrightarrow 00:37:47.770$ Jack Edinger also tried a pamphlet.

NOTE Confidence: 0.8210517

 $00:37:47.770 \longrightarrow 00:37:50.458$ And because of that I wanted a pamphlet.

NOTE Confidence: 0.8210517

 $00:37:50.460 \longrightarrow 00:37:52.848$ No other reason I want to

NOTE Confidence: 0.8210517

 $00:37:52.848 \longrightarrow 00:37:54.860$ conflict with Jack had one.

NOTE Confidence: 0.8210517

00:37:54.860 --> 00:37:58.070 So now I've got to create a pamphlet, yay.

 $00:37:58.070 \longrightarrow 00:38:01.290$ Alright, so here's the pamphlet.

NOTE Confidence: 0.8210517

 $00{:}38{:}01.290 \dashrightarrow 00{:}38{:}03.510$ First simple pamphlet and it's taking

NOTE Confidence: 0.8210517

00:38:03.510 --> 00:38:06.470 quite a few of the elements of CBT,

NOTE Confidence: 0.8210517

 $00:38:06.470 \longrightarrow 00:38:09.430$ but doing him in a much lighter touch.

NOTE Confidence: 0.8210517

 $00:38:09.430 \longrightarrow 00:38:10.170$ It's framed.

NOTE Confidence: 0.8210517

 $00:38:10.170 \longrightarrow 00:38:12.390$ There's something called the 3D's detect.

NOTE Confidence: 0.8210517

 $00:38:12.390 \longrightarrow 00:38:14.980$ So that's how to record a sleep

NOTE Confidence: 0.8210517

 $00{:}38{:}14.980 \longrightarrow 00{:}38{:}17.200$ diary and when to seek help.

NOTE Confidence: 0.8456078

00:38:18.400 --> 00:38:20.630 Detach that gives us our

NOTE Confidence: 0.8456078

 $00:38:20.630 \longrightarrow 00:38:21.968$ stimulus control instructions.

NOTE Confidence: 0.8456078

 $00:38:21.970 \longrightarrow 00:38:24.195$ If you're awake in bed,

NOTE Confidence: 0.8456078

00:38:24.195 --> 00:38:27.768 get out of the bed, do something else,

NOTE Confidence: 0.8456078

 $00{:}38{:}27.770 \dashrightarrow 00{:}38{:}31.568$ go back to bed when you are tired and

NOTE Confidence: 0.8456078

 $00:38:31.568 \longrightarrow 00:38:34.008$ sleepy again, and finally distract.

NOTE Confidence: 0.8456078

 $00:38:34.008 \longrightarrow 00:38:36.238$ This is our cognitive techniques.

00:38:36.240 --> 00:38:38.024 We've got cognitive control,

NOTE Confidence: 0.8456078

 $00{:}38{:}38.024 --> 00{:}38{:}38.916 \ constructive \ worry,$

NOTE Confidence: 0.8456078

 $00:38:38.920 \longrightarrow 00:38:41.601$ putting the day to bed before you

NOTE Confidence: 0.8456078

00:38:41.601 --> 00:38:45.158 go to bed and giving people imagery,

NOTE Confidence: 0.8456078

00:38:45.160 --> 00:38:46.242 distraction techniques.

NOTE Confidence: 0.8456078

00:38:46.242 --> 00:38:48.406 As per Alison Harvey.

NOTE Confidence: 0.8456078

 $00:38:48.410 \longrightarrow 00:38:50.433$ OK, so we've now got our pamphlet

NOTE Confidence: 0.8456078

 $00:38:50.433 \longrightarrow 00:38:53.364$ and it is beautiful, isn't it?

NOTE Confidence: 0.8456078

 $00:38:53.364 \longrightarrow 00:38:54.688$ It's blue.

NOTE Confidence: 0.8456078

 $00:38:54.690 \longrightarrow 00:38:57.534$ First thing we want to do is check out

NOTE Confidence: 0.8456078

 $00{:}38{:}57.534 \dashrightarrow 00{:}39{:}00.567$ the feasibility on the pamphlet itself.

NOTE Confidence: 0.8456078

 $00:39:00.570 \longrightarrow 00:39:02.420$ Does the pamphlet do anything

NOTE Confidence: 0.8456078

00:39:02.420 --> 00:39:04.270 because it's got some active

NOTE Confidence: 0.8456078

00:39:04.336 --> 00:39:06.060 treatment modalities in it?

NOTE Confidence: 0.8456078

00:39:06.060 --> 00:39:07.696 Is it doing anything?

NOTE Confidence: 0.8456078

00:39:07.696 --> 00:39:10.150 So we've done a feasibility study

 $00:39:10.228 \longrightarrow 00:39:12.772$ with a sample of individuals with

NOTE Confidence: 0.8456078

 $00{:}39{:}12.772 \dashrightarrow 00{:}39{:}15.526$ acute in somnia and what we can see

NOTE Confidence: 0.8456078

 $00:39:15.526 \longrightarrow 00:39:17.815$ is even a week after somebody has

NOTE Confidence: 0.8456078

 $00:39:17.820 \longrightarrow 00:39:20.166$ been given just the pamphlet alone.

NOTE Confidence: 0.8456078

 $00:39:20.170 \dashrightarrow 00:39:22.432$ We see significant reductions in terms

NOTE Confidence: 0.8456078

 $00:39:22.432 \longrightarrow 00:39:24.480$ of cognitive and somatic arousal.

NOTE Confidence: 0.8456078

 $00:39:24.480 \longrightarrow 00:39:25.780$ Fantastic, we're getting there.

NOTE Confidence: 0.8456078

 $00:39:25.780 \longrightarrow 00:39:27.080$ What about the hour?

NOTE Confidence: 0.8456078

 $00:39:27.080 \longrightarrow 00:39:29.103$ What are you going to do with

NOTE Confidence: 0.8456078

00:39:29.103 --> 00:39:30.980 somebody in your single session?

NOTE Confidence: 0.8456078

 $00:39:30.980 \longrightarrow 00:39:33.158$ In essence, we talk about sleep,

NOTE Confidence: 0.8456078

00:39:33.160 --> 00:39:34.620 education and sleep hygiene,

NOTE Confidence: 0.8456078

 $00{:}39{:}34.620 \dashrightarrow 00{:}39{:}36.553$ but again, very light touch.

NOTE Confidence: 0.8456078

 $00:39:36.553 \dashrightarrow 00:39:38.558$ Most patients with insomnia I've

NOTE Confidence: 0.8456078

 $00:39:38.558 \longrightarrow 00:39:40.721$ already got pretty good sleep hygiene

 $00:39:40.721 \longrightarrow 00:39:42.990$ by the time they come to you.

NOTE Confidence: 0.8456078

 $00:39:42.990 \longrightarrow 00:39:45.180$ It's really focused on sleep restriction,

NOTE Confidence: 0.8456078

00:39:45.180 --> 00:39:47.358 and so we're doing a basic

NOTE Confidence: 0.8456078

00:39:47.358 --> 00:39:48.447 sleep restriction protocol,

NOTE Confidence: 0.8456078

 $00:39:48.450 \longrightarrow 00:39:50.526$ previous weeks total sleep time becomes

NOTE Confidence: 0.8456078

 $00:39:50.526 \dashrightarrow 00:39:53.179$ time in bed for the following week.

NOTE Confidence: 0.8456078

 $00:39:53.180 \longrightarrow 00:39:55.812$ Anchor your time in bed to the

NOTE Confidence: 0.8456078

00:39:55.812 --> 00:39:58.122 morning and titrate at 15 minutes

NOTE Confidence: 0.8456078

 $00:39:58.122 \longrightarrow 00:40:00.330$ after week one and then every.

NOTE Confidence: 0.8456078

00:40:00.330 --> 00:40:01.648 Subsequent week,

NOTE Confidence: 0.8456078

 $00{:}40{:}01.648 \mathrel{--}{>} 00{:}40{:}04.943$ so very standardized CBT based

NOTE Confidence: 0.8456078

 $00{:}40{:}04.943 \dashrightarrow 00{:}40{:}06.920$ sleep restriction protocol.

NOTE Confidence: 0.8456078

 $00:40:06.920 \longrightarrow 00:40:09.308$ Introduce the pamphlet and then discuss

NOTE Confidence: 0.8456078

 $00{:}40{:}09.308 \dashrightarrow 00{:}40{:}10.900$ any barriers to implementation.

NOTE Confidence: 0.8456078

 $00:40:10.900 \longrightarrow 00:40:13.288$ So now we've got our intervention.

NOTE Confidence: 0.8456078

 $00:40:13.290 \longrightarrow 00:40:16.069$ We've done all of the background work.

 $00:40:16.070 \longrightarrow 00:40:20.398$ Let's take the intervention out for a spin.

NOTE Confidence: 0.8456078

 $00{:}40{:}20.400 \to 00{:}40{:}23.130$ So we've got a randomized control trial.

