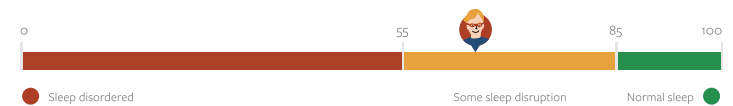
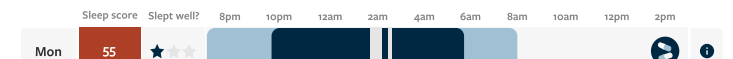


Sleepstation

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Your sleep throughout the week



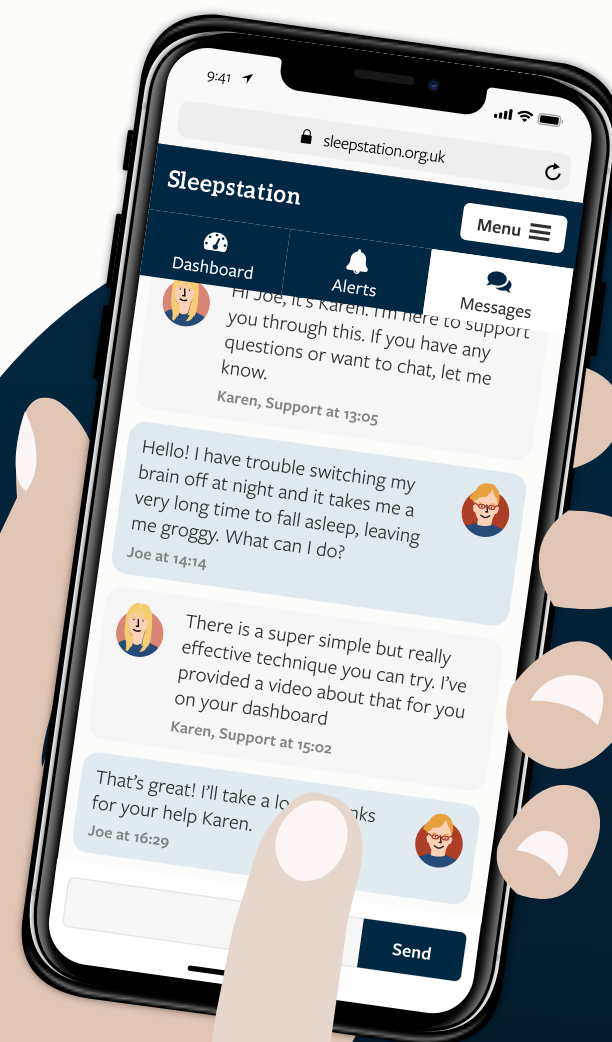
Referring to Sleepstation

What you need to know.

This document is designed to give you the necessary information to refer appropriate patients to Sleepstation.

Topics covered include:

- What is Sleepstation?
- How does Sleepstation work?
- Why should I consider referring to Sleepstation?
- When, and how, can I refer to Sleepstation?
- How would my patient know they have insomnia?
- How is Sleepstation funded?
- How do patients access Sleepstation's NHS service?
- References



What is Sleepstation?

Sleepstation is a clinically validated sleep improvement and insomnia course. It is web-based Cognitive Behavioural Therapy for insomnia (CBTi). Delivered entirely online, and carefully tailored to each individual, Sleepstation helps people sleep better and overcome insomnia without medication.

CBTi is the recommended first line treatment for insomnia.

Note, the type of cognitive therapy delivered within a CBTi programme is not synonymous with other forms of cognitive behavioural therapy, for example those designed to address anxiety or depression.

CBTi aims to improve sleep habits and behaviours by identifying and challenging thoughts and behaviours that affect a person's ability to sleep or sleep well.

The cognitive therapy in a CBTi programme is centred around sleep education, using this as a tool to target dysfunctional beliefs/attitudes about sleep.

Cognitive and behavioural interventions are effective in the treatment of long-term insomnia (1) and are widely recommended (2-7).

- **A drug-free sleep improvement programme.**
- **A clinically proven solution for insomnia.**
- **A fully supported digital health service.**



Jane, 62 from Leeds
Insomnia for more than 6 years

It has changed my life. I now look forward to getting into bed because I know I will sleep. Having sleep tools has taken away my anxiety. I enjoy living now because the confusing lack of sleep fog has been lifted.



