Managing Sleep Challenges after Transplant

Celebrating a Second Chance at Life Survivorship Symposium

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MANAGING SLEEP PROBLEMS AFTER TRANSPLANT

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Sleep is Important

How many hours of sleep do adults need per night?

1/3
What is Good Sleep?

**Sleep Quality**

- **Quantity**
- **Timing**
- **Continuity**
Health Consequences

- Cardiovascular disease
- Diabetes
- Obesity

- Depression
- Anxiety
- Behavioral problems
- Suicide attempts
- Alcohol use
- Quality of life

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Reader's Digest

America's Sleep Crisis Is Making Us Sick, Fat, and Stupid. But There's Hope.

Sleep deprivation now rivals obesity and smoking as our greatest public health crisis. Here's what everyone (including America's businesses) needs to do to help stop our massive sleep debt and get more shuteye.
Our data suggest that

- an improvement in sleep efficiency by 10%
- among women with sleep efficiency <85%
- could potentially lead to a 32% increase in survival time
SLEEP DISORDERS

- Insomnia disorder
- Obstructive sleep apnea
- Central sleep apnea
- Sleep related hypoventilation disorder
- Sleep related hypoxemia disorder
- Narcolepsy (Type I/II)
- Idiopathic hypersomnia
- Kleine-Levin syndrome
- Delayed sleep-wake phase disorder
- Advanced sleep-wake phase disorder
- Non-24 sleep-wake disorder
- Shift work disorder
- Jet lag disorder
- Confusional arousals
- Sleepwalking
- Sleep terrors
- Sleep related eating disorder
- REM sleep behavior disorder
- Sleep enuresis
- Restless legs syndrome

INSOMNIA

Table 1. DSM-V Criteria for Insomnia Disorder

- Complaint of dissatisfaction with quantity or quality of sleep occurs at least 3 nights a week for at least 3 months, associated with one or more of the following:
  - Difficulty falling asleep
  - Difficulty staying asleep, with frequent awakenings or difficulty falling back asleep
  - Early morning awakening
- The sleep disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- The sleep disturbance occurs even when there is enough time for sleep
- The sleep disturbance does not occur exclusively during the course of narcolepsy, breathing-related sleep disorder, circadian rhythm sleep disorder, or a parasomnia (an unusual behavior or event that occurs during sleep that may lead to intermittent awakenings).
- The sleep disturbance does not occur exclusively during the course of another mental disorder.
- The sleep disturbance is not due to the direct physiologic effects of a substance such as a drug of abuse or a medication, or from a general medical condition.
INSOMNIA SYMPTOMS ARE COMMON

Insomnia is Trivialized
SPEAK UP!

Why Patients Visit Their Doctors: Assessing the Most Prevalent Conditions in a Defined American Population

Jennifer L. St. Sauver, PhD, MPH; David O. Warner, MD; Barbara P. Yawn, MD, MSc; Debra J. Jacobson, MS; Michelle E. McGree, BS; Joshua J. Pankratz, BS; Joseph Mizon B. MD, MPH; Vincenzo I. Ragger, MD, MPH; Jon D. Elmore, MD; and Walter A. Rocca, MD, MPH

PCP Not Aware of Sleep Problems

Mild 91.2%
Moderate 78.1%
Severe 60.8%

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WHEN WAS THE LAST TIME YOUR PCP ASKED

How is your sleep?

WHAT HAVE YOU TRIED TO DO?
what to do when I can’t sleep

Beyond Counting Sheep—Your Action Plan
1. Keep track. Record how much and when you sleep, fatigue levels throughout the day, and any other symptoms. ...
2. Try therapy. ...
3. Establish a regular bedtime routine. ...
4. Use your bed the way it should be used. ...
5. Choose the right mattress. ...
6. Don’t smoke. ...
7. Talk to your doc. ...
8. Exercise early in the day.

More Tips...