NOTE Confidence: 0.8456078

00:40:23.130 --> 00:40:27.318 Again, small sample, but adequately powered.

NOTE Confidence: 0.8456078

 $00:40:27.320 \longrightarrow 00:40:29.004$ 20 randomized to weightless

NOTE Confidence: 0.8456078

 $00:40:29.004 \longrightarrow 00:40:31.530$ control and 20 randomized to the

NOTE Confidence: 0.8456078

 $00:40:31.609 \longrightarrow 00:40:33.754$ intervention and the delivery of

NOTE Confidence: 0.8456078

 $00:40:33.754 \longrightarrow 00:40:36.180$ the intervention was done by me.

NOTE Confidence: 0.8456078

 $00:40:36.180 \longrightarrow 00:40:38.290$ And that's important later on.

NOTE Confidence: 0.86284804

00:40:41.120 --> 00:40:44.392 Single session 60 to 70 minutes and the

NOTE Confidence: 0.86284804

 $00:40:44.392 \longrightarrow 00:40:46.797$ pamphlet given one month follow up.

NOTE Confidence: 0.86284804

 $00:40:46.800 \longrightarrow 00:40:48.812$ What is the outcome?

NOTE Confidence: 0.86284804

00:40:48.812 --> 00:40:50.930 In essence, actually pretty good.

NOTE Confidence: 0.86284804

 $00:40:50.930 \longrightarrow 00:40:53.890$ We've got a 60% remission rate at one

NOTE Confidence: 0.86284804

 $00:40:53.890 \longrightarrow 00:40:56.110$ month compared to our weakness control,

NOTE Confidence: 0.86284804

 $00:40:56.110 \longrightarrow 00:40:59.848$ which is only 15%, which is significant.

 $00:40:59.850 \longrightarrow 00:41:01.740$ What's interesting about the first

NOTE Confidence: 0.86284804

 $00:41:01.740 \longrightarrow 00:41:04.060$ trial was that by three months

NOTE Confidence: 0.86284804

 $00:41:04.060 \longrightarrow 00:41:06.238$ we saw an increase in remission.

NOTE Confidence: 0.86284804

00:41:06.240 --> 00:41:08.496 In those people that were treated,

NOTE Confidence: 0.86284804

 $00:41:08.500 \longrightarrow 00:41:11.475$ it went up to 70, three point, 7%.

NOTE Confidence: 0.86284804

 $00:41:11.475 \longrightarrow 00:41:13.665$ That's not unusual to see within

NOTE Confidence: 0.86284804

 $00:41:13.665 \longrightarrow 00:41:16.015$ a CBT format, either that it's

NOTE Confidence: 0.86284804

 $00:41:16.015 \longrightarrow 00:41:18.265$ the gift that keeps on giving.

NOTE Confidence: 0.86284804

 $00{:}41{:}18.270 \dashrightarrow 00{:}41{:}21.278$ We tend to see increases in total sleep

NOTE Confidence: 0.86284804

 $00:41:21.278 \longrightarrow 00:41:23.910$ time after the patient has left us,

NOTE Confidence: 0.86284804

 $00{:}41{:}23.910 \dashrightarrow 00{:}41{:}26.166$ so this is a good start.

NOTE Confidence: 0.86284804

 $00:41:26.170 \longrightarrow 00:41:29.243$ We've got a good start in terms

NOTE Confidence: 0.86284804

 $00:41:29.243 \longrightarrow 00:41:31.150$ of randomized control trial.

NOTE Confidence: 0.86284804

00:41:31.150 --> 00:41:33.418 I don't know about everyone else,

NOTE Confidence: 0.86284804

 $00:41:33.420 \longrightarrow 00:41:36.073$ but I am constantly being asked to

NOTE Confidence: 0.86284804

 $00{:}41{:}36.073 \dashrightarrow 00{:}41{:}38.166$ do things quicker, cheaper, faster.

 $00:41:38.166 \longrightarrow 00:41:40.429$ So the next step, D.

NOTE Confidence: 0.86284804

00:41:40.429 --> 00:41:43.570 Oh no, it's not does it impacts on sleep?

NOTE Confidence: 0.86284804

00:41:43.570 --> 00:41:46.006 I suppose that's quite an important question,

NOTE Confidence: 0.86284804

00:41:46.010 --> 00:41:48.446 isn't it? Does it impact on sleep?

NOTE Confidence: 0.86284804

00:41:48.450 --> 00:41:48.798 Absolutely,

NOTE Confidence: 0.86284804

 $00:41:48.798 \longrightarrow 00:41:51.234$ we can see some nice effect sizes,

NOTE Confidence: 0.86284804

 $00:41:51.240 \longrightarrow 00:41:52.905$ moderately nice effect sizes in

NOTE Confidence: 0.86284804

 $00{:}41{:}52.905 \dashrightarrow 00{:}41{:}55.080$ terms of reductions in sleep latency,

NOTE Confidence: 0.86284804

 $00:41:55.080 \longrightarrow 00:41:57.530$ wake after sleep onset, and sleep efficiency.

NOTE Confidence: 0.86284804

00:41:57.530 --> 00:41:59.270 So, as I was saying,

NOTE Confidence: 0.86284804

 $00{:}41{:}59.270 \dashrightarrow 00{:}42{:}01.706$ which I gave you all the opportunities,

NOTE Confidence: 0.86284804

 $00:42:01.710 \longrightarrow 00:42:04.510$ think about what you're going to say next.

NOTE Confidence: 0.86284804

 $00:42:04.510 \longrightarrow 00:42:06.598$ What's faster and quicker and easier?

NOTE Confidence: 0.86284804

 $00:42:06.600 \longrightarrow 00:42:09.210$ Can you do it in groups?

NOTE Confidence: 0.86284804

 $00:42:09.210 \longrightarrow 00:42:13.740$ Yep, I was asked if I could do it in groups.

 $00:42:13.740 \longrightarrow 00:42:17.737$ So here we've got our group data.

NOTE Confidence: 0.86284804

 $00:42:17.740 \longrightarrow 00:42:20.796$ Again, we're looking at our outcome point is,

NOTE Confidence: 0.86284804

 $00:42:20.800 \longrightarrow 00:42:22.930$ those people who have gone into

NOTE Confidence: 0.86284804

 $00:42:22.930 \longrightarrow 00:42:24.810$ full remission so they completely

NOTE Confidence: 0.86284804

 $00:42:24.810 \longrightarrow 00:42:27.568$ do not have insomnia as per the

NOTE Confidence: 0.86284804

 $00:42:27.568 \longrightarrow 00:42:28.820$ insomnia severity index.

NOTE Confidence: 0.86284804

 $00:42:28.820 \longrightarrow 00:42:30.156$ One month after treatment,

NOTE Confidence: 0.86284804

 $00:42:30.156 \longrightarrow 00:42:33.105$ what we can see is there's not much

NOTE Confidence: 0.86284804

 $00:42:33.105 \longrightarrow 00:42:35.310$ difference between group and individual.

NOTE Confidence: 0.86284804

 $00:42:35.310 \longrightarrow 00:42:37.602$ 69% of those people that were

NOTE Confidence: 0.86284804

00:42:37.602 --> 00:42:39.130 treated in Group format,

NOTE Confidence: 0.86284804

 $00:42:39.130 \longrightarrow 00:42:41.530$ they were in remission compared to

NOTE Confidence: 0.86284804

 $00:42:41.530 \longrightarrow 00:42:43.719$ the individual group which was 75%.

NOTE Confidence: 0.86284804

 $00:42:43.720 \longrightarrow 00:42:46.394$ But we did see a slight difference

NOTE Confidence: 0.86284804

 $00:42:46.394 \longrightarrow 00:42:49.340$ in terms of attrition.

NOTE Confidence: 0.86284804

 $00:42:49.340 \longrightarrow 00:42:51.412$ People were more likely to drop out

 $00:42:51.412 \longrightarrow 00:42:53.640$ of group than they were individual,

NOTE Confidence: 0.86284804

 $00:42:53.640 \longrightarrow 00:42:55.752$ but it wasn't significant.

NOTE Confidence: 0.86284804

 $00:42:55.752 \longrightarrow 00:42:58.758$ OK, so we now know that it works.

NOTE Confidence: 0.86284804

 $00:42:58.760 \longrightarrow 00:43:00.890$ We can deliver it in groups.

NOTE Confidence: 0.86284804

 $00{:}43{:}00.890 \dashrightarrow 00{:}43{:}03.158$ Now what you want to do is take it

NOTE Confidence: 0.86284804

 $00:43:03.158 \longrightarrow 00:43:05.656$ into a population that's incredibly

NOTE Confidence: 0.86284804

00:43:05.656 --> 00:43:08.318 vulnerable. That's the real test, isn't it?