CBTi is a safe and effective means of managing insomnia and its effects.

CBTi is well validated, with evidence spanning over 30 years. While CBTi is acknowledged to work, the lack of trained therapists and sleep experts prevents widespread availability of this treatment in face-to-face settings.

Sleepstation's online CBTi programme has been shown to be as effective as clinic based psychological therapy and can effectively resolve even the most chronic insomnia, with long-lasting benefits for the patient and fewer side effects than pharmacological interventions.

Sleepstation can resolve insomnia symptoms and improve quality of life for over 80% of patients who complete the programme.

Further information can be found at:

<https://www.sleepstation.org.uk/evidence/>

Pharmacological therapy is generally not recommended for the long-term management of insomnia (8).

However there has been no dramatic decrease in the prescribing of hypnotics across many parts of England.

Sleepstation can help solve this problem as it can effectively address all forms of insomnia without medication.



Richard, 45 from Maidstone

This course has been fantastic. The results, have been life changing. I look forward to going to bed. This course has given me the confidence and tactics to further improve my sleep in the future. Without sleeping pills! Thank you.



How does Sleepstation work?

The Sleepstation programme is delivered entirely online and is accessed by the patient through their own smart phone, tablet or computer. Patients can access Sleepstation at a time and place of their choosing (home, work, anytime and anywhere) and they do not need to download an app to use Sleepstation.

Sleepstation is a personalised programme tailored to address the individual's needs and unique circumstances.

The first step in treating insomnia with CBTi is to identify the underlying causes of the insomnia.

The Sleepstation programme begins with a week-long assessment and sleep review. At the end of the review, each patient receives a personalised report containing advice and guidance about next steps.

Most patients will progress to the therapy at this stage. For some patients, the Sleepstation therapy programme may not be deemed appropriate, and those patients will be provided with a full explanation and signposted to other services.

When patients enter therapy, a personalised sleep plan is created for them, based on information collated during their review.

The therapy programme which follows is based around this personalised sleep plan and is delivered via weekly therapy sessions. Through their Sleepstation account, patients also have access to a secure and confidential messaging service, providing them with access to a team of sleep coaches and CBTi therapists throughout.



Sarah, 26 from Ilford

Having the sleep coaches' support and encouragement for different techniques to apply really helped. The support has been great and my sleep has improved greatly.



Because Sleepstation is delivered online, patients can complete therapy sessions and access human support and guidance when they need it most, as opposed to when the next clinic slot is available.

A typical course lasts 6-8 weeks, depending on the needs and circumstances of the patient. There are no waiting lists, patients can start the Sleepstation programme as soon as they're ready.

Further information on how Sleepstation works can be found at: <https://www.sleepstation.org.uk/how-sleepstation-works/>



Why should I consider referring to Sleepstation?

Sleeping well is essential to physical health and emotional well-being.

Insomnia disorder remains the most commonly reported sleep disorder. Estimates of the prevalence depend on the criteria used to define insomnia and the population studied, and range from 10-30% (9, 10). The prevalence of insomnia in primary care patients has been reported to be as high as 69%, with 50% reporting occasional insomnia and 19% reporting chronic insomnia (11).

Defined as difficulty initiating sleep, difficulty maintaining sleep, **with subsequent impact upon daytime function;** insomnia disorder is associated with daytime fatigue, reduced quality of life, and increased ill health across a range of studies. (12, 13) and represents a critical public health problem worldwide (14).

Insomnia commonly accompanies conditions such as depression and chronic pain, but often persists even after successful resolution of these 'primary' conditions (1).

Presence of insomnia has been found to predict subsequent depression or anxiety in those with a first episode of mood disorder (6, 15 - 16). It is also a risk factor for the development of hypertension, diabetes and heart disease (17-18) and associated with increased healthcare costs (19).

The effect of poor sleep on our daily lives cannot be understated, and past events attributed in part to effects of sleep deprivation highlight the devastation it can cause. Chernobyl, Space Shuttle Challenger Disaster and Exxon Valdez oil spill are all examples of global catastrophes associated with human error due to fatigue.

10% of the UK population visit their GP each year with sleep related issues (20) making sleep a major clinical problem, contributing significantly to strain on GP resources.

