Abstract

Sleep disturbance is increasingly recognized as a transdiagnostic process in psychiatric disorders like depression. This study aims to examine the efficacy of a novel transdiagnostic intervention (i.e. the Transdiagnostic and Circadian Intervention) in treating sleep disturbance among a group of Chinese depressive subjects. 33 depressive participants comorbid with more than one sleep or circadian problems according to the Sleep and Circadian Problem Checklist were randomized into treatment group and care-as-usual control group. The treatment program was composed of six sessions delivered in six consecutive weeks. Mixed effect analyses found significant group by time interaction at immediate and 4-week posttreatment. The severity of insomnia and depression were significantly reduced in the treatment group and the effects were maintained at 4-week posttreatment.

Introduction

Clinical and epidemiological studies have shown that sleep disturbance is closely linked to major depression (Breslau, Roth, & Rosenthal, 1996; Stewart et al., 2006; Tsuno, Besset, & Ritchie, 2005; Yates et al., 2007). Sleep disturbance itself can be manifested as different forms in depressive patients such as insomnia, hypersomnia, circadian, dysregulation and nocturnal panic attack (Harvey, 2008). In clinical studies, nearly 80% patients with depression reported sleep disturbance (Tsuno, Besset, & Ritchie, 2005) and around 41% of depressive patients reported sufficient insomnia symptoms to warrant an additional diagnosis of insomnia disorder under the diagnostic criteria of Diagnostic and Statistical Manual of Mental Disorder 5th Edition (Stewart et al., 2006). Other epidemiological studies also suggested that about 20% of patients with insomnia exhibit some depressive symptoms (Soldatos, 1994; Weissman et al., 1997), whereas depression has been shown to be the most consistent and significant risk factor for insomnia (Katz & McHorney, 1998; Ohayon, Caulet, & Lemoine, 1998).

Although sleep disturbance is closely associated with depression, the underlying mechanism is still uncertain (Liu et al., 2018). Nonetheless, there are accruing evidence to support the idea that sleep disturbance and depression may share an interacting neurobiological network (Harvey et al., 2011). For instance, a research