NOTE Confidence: 0.86284804

00:43:08.320 --> 00:43:11.048 Find out if you've got a group that's

NOTE Confidence: 0.86284804

 $00{:}43{:}11.048 \dashrightarrow 00{:}43{:}12.920$ really vulnerable to acute in somnia.

NOTE Confidence: 0.86284804

 $00:43:12.920 \longrightarrow 00:43:15.962$ Give it to them and see if they end

NOTE Confidence: 0.86284804

 $00{:}43{:}15.962 \dashrightarrow 00{:}43{:}18.888$ up developing chronic insomnia.

NOTE Confidence: 0.86284804

 $00{:}43{:}18.890 \dashrightarrow 00{:}43{:}21.446$ And here we've chosen male prisoners.

NOTE Confidence: 0.86284804

 $00{:}43{:}21.450 \dashrightarrow 00{:}43{:}25.618$ For some reason. When you go to prison.

NOTE Confidence: 0.86284804

 $00:43:25.620 \longrightarrow 00:43:28.080$ You're very likely to develop insomnia,

NOTE Confidence: 0.86284804

 $00:43:28.080 \longrightarrow 00:43:30.950$ and so it starts in the prison.

 $00:43:30.950 \longrightarrow 00:43:32.180$ Think about changes,

NOTE Confidence: 0.86284804

 $00{:}43{:}32.180 \dashrightarrow 00{:}43{:}33.820$ environment changes in routine.

NOTE Confidence: 0.86284804

 $00:43:33.820 \longrightarrow 00:43:36.956$ There's a lot of stress, alot of concern,

NOTE Confidence: 0.86284804

 $00:43:36.956 \longrightarrow 00:43:39.490$ sharing those sorts of things lead into

NOTE Confidence: 0.86284804

00:43:39.560 --> 00:43:42.020 this vulnerability for acute insomnia,

NOTE Confidence: 0.86284804

00:43:42.020 --> 00:43:45.300 so we've got 30 male category C prisoners,

NOTE Confidence: 0.86284804

 $00:43:45.300 \longrightarrow 00:43:50.340$ so these are the ones that we don't let out.

NOTE Confidence: 0.86284804

 $00:43:50.340 \longrightarrow 00:43:52.842$ They're not allowed out there, not organic.

NOTE Confidence: 0.86284804

 $00:43:52.842 \longrightarrow 00:43:54.966$ They're not free range.

NOTE Confidence: 0.86284804

 $00:43:54.970 \longrightarrow 00:43:55.684$ In essence,

NOTE Confidence: 0.86284804

 $00{:}43{:}55.684 \dashrightarrow 00{:}43{:}57.826$ done exactly the same as we've

NOTE Confidence: 0.86284804

 $00:43:57.826 \longrightarrow 00:44:00.040$ done in the previous trials,

NOTE Confidence: 0.86767644

 $00:44:00.040 \longrightarrow 00:44:02.770$ but this is an open label trial.

NOTE Confidence: 0.86767644

 $00:44:02.770 \longrightarrow 00:44:05.171$ What are we looking at in terms

NOTE Confidence: 0.86767644

 $00:44:05.171 \longrightarrow 00:44:07.840$ of one month post treatment, 70,

NOTE Confidence: 0.86767644

 $00:44:07.840 \longrightarrow 00:44:09.790$ three point, 3% remission rate?

 $00:44:09.790 \longrightarrow 00:44:11.740$ So here's an interesting thing.

NOTE Confidence: 0.86767644

 $00:44:11.740 \longrightarrow 00:44:14.860$ So in our first study we had a

NOTE Confidence: 0.86767644

00:44:14.860 --> 00:44:16.810 60% remission rate one month,

NOTE Confidence: 0.86767644

 $00:44:16.810 \longrightarrow 00:44:19.150$ and in the second and third,

NOTE Confidence: 0.86767644

 $00:44:19.150 \longrightarrow 00:44:21.880$ it's averaging out around 73 to 75%.

NOTE Confidence: 0.86767644

 $00:44:21.880 \longrightarrow 00:44:24.144$ Why is this happening?

NOTE Confidence: 0.86767644

00:44:24.144 --> 00:44:27.097 Remember, I said I took the first one?

NOTE Confidence: 0.86767644

 $00{:}44{:}27.100 \dashrightarrow 00{:}44{:}29.086$ Clearly I'm crap because what happened

NOTE Confidence: 0.86767644

 $00:44:29.086 \longrightarrow 00:44:31.705$ in the second study and the third study

NOTE Confidence: 0.86767644

 $00:44:31.705 \longrightarrow 00:44:34.006$ is that actually trained people to do

NOTE Confidence: 0.86767644

 $00:44:34.006 \longrightarrow 00:44:35.956$ the intervention they've delivered it,

NOTE Confidence: 0.86767644

00:44:35.960 --> 00:44:38.347 and they've got better outcomes than me,

NOTE Confidence: 0.86767644

 $00{:}44{:}38.350 \dashrightarrow 00{:}44{:}40.648$ so I should be terribly a shamed

NOTE Confidence: 0.86767644

 $00:44:40.648 \longrightarrow 00:44:43.650$ and will not be doing that again.

NOTE Confidence: 0.86767644

00:44:43.650 --> 00:44:46.176 Alright, so we've looked at it

 $00:44:46.176 \longrightarrow 00:44:48.230$ in a vulnerable population now.

NOTE Confidence: 0.86767644

 $00:44:48.230 \longrightarrow 00:44:50.720$ Wonderful, what about impact on mood.

NOTE Confidence: 0.86767644

 $00:44:50.720 \longrightarrow 00:44:52.224$ We know that CBT.

NOTE Confidence: 0.86767644

 $00:44:52.224 \longrightarrow 00:44:56.114$ I really does have a knock on effect in

NOTE Confidence: 0.86767644

 $00:44:56.114 \longrightarrow 00:44:59.192$ terms of anxiety and depression symptoms.

NOTE Confidence: 0.86767644

 $00:44:59.200 \longrightarrow 00:45:03.016$ So when we look at pre treatment versus

NOTE Confidence: 0.86767644

00:45:03.016 --> 00:45:05.558 post treatment in terms of mood,

NOTE Confidence: 0.86767644

 $00:45:05.560 \longrightarrow 00:45:06.466$ anxiety, depression,

NOTE Confidence: 0.86767644

 $00{:}45{:}06.466 {\:\dashrightarrow\:} 00{:}45{:}09.637$ we're seeing some really good effect sizes.

NOTE Confidence: 0.86767644

 $00:45:09.640 \longrightarrow 00:45:12.364$ Here we're seeing reductions of one

NOTE Confidence: 0.86767644

 $00{:}45{:}12.364 \dashrightarrow 00{:}45{:}15.542$ month of over 50% in both anxiety

NOTE Confidence: 0.86767644

 $00:45:15.542 \longrightarrow 00:45:18.266$ symptoms and in terms of depressants,

NOTE Confidence: 0.86767644

 $00:45:18.270 \longrightarrow 00:45:18.702$ symptomology.

NOTE Confidence: 0.86767644

00:45:18.702 --> 00:45:21.726 So it's doing what we would expect

NOTE Confidence: 0.86767644

00:45:21.726 --> 00:45:24.169 from a standardized CBT I,

NOTE Confidence: 0.86767644

00:45:24.170 --> 00:45:27.103 but it's also just doing it in

 $00:45:27.103 \longrightarrow 00:45:29.260$ that early acute insomnia.

NOTE Confidence: 0.86767644

00:45:29.260 --> 00:45:30.060 Days alright,

NOTE Confidence: 0.86767644

 $00:45:30.060 \longrightarrow 00:45:32.460$ so we're coming to the end

NOTE Confidence: 0.86767644

 $00:45:32.460 \longrightarrow 00:45:35.018$ of what was an extravaganza.

NOTE Confidence: 0.86767644

 $00:45:35.020 \longrightarrow 00:45:36.608$ What can we conclude?

NOTE Confidence: 0.86767644

 $00:45:36.608 \longrightarrow 00:45:40.014$ Single shot of CBT I led to a

NOTE Confidence: 0.86767644

00:45:40.014 --> 00:45:42.344 fourfold increase in remission rate

NOTE Confidence: 0.86767644

 $00:45:42.344 \longrightarrow 00:45:45.647$ that is based upon the first study.

NOTE Confidence: 0.86767644

 $00{:}45{:}45.650 {\:\dashrightarrow\:} 00{:}45{:}48.180$ We also saw those improvements

NOTE Confidence: 0.86767644

 $00{:}45{:}48.180 \dashrightarrow 00{:}45{:}50.204$ in subjectively reported sleep.

NOTE Confidence: 0.86767644

 $00{:}45{:}50.210 \dashrightarrow 00{:}45{:}53.666$ Reductions in arousal anxiety

NOTE Confidence: 0.86767644

 $00:45:53.666 \longrightarrow 00:45:56.258$ and depressive symptomology.

