

# EVIDENCE TO GO

Research Updates for Health Professionals

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**Brief CBT for insomnia delivered in primary care to patients endorsing suicidal ideation: a proof-of-concept randomized clinical trial.**

*All monthly updates prepared by volunteer early career professional members of the Evidence To Go subcommittee of the CFHA Research & Evaluation Committee. Updates are peer reviewed by CFHA researchers.*



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## Stay up to Date with Key Findings in Integrated Care

The purpose of this bulletin is to provide brief summaries of new research studies for healthcare professionals and administrators who are interested in keeping up with the latest discoveries but do not have enough time to read the entire journal articles. The articles are chosen based on interest to CFHA members as well as overall importance to the field. There are always limitations to the study findings, so we encourage you to read the entire article.



*"Sometimes I only have one minute to scan an email for research updates. This bulletin gives me the opportunity to quickly gather information that pertains to my area of practice..."*

- Giuliana McQuirt, Psy.D.

# Brief CBT for insomnia for patients endorsing suicidal ideation in primary care

How are insomnia and suicidal ideation (SI) related?

- Insomnia is common risk factor for SI in primary care

What is Brief Cognitive Behavioral Therapy (bCBTi) for insomnia?

- It targets sleep restriction, stimulus control, and sleep specific CBT

What was the goal of the study?

- Can bCBTi ameliorate 1) SI and insomnia and 2) symptoms of depression (MDD) and/or PTSD. Do improvements in insomnia mediate SI symptom intensity reduction?



## HOW WAS THE STUDY CONDUCTED?

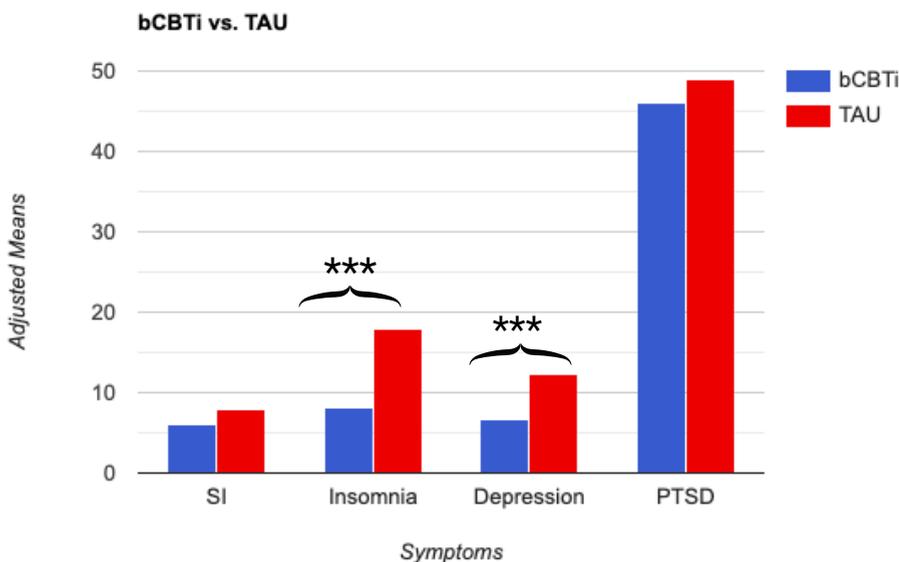
- Randomized controlled trial with 54 veterans endorsing SI + insomnia and MDD or PTSD
- Two interventions in primary care setting:
  - Treatment as usual (TAU) for Depression or PTSD
  - TAU in addition to bCBTi in primary care setting
- Assessment data collected at baseline and at 6-week follow up

## WHAT WERE THE RESULTS?

Compared to TAU, the effect of bCBTi on

1. SI intensity was **small**
2. Insomnia was **large\*\*\***
3. Depression was **large\*\*\***
4. PTSD was **small**

Insomnia severity **marginally mediated** bCBTi effect on SI



## TAKEAWAYS

1. Adding bCBTi to usual primary care may enhance overall care by improving both sleep and mood
2. Insomnia may mediate the effectiveness of bCBTi on SI intensity but replication studies are needed