There are millions of people worldwide affected directly or indirectly from curable sleep disorders and not receiving the correct treatment for a multitude of reasons from poor sleep awareness and education to a slow cycle from correct diagnosis to optimum treatment.

With a shortage of practicing insomnia specialists within the UK (fewer than 10 specialist centres), patients can wait many months, even years to see someone. This has left GPs and other healthcare providers little option but to recommend alternative, less effective treatments, and revert to hypnotic prescribing.

Technology is rewriting the relationship between patients, professionals and care providers. Patients are taking greater control over their health, and tools for patient empowerment and self-management provide opportunities for patients' active participation in their care.

Digital healthcare services like Sleepstation can deliver customisable, quality care at a fraction of the cost of existing treatments.

Sleepstation is an effective alternative to hypnotic drugs

(<https://cks.nice.org.uk/insomnia#!supportingEvidence:4>)

To treat insomnia, medications (especially sedative hypnotics) have been used because of their quick effects in a short time period (21). However, medication for insomnia can present several adverse effects (22) and addiction during long-term use (23). Moreover, medication has a limited effect on the long-term relief of insomnia (24).



Hypnotic drugs are not recommended for long-term use as there are concerns regarding their safety (2, 25-27).

Potential adverse effects include daytime sedation, poor coordination, cognitive impairment, and related concerns about the increased risk of driving accidents and falls.

In older people in particular, the magnitude of the beneficial effect of hypnotics may not justify the increased risk of adverse effects (such as cognitive impairment and increased risk of falls).

Long-term use of hypnotics can lead to the development of tolerance, physical or behavioural dependence, adverse effects on withdrawal, rebound insomnia, and increased mortality.

Cognitive behavioural therapy for insomnia (CBTi) is recommended as a first-line approach for the treatment of insomnia (28).

Referring to Sleepstation's CBTi programme allows you to make recommendations in line with guidance (<https://cks.nice.org.uk/insomnia#!scenario:1>)

Within the NHS, the National Institute of Health and Care Excellence (NICE) recommend that GPs refer to psychological services for a cognitive or behavioural intervention. Yet, the clinical need remains unmet, as the focus of many IAPT services within the NHS are on anxiety and depression with relatively few practitioners experienced in the core treatment which underpins Sleepstation - Cognitive Behavioural Therapy for insomnia (CBTi).



When, and how, can I refer to Sleepstation?

The choice of cognitive and behavioural intervention should be guided by clinical judgement, individual preference, and availability.

Consider referring to Sleepstation:

- When a patient complains of sleep problems lasting longer than 4 weeks with impact on next day function.
- When a patient presents with low mood and associated sleep disturbance.
- When it is desirable to taper a patient off hypnotic medications.

Sleepstation is available via electronic referral only. Referrals can be made by emailing a completed copy of our referral form to **tnu-tr.sleepstation@nhs.net**

If you do not have a copy of our referral form, a blank copy can also be requested by email.



How would my patient know they have insomnia?

If your patient has one of more of the following symptoms, then they could have insomnia.

- Difficulty falling asleep
- Difficulty staying asleep (waking up during the night and having trouble returning to sleep)
- Waking up too early in the morning
- Un-refreshing sleep (also called “non-restorative sleep”)