NOTE Confidence: 0.86767644

 $00:45:56.260 \longrightarrow 00:45:57.844$ And people liked it.

NOTE Confidence: 0.86767644

 $00:45:57.844 \longrightarrow 00:45:59.824$ People actually liked the fact

NOTE Confidence: 0.86767644

 $00:45:59.824 \longrightarrow 00:46:02.328$ that it was a single session and

 $00:46:02.328 \longrightarrow 00:46:04.175$ that they were given something

NOTE Confidence: 0.86767644

 $00:46:04.175 \longrightarrow 00:46:06.235$ tangible to go away with,

NOTE Confidence: 0.86767644

 $00:46:06.240 \longrightarrow 00:46:08.928$ and that really made it well tolerable.

NOTE Confidence: 0.86767644

00:46:08.930 --> 00:46:11.618 Certainly in terms of the dropout rates,

NOTE Confidence: 0.86767644

00:46:11.620 --> 00:46:13.834 we weren't seeing anything near in

NOTE Confidence: 0.86767644

 $00:46:13.834 \longrightarrow 00:46:16.687$ any of the trials that relates to what

NOTE Confidence: 0.86767644

 $00:46:16.687 \longrightarrow 00:46:20.069$ we might see in a chronic insomnia parameter,

NOTE Confidence: 0.86767644

 $00:46:20.070 \longrightarrow 00:46:21.219$ so that's brilliant.

NOTE Confidence: 0.86767644

 $00:46:21.219 \longrightarrow 00:46:23.517$ So it's well tolerated as well.

NOTE Confidence: 0.86767644

 $00:46:23.520 \longrightarrow 00:46:25.440$ Where is it going now?

NOTE Confidence: 0.86767644

 $00:46:25.440 \longrightarrow 00:46:27.470$ Well, we're actually deploying it.

NOTE Confidence: 0.86767644

 $00:46:27.470 \longrightarrow 00:46:29.606$ Due to kovit at the moment,

NOTE Confidence: 0.86767644

 $00:46:29.610 \longrightarrow 00:46:30.774$ as you can imagine,

NOTE Confidence: 0.86767644

00:46:30.774 --> 00:46:33.469 there's a lot of issues which are increasing

NOTE Confidence: 0.86767644

 $00:46:33.469 \longrightarrow 00:46:35.679$ the vulnerability for acute insomnia.

NOTE Confidence: 0.86767644

 $00:46:35.680 \longrightarrow 00:46:37.470$ So we're running a trial.

00:46:37.470 --> 00:46:39.474 At the moment we've got 200

NOTE Confidence: 0.86767644

 $00:46:39.474 \longrightarrow 00:46:41.750$ people in it at the moment,

NOTE Confidence: 0.86767644

 $00:46:41.750 \longrightarrow 00:46:43.850$ which is giving them an online

NOTE Confidence: 0.86767644

 $00:46:43.850 \longrightarrow 00:46:45.680$ version of the one shot.

NOTE Confidence: 0.86767644

 $00:46:45.680 \longrightarrow 00:46:47.404$ What about primary care?

NOTE Confidence: 0.86767644

 $00:46:47.404 \longrightarrow 00:46:49.559$ It's another area of vulnerability

NOTE Confidence: 0.86767644

 $00:46:49.559 \longrightarrow 00:46:51.847$ where we'll see a lot of people

NOTE Confidence: 0.86767644

 $00:46:51.847 \longrightarrow 00:46:54.083$ who will attend the PCP or the

NOTE Confidence: 0.86767644

 $00:46:54.083 \longrightarrow 00:46:56.027$ GP and talk about acute insomnia.

NOTE Confidence: 0.86767644

 $00:46:56.030 \longrightarrow 00:46:57.690$ So we're deploying it.

NOTE Confidence: 0.86767644

00:46:57.690 --> 00:46:59.350 Out in primary care,

NOTE Confidence: 0.86767644

 $00:46:59.350 \longrightarrow 00:47:00.541$ but also Interestingly,

NOTE Confidence: 0.86767644

 $00{:}47{:}00.541 \dashrightarrow 00{:}47{:}03.320$ we're going to be using it within

NOTE Confidence: 0.86767644

 $00:47:03.395 \longrightarrow 00:47:05.312$ other vulnerable populations

NOTE Confidence: 0.86767644

 $00:47:05.312 \longrightarrow 00:47:07.229$ during addiction recovery.

 $00:47:07.230 \longrightarrow 00:47:09.582$ One of the things that we know

NOTE Confidence: 0.86767644

00:47:09.582 --> 00:47:11.340 is that during recovery,

NOTE Confidence: 0.86767644

 $00:47:11.340 \longrightarrow 00:47:13.210$ although sleep may not become

NOTE Confidence: 0.86767644

00:47:13.210 --> 00:47:14.706 a problem during recovery,

NOTE Confidence: 0.86767644

 $00:47:14.710 \longrightarrow 00:47:16.990$ it is have been identified by

NOTE Confidence: 0.86767644

 $00{:}47{:}16.990 \dashrightarrow 00{:}47{:}18.981$ patients that have undergone addiction

NOTE Confidence: 0.86767644

 $00{:}47{:}18.981 \dashrightarrow 00{:}47{:}21.381$ recovery as a vulnerability and a

NOTE Confidence: 0.86767644

 $00:47:21.381 \longrightarrow 00:47:23.961$ concern that they feel that if their

NOTE Confidence: 0.86767644

 $00:47:23.961 \longrightarrow 00:47:25.929$ sleep goes wonky that they will

NOTE Confidence: 0.8684607

00:47:25.930 --> 00:47:29.296 end up going back to their drugs or alcohol.

NOTE Confidence: 0.8684607

 $00{:}47{:}29.300 \dashrightarrow 00{:}47{:}31.652$ So we're trying to see whether it

NOTE Confidence: 0.8684607

 $00:47:31.652 \longrightarrow 00:47:33.560$ circumvents not only the issues

NOTE Confidence: 0.8684607

00:47:33.560 --> 00:47:35.650 around sleep and that vulnerability,

NOTE Confidence: 0.8684607

 $00:47:35.650 \longrightarrow 00:47:38.770$ but maybe it has a knock on effect.

NOTE Confidence: 0.8684607

 $00:47:38.770 \longrightarrow 00:47:40.947$ In terms of relapse an we're now

NOTE Confidence: 0.8684607

 $00:47:40.947 \longrightarrow 00:47:43.794$ running it out and I think 5 places

 $00:47:43.794 \longrightarrow 00:47:45.266$ these are independent trials.

NOTE Confidence: 0.8684607

 $00:47:45.270 \longrightarrow 00:47:47.660$ I'm not running any of these, thankfully.

NOTE Confidence: 0.87258804

00:47:50.260 --> 00:47:52.528 We're actually running it in oncology

NOTE Confidence: 0.87258804

00:47:52.528 --> 00:47:55.543 and so this is now being deployed in

NOTE Confidence: 0.87258804

00:47:55.543 --> 00:47:58.270 the US and Australia and in the UK.

NOTE Confidence: 0.87258804

 $00:47:58.270 \longrightarrow 00:48:00.022$ And when somebody gets a diagnosis

NOTE Confidence: 0.87258804

00:48:00.022 --> 00:48:02.411 of any form of cancer and they're

NOTE Confidence: 0.87258804

 $00:48:02.411 \longrightarrow 00:48:04.346$ just about to start treatment

NOTE Confidence: 0.87258804

 $00:48:04.346 \longrightarrow 00:48:06.819$ protocols 'cause we know that that's

NOTE Confidence: 0.87258804

 $00:48:06.819 \longrightarrow 00:48:08.455$ an increasing vulnerability period.

NOTE Confidence: 0.87258804

 $00{:}48{:}08.460 \dashrightarrow 00{:}48{:}10.644$ People have been given the intervention

NOTE Confidence: 0.87258804

 $00:48:10.644 \longrightarrow 00:48:12.829$ as a prophylactic, and what we're

NOTE Confidence: 0.87258804

 $00{:}48{:}12.829 \dashrightarrow 00{:}48{:}15.007$ looking at in those respects is,

NOTE Confidence: 0.87258804

00:48:15.010 --> 00:48:17.316 is it impacting on sleep, insomnia,

NOTE Confidence: 0.87258804

00:48:17.316 --> 00:48:19.746 the development of insomnia itself?

 $00:48:19.750 \longrightarrow 00:48:22.718$ But is it also having an impact on

NOTE Confidence: 0.87258804

 $00:48:22.718 \longrightarrow 00:48:25.049$ recovery and treatment pathways?

NOTE Confidence: 0.87258804

 $00:48:25.050 \longrightarrow 00:48:27.260$ So some very exciting things

NOTE Confidence: 0.87258804

 $00:48:27.260 \longrightarrow 00:48:29.028$ happening in the future.