Can’t Sleep? Here’s 32 Solutions for Insomnia | Greatist
https://greatist.com/health/cant-sleep-advice-and-tips

Efficacy of Sleep Hygiene

**CONCLUSIONS**

Data from normal sleepers clearly demonstrate that sleep quality and quantity are adversely affected when certain sleep behaviors are followed. These data support the assumption that poor sleep hygiene can cause worsened sleep. The magnitude of the disruption of sleep varies considerably among the behaviors studied. For example, the effect of caffeine is small compared to the effect of sleeping during the wrong circadian phase. Some patients with insomnia report clinical improvement once they adhere to sleep hygiene rules, but the empirical evidence for the success of SH as a stand-alone treatment approach is very limited. One limitation to this research is that the term “sleep hygiene” is used by different investigators to describe diverse sets of rules, rather than a uniform treatment approach as use of a common term would imply.

The wide popularity of SH recommendations by sleep specialists appears to be out of proportion to the available data demonstrating the efficacy of this approach. Robust effects in improving the sleep of patients with insomnia using SH would not necessarily
Taking an anticholinergic for the equivalent of three years or more was associated with a 54% higher dementia risk than taking the same dose for three months or less.
Behavioral and psychological treatments for chronic insomnia disorder in adults: an American Academy of Sleep Medicine clinical practice guideline

Abstract

INTRODUCTION: This guideline establishes clinical practice recommendations for the use of behavioral and psychological treatments for chronic insomnia disorder in adults.

METHODS: The American Academy of Sleep Medicine (AASM) consensus panel task force of experts in sleep medicine developed recommendations and assigned strengths based on a systematic review of the literature and an assessment of the evidence using Grading of Recommendations Assessment, Development and Evaluation (GRADE) methodology. The task force evaluates a summary of the relevant literature and the quality of evidence, the balance of clinically relevant benefits and harms, patient values and preferences, and net balance considerations that underpin the recommendations. The AASM Board of Directors approved the final recommendations.

RECOMMENDATIONS: The following recommendations are intended as a guide for clinicians in choosing a specific behavioral and psychological therapy for the treatment of chronic insomnia disorder in adult patients. Each recommendation statement is assigned a strength (“strong” or “conditional”). A “strong” recommendation is one that clinicians should follow under most circumstances. A “conditional” recommendation is one that requires that the clinician use clinical knowledge and judgment, and it strongly considers the patient’s values and preferences to determine the best course of action.

1. An intervention that includes one or more components of cognitive behavioral therapy for insomnia for the treatment of chronic insomnia disorder in adults (STROBE-G)

WHAT SHOULD YOU DO?
### WHAT IS CBT-I?

**6-8 sessions over 6 months**

**Ingredients**

- **Sleep restriction**
- **Stimulus control**
- **Sleep hygiene**
- **Cognitive therapy**
- **Relaxation**

**Directions**

- Match time in bed to total sleep duration
- Use bed only for sleep
- Improve behaviors that affect sleep
- Address maladaptive sleep cognitions
- Practice relaxation exercises

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YOUR NEW MANTRA

It’s not about tonight.

COLLECT DATA

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## SLEEP DIARIES

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### SLEEP RESTRICTION

**Day**: January 3  
**Daytime Naps**: 2 naps / 15 minutes each  
**Medication and/or Substance Use**: Ambien Snug and Benadryl  
**Time to Bed**: 10:30pm  
**Time Taken to Fall Asleep**: 45 minutes  
**Number of Night Awakenings**: 3  
**Total Time Awake in Night**: 60 minutes  
**Time Woke Up**: 5:45am  
**Time Intended to Wake Up**: 6:30am
STIMULUS CONTROL

SLEEP HYGIENE

1. Eliminate the bedroom clock
2. Exercise in the late afternoon/early evening
3. Minimize caffeine, alcohol, and nicotine
4. Eat a light bedtime snack
5. Reduce liquid consumption before bed
6. Reduce electronics use
COGNITIVE THERAPY

If I don’t sleep well tonight, I don’t know how I’m going to be able to work tomorrow.

This has to stop. My _____ is going to come back if I don’t sleep.

I’m never going to fall asleep with so much to worry about right now.

SLEEP OCCURS IN CONTEXT OF LIFE
As Easy As…

FINDING A SPECIALIST

www.behavioralsleep.org
ALTERNATIVES

“The amount of sleep required by the average person is 5 minutes more.”
- Wilson Mizner
Questions?

Celebrating a Second Chance at Life Survivorship Symposium 2021

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