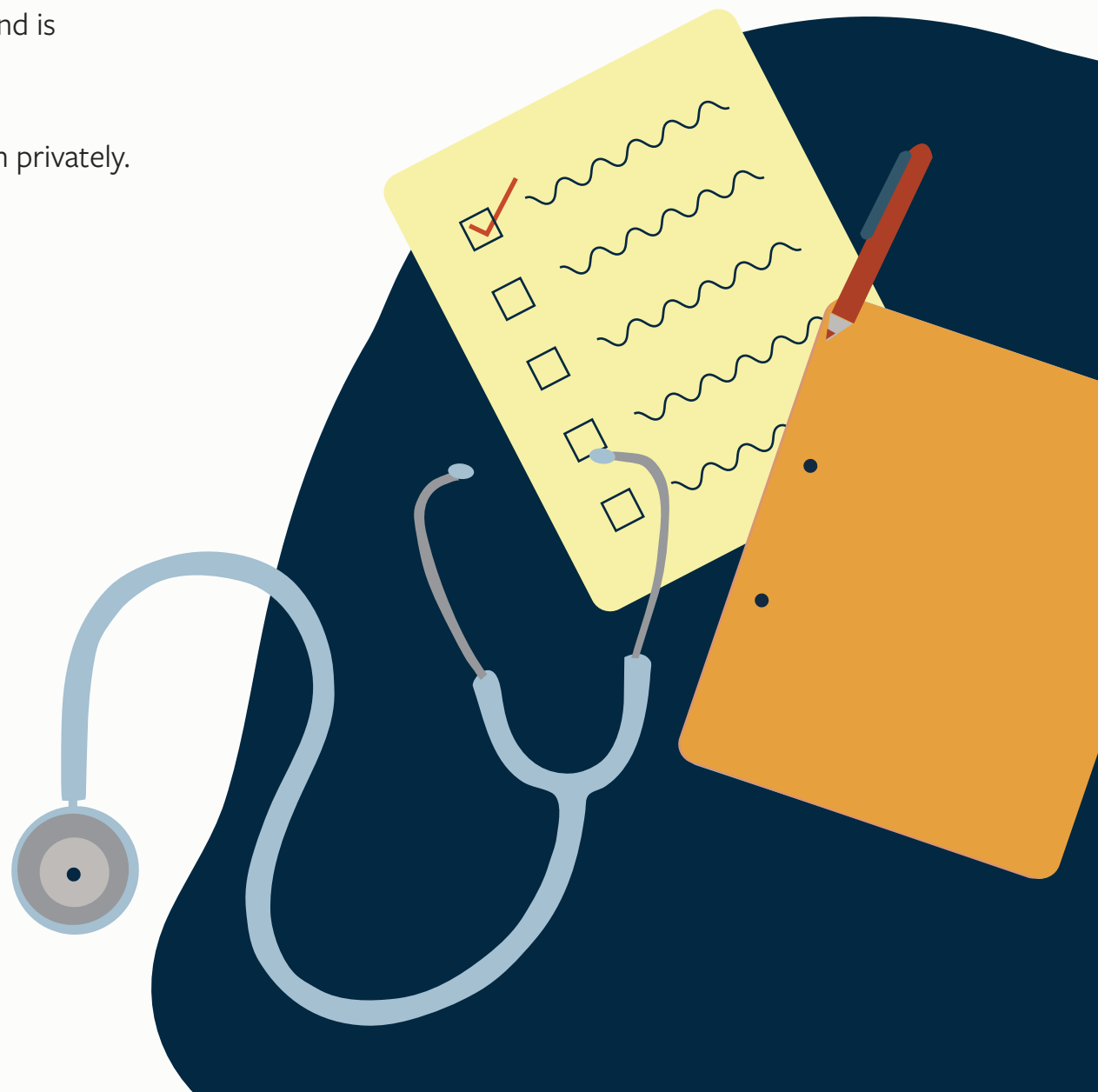
These symptoms need to lead to daytime consequences such as:

- Fatigue or low energy
- Cognitive impairment, such as difficulty concentrating
- Mood disturbance, such as irritability
- Behaviour problems, such as feeling impulsive or aggression
- Difficulty at work
- Difficulty in personal relationships, including family, friends and caregivers

How is Sleepstation funded?

Sleepstation's NHS service is fully funded by the NHS and is provided free of charge to NHS patients.

Non-NHS patients can choose to purchase Sleepstation privately.



How do patients access Sleepstation's NHS service?

A GP referral is required but a GP appointment is not always necessary. If the sleep problem is known to the GP, a referral can be made without a GP appointment. The Sleepstation team will liaise with the patient and GP to manage the referral request process.

Sleepstation is not the right solution for everyone and it is not appropriate to refer patients to Sleepstation who:

- Are under 18 years of age.
- Are currently undergoing CBT with another provider.
- Are currently under the care of a psychiatrist.
- Have epilepsy, bipolar disorder, mania, schizoaffective disorder, schizophrenia or a personality disorder.
- Have a history of psychosis/psychotic episodes, seizures or PTSD.
- Have very severe untreated generalised anxiety (this should be addressed first).
- Do not have regular access to the internet (as Sleepstation is delivered entirely online).

Please be advised, Sleepstation is unsuitable for ladies experiencing sleep issues related to pregnancy.



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