NOTE Confidence: 0.8521559

 $00:48:31.210 \longrightarrow 00:48:32.700$ As with all my talks,

NOTE Confidence: 0.8521559

 $00{:}48{:}32.700 \dashrightarrow 00{:}48{:}35.373$ you know I don't do half of this stuff.

NOTE Confidence: 0.8521559

00:48:35.380 --> 00:48:37.095 You know I have collaborators

NOTE Confidence: 0.8521559

 $00:48:37.095 \longrightarrow 00:48:39.111$ from all around the world who

NOTE Confidence: 0.8521559

 $00:48:39.111 \longrightarrow 00:48:40.749$ do all of the work for me.

NOTE Confidence: 0.8521559

 $00:48:40.750 \longrightarrow 00:48:42.544$ I've got my lab team and

NOTE Confidence: 0.8521559

 $00:48:42.544 \longrightarrow 00:48:44.020$ that's a picture of us.

NOTE Confidence: 0.8521559

 $00:48:44.020 \longrightarrow 00:48:45.510$ When we were allowed out,

NOTE Confidence: 0.8521559

00:48:45.510 --> 00:48:47.554 I think we all might look a

NOTE Confidence: 0.8521559

 $00{:}48{:}47.554 \dashrightarrow 00{:}48{:}49.391$ little bit different by the time

NOTE Confidence: 0.8521559

 $00:48:49.391 \longrightarrow 00:48:51.179$ we're all allowed back in again.

NOTE Confidence: 0.8521559

 $00:48:51.180 \longrightarrow 00:48:53.100$ But of course, there's also people

 $00:48:53.100 \longrightarrow 00:48:55.048$ that fund the work that I do,

NOTE Confidence: 0.8521559

 $00:48:55.050 \longrightarrow 00:48:56.838$ that I'm always eternally grateful for.

NOTE Confidence: 0.8521559

 $00:48:56.840 \longrightarrow 00:48:58.032$ OK, thanks very much.

NOTE Confidence: 0.8521559

 $00:48:58.032 \longrightarrow 00:48:58.628$ That's me.

NOTE Confidence: 0.79667884

 $00:49:01.300 \longrightarrow 00:49:02.524$ Great, that's really wonderful.

NOTE Confidence: 0.79667884

00:49:02.524 --> 00:49:05.414 So I'm under is in truck and I'm helping

NOTE Confidence: 0.79667884

 $00:49:05.414 \longrightarrow 00:49:07.412$ out Brianne and monitoring the session.

NOTE Confidence: 0.79667884

 $00:49:07.420 \longrightarrow 00:49:10.948$ She unfortunately had to run out.

NOTE Confidence: 0.79667884

00:49:10.950 --> 00:49:13.494 Quickly it at the beginning of the session,

NOTE Confidence: 0.79667884

 $00:49:13.500 \longrightarrow 00:49:16.044$ but so thank you for this wonderful talk.

NOTE Confidence: 0.79667884

00:49:16.050 --> 00:49:18.126 Doctor Ellis is really insightful and

NOTE Confidence: 0.79667884

 $00:49:18.126 \longrightarrow 00:49:20.122$ evolution of sleep disorder from its

NOTE Confidence: 0.79667884

 $00{:}49{:}20.122 \dashrightarrow 00{:}49{:}21.796$ Genesis all the way to treatment.

NOTE Confidence: 0.79667884

 $00:49:21.800 \longrightarrow 00:49:24.026$ It was really nice to see that,

NOTE Confidence: 0.79667884

 $00:49:24.030 \longrightarrow 00:49:26.193$ and it's a problem that we encountered

00:49:26.193 --> 00:49:28.473 commonly and I'm sure many of the

NOTE Confidence: 0.79667884

 $00:49:28.473 \longrightarrow 00:49:29.765$ audience I've encountered it,

NOTE Confidence: 0.79667884

 $00:49:29.770 \longrightarrow 00:49:31.375$ especially now that we're having

NOTE Confidence: 0.79667884

 $00:49:31.375 \longrightarrow 00:49:32.659$ multiple social and health

NOTE Confidence: 0.79667884

 $00:49:32.659 \longrightarrow 00:49:33.919$ stressors during these times.

NOTE Confidence: 0.79667884

 $00:49:33.920 \longrightarrow 00:49:35.894$ And so I'd like to invite the

NOTE Confidence: 0.79667884

 $00:49:35.894 \longrightarrow 00:49:37.750$ audience to ask some questions.

NOTE Confidence: 0.79667884

 $00:49:37.750 \longrightarrow 00:49:39.340$ And while folks are typing

NOTE Confidence: 0.79667884

 $00:49:39.340 \longrightarrow 00:49:40.612$ things in and chat,

NOTE Confidence: 0.79667884

 $00:49:40.620 \longrightarrow 00:49:41.616$ which I'll be happy.

NOTE Confidence: 0.79667884

00:49:41.616 --> 00:49:43.110 Train if you wanted to ask

NOTE Confidence: 0.79667884

00:49:43.168 --> 00:49:44.920 question person just let me know.

NOTE Confidence: 0.79667884

 $00:49:44.920 \longrightarrow 00:49:46.607$ I'll I'll be happy to meet you.

NOTE Confidence: 0.79667884

 $00:49:46.610 \longrightarrow 00:49:49.354$ I just wanted to start off with.

NOTE Confidence: 0.79667884

 $00:49:49.360 \longrightarrow 00:49:50.716$ A question as well,

NOTE Confidence: 0.79667884

 $00:49:50.716 \longrightarrow 00:49:53.180$ and so are there some components of

 $00:49:53.180 \longrightarrow 00:49:55.358$ the one shot interventions that use?

NOTE Confidence: 0.79667884

 $00{:}49{:}55.360 \dashrightarrow 00{:}49{:}57.824$ Note that might work better than others,

NOTE Confidence: 0.79667884

 $00:49:57.830 \longrightarrow 00:49:59.655$ or something you think it's

NOTE Confidence: 0.79667884

 $00:49:59.655 \longrightarrow 00:50:00.385$ it's intervention.

NOTE Confidence: 0.79667884

00:50:00.390 --> 00:50:01.965 It is a cute subtype of insomnia,

NOTE Confidence: 0.79667884

 $00:50:01.970 \longrightarrow 00:50:03.700$ something that has to be.

NOTE Confidence: 0.79667884

 $00:50:03.700 \longrightarrow 00:50:05.412$ Tailored to each individual

NOTE Confidence: 0.79667884

 $00:50:05.412 \longrightarrow 00:50:06.696$ patient by the rapist,

NOTE Confidence: 0.79667884

 $00:50:06.700 \longrightarrow 00:50:07.550$ it's a

NOTE Confidence: 0.84831697

00:50:07.550 --> 00:50:09.690 really nice question. Thank you,

NOTE Confidence: 0.84831697

 $00:50:09.690 \dashrightarrow 00:50:14.434$ that was not set up for every body else.

NOTE Confidence: 0.84831697

 $00:50:14.440 \longrightarrow 00:50:16.672$ One of the things that we did is we.

NOTE Confidence: 0.84831697

 $00{:}50{:}16.680 \dashrightarrow 00{:}50{:}18.283$ We interviewed all of the patients in

NOTE Confidence: 0.84831697

 $00:50:18.283 \longrightarrow 00:50:19.822$ each of those three studies afterwards

NOTE Confidence: 0.84831697

 $00:50:19.822 \longrightarrow 00:50:21.910$ and found you know what worked for you.

 $00:50:21.910 \longrightarrow 00:50:24.090$ What didn't work for you.

NOTE Confidence: 0.84831697

 $00{:}50{:}24.090 \dashrightarrow 00{:}50{:}26.075$ What appears an ecdotally to be

NOTE Confidence: 0.84831697

 $00:50:26.075 \longrightarrow 00:50:28.467$ the strongest element from the one

NOTE Confidence: 0.84831697

00:50:28.467 --> 00:50:30.495 shot is actually in the pamphlet

NOTE Confidence: 0.84831697

 $00:50:30.495 \longrightarrow 00:50:32.689$ rather than the one hour session,

NOTE Confidence: 0.84831697

 $00:50:32.690 \longrightarrow 00:50:35.330$ and that is the stimulus

NOTE Confidence: 0.84831697

 $00:50:35.330 \longrightarrow 00:50:36.386$ control instructions.

NOTE Confidence: 0.84831697

 $00:50:36.390 \longrightarrow 00:50:38.562$ So there is an understanding then

NOTE Confidence: 0.84831697

 $00{:}50{:}38.562 \dashrightarrow 00{:}50{:}40.879$ that perhaps if we wanted to

NOTE Confidence: 0.84831697

 $00:50:40.879 \longrightarrow 00:50:42.869$ tailor this down even further,

NOTE Confidence: 0.84831697

 $00:50:42.870 \longrightarrow 00:50:44.675$ let's just start with stimulus

NOTE Confidence: 0.84831697

 $00:50:44.675 \longrightarrow 00:50:47.060$ control and then see what happens.

