The Impact of What Happens in “the Other Third” of Our Lives

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This issue of Psychiatric Annals, guest edited by Drs. Thomas D. Hurwitz and Imran S. Khawaja, is focused on psychiatric sleep disturbances, particularly the effect on common psychiatric disorders and outcomes. The recent trend in sleep disturbances as an important causative factor in psychiatric disorders is reflected in the contributions to this issue.

The first article, “Insomnia and Depression: A Reciprocal Relationship,” by Drs. Daniel D. Herrick and Michael J. Sateia emphasizes the role of insomnia in depressive illness. The second article, “Sleep Disturbances in Posttraumatic Stress Disorder: Updated Review and Implications for Treatment,” by Drs. Erin Koffel, Khawaja, and Anne Germain describes the relationship between trauma and sleep complications. Next, in the article “The Relationship Between Sleep Disturbance, Suicidal Ideation, Suicide Attempts, and Suicide Among Adults: A Systematic Review,” Drs. Wilfred R. Pigeon, Todd M. Bishop, and Caitlin E. Titus link suicide behaviors to disrupted sleep patterns. This article reminds me of a review1 that found, in addition to severe psychic anxiety, severe insomnia was an acute predictor of suicide. That article also established that severe insomnia is a treatable risk factor for suicide.

The fourth article, “Obstructive Sleep Apnea and Depression: A Review,” by Dr. Khawaja and colleagues has special meaning to my personal health journey. I have recently begun wearing a continuous positive airway pressure (CPAP) device at night despite swearing that I would never submit to using one. My decision to finally use the CPAP was based on my age of 82 years, my lack of sleep and needing more of it, and the fact that my severe obstructive disease is reversed by using the machine. I have to admit that using the CPAP device has improved my sleep patterns and I am more energized on a daily basis.

The final article, “Sleep and Schizophrenia,” by Dr. Richard C. Holbert and colleagues reviews the relationship between sleep disorders and schizophrenia. The articles in this issue continue the recent patterns of treating sleep disturbances to reverse risk factors for depression, posttraumatic stress disorder, schizophrenia, and suicide.

REFERENCE