NOTE Confidence: 0.84831697

00:50:47.060 --> 00:50:49.340 Stop doing almost a deconstruction study,

NOTE Confidence: 0.84831697

 $00:50:49.340 \longrightarrow 00:50:52.010$ which is one of the things that

NOTE Confidence: 0.84831697

 $00:50:52.010 \longrightarrow 00:50:53.706$ we're doing at the moment.

NOTE Confidence: 0.84831697

 $00:50:53.706 \longrightarrow 00:50:55.351$ It certainly appears people like

 $00:50:55.351 \longrightarrow 00:50:56.959$ the cognitive strategies,

NOTE Confidence: 0.84831697

00:50:56.960 --> 00:50:58.103 the distraction strategies,

NOTE Confidence: 0.84831697

 $00:50:58.103 \longrightarrow 00:50:59.627$ but they are they.

NOTE Confidence: 0.84831697

 $00:50:59.630 \longrightarrow 00:51:01.796$ They feel that the benefit is

NOTE Confidence: 0.84831697

 $00:51:01.796 \longrightarrow 00:51:03.820$ really coming from stimulus control.

NOTE Confidence: 0.84831697

 $00:51:04.540 \longrightarrow 00:51:06.810$ Interesting.

NOTE Confidence: 0.77535456

 $00:51:06.810 \longrightarrow 00:51:08.868$ Excellent, well thank you for that.

NOTE Confidence: 0.77535456

 $00:51:08.870 \longrightarrow 00:51:10.898$ So let's see there's a question

NOTE Confidence: 0.77535456

 $00:51:10.898 \longrightarrow 00:51:12.660$ from you requesting Doctor Ellis.

NOTE Confidence: 0.77535456

00:51:12.660 --> 00:51:15.132 Do we know how the nature of the

NOTE Confidence: 0.77535456

 $00:51:15.132 \longrightarrow 00:51:16.950$ precipitating stressful life events looks

NOTE Confidence: 0.77535456

 $00:51:16.950 \longrightarrow 00:51:18.850$ different between acute to remission,

NOTE Confidence: 0.77535456

 $00:51:18.850 \longrightarrow 00:51:20.174$ acute to chronic groups?

NOTE Confidence: 0.77535456

00:51:20.174 --> 00:51:22.160 And of course there is taking

NOTE Confidence: 0.77535456

 $00:51:22.229 \longrightarrow 00:51:24.009$ you for a great presentation.

 $00:51:24.010 \longrightarrow 00:51:26.229$ And so I think the question is

NOTE Confidence: 0.77535456

 $00:51:26.229 \longrightarrow 00:51:28.154$ whether there's a difference in

NOTE Confidence: 0.77535456

 $00{:}51{:}28.154 \dashrightarrow 00{:}51{:}30.419$ stressors in acute versus chronic.

NOTE Confidence: 0.77535456

 $00:51:30.420 \longrightarrow 00:51:31.340$ Find Sonia.

NOTE Confidence: 0.8307806

 $00:51:32.160 \longrightarrow 00:51:33.692$ It's an interesting point.

NOTE Confidence: 0.8307806

 $00:51:33.692 \longrightarrow 00:51:35.990$ It really does speak to model

NOTE Confidence: 0.8307806

 $00:51:36.066 \longrightarrow 00:51:37.706$ of insomnia by Colin SP.

NOTE Confidence: 0.8307806

00:51:37.710 --> 00:51:39.190 You know his psychobiological

NOTE Confidence: 0.8307806

 $00:51:39.190 \longrightarrow 00:51:39.930$ inhibition model.

NOTE Confidence: 0.8307806

 $00:51:39.930 \longrightarrow 00:51:41.410$ What Collins suggests is

NOTE Confidence: 0.8307806

00:51:41.410 --> 00:51:43.260 that during the acute phase,

NOTE Confidence: 0.8307806

 $00:51:43.260 \longrightarrow 00:51:44.995$ the stress that the sleep

NOTE Confidence: 0.8307806

 $00:51:44.995 \longrightarrow 00:51:47.330$ loss should be due to stress,

NOTE Confidence: 0.8307806

 $00:51:47.330 \longrightarrow 00:51:49.864$ but then there is a switch point

NOTE Confidence: 0.8307806

00:51:49.864 --> 00:51:52.746 and I think that's the Holy Grail

NOTE Confidence: 0.8307806

 $00:51:52.746 \longrightarrow 00:51:55.314$ of what we're looking for here

 $00:51:55.396 \longrightarrow 00:51:58.028$ is when does it become that the.

NOTE Confidence: 0.8307806

 $00:51:58.030 \longrightarrow 00:52:00.784$ This dress causing the sleep loss

NOTE Confidence: 0.8307806

 $00:52:00.784 \longrightarrow 00:52:04.427$ becomes the sleep loss as a stressor itself,

NOTE Confidence: 0.8307806

 $00:52:04.430 \longrightarrow 00:52:07.733$ and I think that is where we might find

NOTE Confidence: 0.8307806

 $00:52:07.733 \longrightarrow 00:52:11.279$ this transition point to chronic insomnia.

NOTE Confidence: 0.8307806

 $00:52:11.280 \longrightarrow 00:52:15.776$ When we've looked at the types of stressors.

NOTE Confidence: 0.8307806

 $00:52:15.780 \longrightarrow 00:52:17.022$ Between our groups,

NOTE Confidence: 0.8307806

 $00:52:17.022 \longrightarrow 00:52:19.920$ those who commit those who don't commit.

NOTE Confidence: 0.8307806

 $00{:}52{:}19.920 \dashrightarrow 00{:}52{:}22.426$ Not only is there no differences in

NOTE Confidence: 0.8307806

 $00:52:22.426 \longrightarrow 00:52:25.141$ terms of life events or perceived

NOTE Confidence: 0.8307806

 $00{:}52{:}25.141 \dashrightarrow 00{:}52{:}27.229$ stress and anxiety depression,

NOTE Confidence: 0.8307806

 $00:52:27.230 \longrightarrow 00:52:28.950$ although depression does appear

NOTE Confidence: 0.8307806

 $00:52:28.950 \longrightarrow 00:52:31.530$ to be a factor in there.

NOTE Confidence: 0.8307806

 $00:52:31.530 \longrightarrow 00:52:33.680$ What is interesting is that

NOTE Confidence: 0.8307806

 $00:52:33.680 \longrightarrow 00:52:35.400$ you're seeing financial issues,

 $00:52:35.400 \longrightarrow 00:52:37.980$ so we've asked people more qualitatively,

NOTE Confidence: 0.8307806

 $00:52:37.980 \longrightarrow 00:52:39.700$ what are the issues?

NOTE Confidence: 0.8307806

 $00:52:39.700 \longrightarrow 00:52:40.990$ Are they financial,

NOTE Confidence: 0.8307806

 $00:52:40.990 \longrightarrow 00:52:41.964$ social, environmental,

NOTE Confidence: 0.8307806

00:52:41.964 --> 00:52:42.451 occupational?

NOTE Confidence: 0.8307806

 $00:52:42.451 \longrightarrow 00:52:44.886$ Financial issues appear to be

NOTE Confidence: 0.8307806

 $00:52:44.886 \longrightarrow 00:52:46.737$ something that drives chronic

NOTE Confidence: 0.8307806

00:52:46.737 --> 00:52:48.757 insomnia into it's chronic form,

NOTE Confidence: 0.8307806

00:52:48.760 --> 00:52:50.268 as opposed to remission.

NOTE Confidence: 0.8307806

 $00:52:50.268 \longrightarrow 00:52:51.776$ That's probably because the

NOTE Confidence: 0.8307806

 $00{:}52{:}51.776 \dashrightarrow 00{:}52{:}53.579$ long evity of financial issues,

NOTE Confidence: 0.8307806

 $00:52:53.580 \longrightarrow 00:52:55.560$ but there weren't really any

NOTE Confidence: 0.8307806

 $00:52:55.560 \longrightarrow 00:52:57.975$ other differences in terms of the

NOTE Confidence: 0.8307806

 $00:52:57.975 \longrightarrow 00:53:00.147$ types of stressors or the length

NOTE Confidence: 0.8307806

 $00:53:00.147 \longrightarrow 00:53:02.164$ of the stressors that really

NOTE Confidence: 0.8307806

 $00:53:02.164 \longrightarrow 00:53:04.314$ impacted on whether somebody got

 $00:53:04.314 \longrightarrow 00:53:06.410$ better or somebody got worse.

NOTE Confidence: 0.8496705

 $00:53:07.550 \longrightarrow 00:53:09.989$ Interesting, thank you.

NOTE Confidence: 0.8496705

 $00:53:09.990 \longrightarrow 00:53:11.844$ Let's see it so there's another

NOTE Confidence: 0.8496705

 $00:53:11.844 \longrightarrow 00:53:13.504$ question from folks at the

NOTE Confidence: 0.8496705

 $00{:}53{:}13.504 \dashrightarrow 00{:}53{:}14.968$ VA Veteran Affairs Hospital.

NOTE Confidence: 0.8496705

00:53:14.970 --> 00:53:16.118 So so. Doctor Ellis,

NOTE Confidence: 0.8496705

00:53:16.118 --> 00:53:17.840 any digital CBT tool that you

NOTE Confidence: 0.8496705

 $00{:}53{:}17.898 \dashrightarrow 00{:}53{:}19.618$ personally like and recommend.

NOTE Confidence: 0.7524921 00:53:20.980 --> 00:53:21.520 Oh

 $00:53:23.860 \longrightarrow 00:53:24.859$ oh, not not

NOTE Confidence: 0.7129101

NOTE Confidence: 0.7129101

 $00:53:24.860 \longrightarrow 00:53:26.846$ to put you on the spot.

NOTE Confidence: 0.9202721

 $00:53:28.970 \longrightarrow 00:53:33.218$ Yeah, I mean, we've got three in the UK.

NOTE Confidence: 0.9202721

 $00{:}53{:}33.220 \dashrightarrow 00{:}53{:}35.356$ So sleepy, of course, is the most well

NOTE Confidence: 0.86105436

00:53:35.360 --> 00:53:37.488 known of the three that are used in

NOTE Confidence: 0.86105436

 $00:53:37.490 \longrightarrow 00:53:40.732$ the UK. Yep. I certainly

 $00:53:40.732 \longrightarrow 00:53:43.110$ feel that it digital has got

NOTE Confidence: 0.88529992

 $00{:}53{:}43.110 \dashrightarrow 00{:}53{:}46.055$ its place. Because of widespread

NOTE Confidence: 0.88529992

 $00{:}53{:}46.055 \dashrightarrow 00{:}53{:}47.550$ dissemination and implementation.

NOTE Confidence: 0.8820258

 $00:53:48.140 \longrightarrow 00:53:49.720$ I do worry about

NOTE Confidence: 0.8820258

 $00:53:49.720 \longrightarrow 00:53:52.095$ some of the issues around

NOTE Confidence: 0.8820258

00:53:52.095 --> 00:53:54.470 digital in terms of engagement.

NOTE Confidence: 0.8820258

 $00:53:54.470 \longrightarrow 00:53:57.134$ And also when people are doing

NOTE Confidence: 0.8820258

 $00:53:57.134 \longrightarrow 00:53:59.510$ online therapy, you know.

NOTE Confidence: 0.8820258

 $00{:}53{:}59.510 {\:{\circ}{\circ}{\circ}}>00{:}54{:}01.944$ When I'm doing the rapy face to face,

NOTE Confidence: 0.8820258

 $00:54:01.944 \longrightarrow 00:54:05.696$ you have to come see me at the time of which

NOTE Confidence: 0.8923449

 $00{:}54{:}05.700 \dashrightarrow 00{:}54{:}08.108$ is specified. If you're doing it remotely,

NOTE Confidence: 0.8923449

00:54:08.110 --> 00:54:10.526 what's not to stop you from doing it

NOTE Confidence: 0.8923449

00:54:10.526 --> 00:54:13.266 at 8:00 o'clock nine o'clock at night,

NOTE Confidence: 0.8923449

 $00:54:13.270 \longrightarrow 00:54:15.520$ which may well have actually

NOTE Confidence: 0.8923449

00:54:15.520 --> 00:54:17.554 detrimental impact? And the other

NOTE Confidence: 0.8923449

 $00:54:17.554 \longrightarrow 00:54:19.822$ thing before I advocate for anyone.

00:54:19.830 --> 00:54:22.570 It is the fact that you know when we look

NOTE Confidence: 0.8923449

 $00:54:22.644 \longrightarrow 00:54:25.104$ at the work of Nora Vincent. For example,

NOTE Confidence: 0.8923449

 $00:54:25.104 \longrightarrow 00:54:27.154$ when she's looked at stat care models,

NOTE Confidence: 0.8923449

00:54:27.154 --> 00:54:29.110 there's quite a high level of people

NOTE Confidence: 0.8923449

00:54:29.110 --> 00:54:31.260 who will not update for digital CBT.

NOTE Confidence: 0.8923449

 $00:54:31.260 \longrightarrow 00:54:35.326$ I. So a lot of people don't like it,

NOTE Confidence: 0.8923449

 $00:54:35.330 \longrightarrow 00:54:36.308$ don't want it.

NOTE Confidence: 0.8923449

 $00:54:36.310 \longrightarrow 00:54:39.250$ There was a really nice idea, but she did.

NOTE Confidence: 0.8923449

00:54:39.250 --> 00:54:41.536 If I was to advocate for one,

NOTE Confidence: 0.8923449

00:54:41.536 --> 00:54:43.502 I would advocate for one which

NOTE Confidence: 0.8923449

00:54:43.502 --> 00:54:44.812 is called sleep Four,

NOTE Confidence: 0.8923449

 $00:54:44.812 \longrightarrow 00:54:46.768$ which was developed in the UK.

NOTE Confidence: 0.8923449

00:54:46.770 --> 00:54:49.061 The reason that I would say that

NOTE Confidence: 0.8923449

 $00{:}54{:}49.061 \dashrightarrow 00{:}54{:}51.026$ I fondest fan of that particular

NOTE Confidence: 0.8923449

00:54:51.026 --> 00:54:53.315 variant is because a I was one

 $00:54:53.315 \longrightarrow 00:54:55.270$ of the beta testers on it,

NOTE Confidence: 0.8923449

 $00:54:55.270 \longrightarrow 00:54:58.047$ so I know what it was like.

NOTE Confidence: 0.8923449

 $00:54:58.047 \longrightarrow 00:55:00.468$ B, it's free.

NOTE Confidence: 0.8923449

 $00:55:00.470 \longrightarrow 00:55:01.961$ Because it was built upon

NOTE Confidence: 0.8923449

00:55:01.961 --> 00:55:03.743 government money and in the UK,

NOTE Confidence: 0.8923449

 $00:55:03.750 \longrightarrow 00:55:06.126$ if you're building it up on NIH money,

NOTE Confidence: 0.8923449

 $00:55:06.130 \longrightarrow 00:55:07.620$ or you know government money,

NOTE Confidence: 0.8923449

00:55:07.620 --> 00:55:10.006 then it has to be made freely available

NOTE Confidence: 0.8923449

00:55:10.006 --> 00:55:13.340 and we do like a nice free bie.

NOTE Confidence: 0.8923449 00:55:13.340 --> 00:55:13.620 So

NOTE Confidence: 0.8360203

 $00{:}55{:}13.620 \dashrightarrow 00{:}55{:}16.100$ I think those those sort of swing me towards

NOTE Confidence: 0.8360203

00:55:16.100 --> 00:55:18.025 sleep full as opposed to sleep here,

NOTE Confidence: 0.8360203

 $00:55:18.030 \longrightarrow 00:55:20.442$ although I think it's a it's a great product

NOTE Confidence: 0.8360203

 $00{:}55{:}20.442 \dashrightarrow 00{:}55{:}22.719$ and please don't tell Colin I said back

NOTE Confidence: 0.8360203

00:55:22.720 --> 00:55:27.468 I'm going to tell him. I knew it no

NOTE Confidence: 0.8464955

 $00:55:27.470 \longrightarrow 00:55:29.400$ no. So I have a

 $00:55:29.400 \longrightarrow 00:55:30.948$ question. What is the

NOTE Confidence: 0.8464955

 $00{:}55{:}30.950 \dashrightarrow 00{:}55{:}32.108$ reimbursement like? What

NOTE Confidence: 0.8464955

 $00:55:32.110 \longrightarrow 00:55:34.432$ is the reimbursement like is that's

NOTE Confidence: 0.8464955

 $00:55:34.432 \longrightarrow 00:55:37.140$ in the US? That's a huge issue.

NOTE Confidence: 0.8464955

00:55:37.140 --> 00:55:40.235 For CBT I yeah yeah this is been

NOTE Confidence: 0.8464955

 $00{:}55{:}40.235 \dashrightarrow 00{:}55{:}42.560$ both a helping a hindrance to

NOTE Confidence: 0.8464955

 $00:55:42.560 \longrightarrow 00:55:45.268$ us in the fact that we've got

NOTE Confidence: 0.8464955

00:55:45.270 --> 00:55:46.818 our National Health Service,

NOTE Confidence: 0.8464955

00:55:46.818 --> 00:55:48.366 so our socialized medicine

NOTE Confidence: 0.8464955

 $00:55:48.370 \longrightarrow 00:55:51.072$ in the sense that there is no

NOTE Confidence: 0.8464955

00:55:51.072 --> 00:55:53.350 issues around reimbursement.

NOTE Confidence: 0.8406472

 $00{:}55{:}53.350 \dashrightarrow 00{:}55{:}56.059$ But the problem is is it's so

NOTE Confidence: 0.8406472

 $00{:}55{:}56.059 \dashrightarrow 00{:}55{:}58.784$ sporadic in order to get the CBT

NOTE Confidence: 0.8406472

00:55:58.784 --> 00:56:01.500 service up and running in the UK,

NOTE Confidence: 0.8406472

 $00:56:01.500 \longrightarrow 00:56:05.029$ it's very challenging. Name there's about

 $00:56:05.030 \longrightarrow 00:56:07.902$ 8 places in the UK where you can

NOTE Confidence: 0.8287691

 $00:56:07.902 \longrightarrow 00:56:10.638$ get face to face CBT in the UK.

NOTE Confidence: 0.8287691

 $00:56:10.640 \longrightarrow 00:56:13.809$ Which is not great and this is one of

NOTE Confidence: 0.8287691

 $00:56:13.810 \longrightarrow 00:56:16.740$ the reasons why online digital CBT I is

NOTE Confidence: 0.8287691

 $00:56:16.740 \longrightarrow 00:56:19.439$ becoming a lot more popular in the UK,

NOTE Confidence: 0.8287691

00:56:19.440 --> 00:56:21.200 and certainly it's going through

NOTE Confidence: 0.8287691

 $00:56:21.200 \longrightarrow 00:56:23.662$ at the moment as I'm sitting on

NOTE Confidence: 0.8287691

 $00:56:23.662 \longrightarrow 00:56:25.070$ the panel again. Don't

NOTE Confidence: 0.867943

 $00{:}56{:}25.070 \dashrightarrow 00{:}56{:}27.182$ tell Colin I'm sitting on the

NOTE Confidence: 0.867943

 $00:56:27.182 \longrightarrow 00:56:29.649$ panel so that it will become part

NOTE Confidence: 0.867943

 $00{:}56{:}29.650 \dashrightarrow 00{:}56{:}31.410$ of the National Health Service,

NOTE Confidence: 0.867943

 $00:56:31.410 \longrightarrow 00:56:32.814$ so it'll be freely

NOTE Confidence: 0.867943

 $00:56:32.814 \longrightarrow 00:56:34.218$ deliverable from GP surgeries.

NOTE Confidence: 0.867943

 $00:56:34.220 \longrightarrow 00:56:36.684$ OK, so that will improve the situation.

NOTE Confidence: 0.867943

00:56:36.690 --> 00:56:39.172 But you know, I always have this

NOTE Confidence: 0.867943

 $00:56:39.172 \longrightarrow 00:56:41.338$ thing about face to face is.

 $00:56:41.340 \longrightarrow 00:56:43.425$ Is a very important factor

NOTE Confidence: 0.867943

 $00:56:43.425 \longrightarrow 00:56:45.093$ because of the apeutic alliance.

NOTE Confidence: 0.838665

 $00:56:46.300 \longrightarrow 00:56:48.548$ Great, well thank you I think just a

NOTE Confidence: 0.838665

 $00:56:48.548 \longrightarrow 00:56:51.069$ couple of more questions in the comments.

NOTE Confidence: 0.838665

 $00:56:51.070 \longrightarrow 00:56:53.214$ So for the folks at the VA who

NOTE Confidence: 0.838665

 $00:56:53.214 \longrightarrow 00:56:55.200$ are asking questions about apps,

NOTE Confidence: 0.838665

 $00:56:55.200 \longrightarrow 00:56:57.520$ there's actually a VA based CBT I coach

NOTE Confidence: 0.838665

 $00:56:57.520 \longrightarrow 00:57:00.287$ that was developed by researchers at the VA,

NOTE Confidence: 0.838665

 $00:57:00.290 \longrightarrow 00:57:02.198$ which you might be familiar with,

NOTE Confidence: 0.838665

 $00:57:02.200 \longrightarrow 00:57:04.084$ and so that's freely available also

NOTE Confidence: 0.838665

 $00{:}57{:}04.084 \dashrightarrow 00{:}57{:}06.030$ to patients and their loved ones

NOTE Confidence: 0.838665

 $00{:}57{:}06.030 \dashrightarrow 00{:}57{:}07.600$ and doctor Schneeberg from our

NOTE Confidence: 0.838665

 $00{:}57{:}07.600 \dashrightarrow 00{:}57{:}09.540$ sleep center is asking whether you

NOTE Confidence: 0.838665

 $00:57:09.540 \longrightarrow 00:57:11.412$ have any tips on delivering CBT.

NOTE Confidence: 0.838665

00:57:11.420 --> 00:57:12.688 I via Tele medicine.

00:57:14.650 --> 00:57:16.810 You know CBT is selling thing.

NOTE Confidence: 0.8695473

 $00{:}57{:}16.810 \dashrightarrow 00{:}57{:}18.970$ I think it's less about the rapeutics

NOTE Confidence: 0.8695473

 $00:57:18.970 \longrightarrow 00:57:20.770$ 'cause they can be delivered

NOTE Confidence: 0.8695473

 $00:57:20.770 \longrightarrow 00:57:22.570$ in a variety of contexts.

NOTE Confidence: 0.8695473

 $00:57:22.570 \longrightarrow 00:57:24.919$ This is about selling and I think

NOTE Confidence: 0.8695473

 $00:57:24.919 \dashrightarrow 00:57:27.040$ that you know my my experience of

NOTE Confidence: 0.8695473

 $00:57:27.115 \longrightarrow 00:57:29.410$ telling medicine has been limited,

NOTE Confidence: 0.8695473

 $00.57:29.410 \longrightarrow 00.57:30.938$ but in that respect,

NOTE Confidence: 0.8695473

 $00:57:30.938 \longrightarrow 00:57:34.090$ what we have tended to do is we focused

NOTE Confidence: 0.8695473

 $00:57:34.090 \longrightarrow 00:57:36.250$ much more on that interactive process

NOTE Confidence: 0.8695473

 $00{:}57{:}36.250 \dashrightarrow 00{:}57{:}39.130$ in terms of the we're trying to get

NOTE Confidence: 0.8695473

 $00:57:39.130 \longrightarrow 00:57:40.466$ that therapeutic alliance across.

NOTE Confidence: 0.8695473

 $00:57:40.466 \longrightarrow 00:57:42.930$ I think that's the only way to sell

NOTE Confidence: 0.8695473

 $00{:}57{:}42.993 \to 00{:}57{:}44.889$ it through the rapeutic alliance,

NOTE Confidence: 0.8695473

 $00:57:44.890 \longrightarrow 00:57:46.330$ especially when it's removed.

NOTE Confidence: 0.8513536

 $00:57:48.300 \longrightarrow 00:57:50.540$ Great, well thank you so much for

 $00:57:50.540 \longrightarrow 00:57:52.597$ a wonderful talk and for great

NOTE Confidence: 0.8513536

 $00{:}57{:}52.597 \dashrightarrow 00{:}57{:}54.649$ answers to the questions and this.

NOTE Confidence: 0.8513536

 $00:57:54.650 \longrightarrow 00:57:56.540$ I think I know is useful for

NOTE Confidence: 0.8513536

 $00:57:56.540 \longrightarrow 00:57:58.439$ everybody in the audience and perhaps

NOTE Confidence: 0.8513536

 $00:57:58.439 \longrightarrow 00:58:00.833$ looking forward to having you in our

NOTE Confidence: 0.8513536

 $00:58:00.897 \longrightarrow 00:58:02.997$ sessions another time another year,

NOTE Confidence: 0.8513536

 $00:58:03.000 \longrightarrow 00:58:04.332$ maybe even in person.

NOTE Confidence: 0.8513536

 $00:58:04.332 \longrightarrow 00:58:07.338$ Who knows, we'll go out and say it there,

NOTE Confidence: 0.8513536

00:58:07.340 --> 00:58:09.516 but just as the call out to the

NOTE Confidence: 0.8513536

00:58:09.516 --> 00:58:11.941 rest of the group is that we'll

NOTE Confidence: 0.8513536

00:58:11.941 --> 00:58:14.186 resume our next session next week

NOTE Confidence: 0.8513536

 $00:58:14.186 \dashrightarrow 00:58:16.685$ and looking forward to a great talk.

NOTE Confidence: 0.8513536

00:58:16.690 --> 00:58:17.692 Alright, thanks, everybody.

NOTE Confidence: 0.8513536

 $00:58:17.692 \longrightarrow 00:58:18.360$ Take care.

NOTE Confidence: 0.8682072

 $00:58:18.540 \longrightarrow 00:58:20.220$ So much bye bye.

00:58:22.380 --> 00:58:25.940 Bye bye. Goodbye doctor player.

NOTE Confidence: 0.44795752 00:58:28.240 --> 00:58:29.090 Hi.