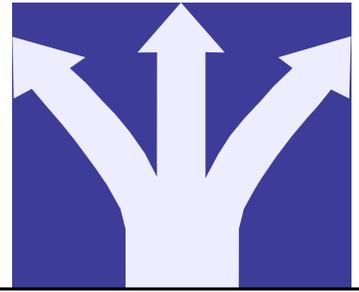


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Volume 9, Number 1

April/May 2009

Sleep Deprivation and Emotional Regulation

As reported by Hara E. Marano in *Psychology Today* (2003), the National Sleep Foundation found that most adults do not get as much sleep as they need. We all know how we feel after a bad night. What we may not realize is how dangerous sleep deprivation can be.

Studies show negative effects of sleep deprivation on physical and mental health. The immune system is compromised. Sleep loss has been linked to weight gain and obesity. Problems with concentration, attention, learning and memory occur. The emotional aspects of sleep deprivation – irritability, anxiety, depression, anger – can show up after just one night of sleep loss and become more prominent over time.

Lack of Sleep Produces Psychiatric Symptoms

Matthew Walker (2007) connects sleep deprivation to emotional instability. Using brain imaging, he showed that for people deprived of sleep, the amygdala in the brain becomes overly active. The amygdala processes emotions and kicks off the fight-or-flight response in reaction to danger. Without enough sleep, there is no watchdog in the brain to reason out if the danger is warranted or not. The brain goes directly to a release of noradrenalin, creating the physical stimulation that can easily lead to irrational anger and hostile behavior. He commented that: "The patterns of brain activity that you see in those healthy people who have had a lack of sleep are not dissimilar to the patterns of brain activity that you see in people suffering things like depression and posttraumatic stress disorder."

W. Robert Nay (2003) talks about developing the skill to recognize "anger intensifiers" which reduce impulse control. He also describes the "danger zone" where the fight-or-flight response is at its peak. Emotions are volatile, thoughts are impaired and coping strategies are forgotten.

Stress, substance use, and sleep deprivation all contribute to anger problems and lack of control, in the short and long term. Caffeine backfires since it can increase physical stress reactions, irritation and annoyance.

Developing Emotional Mastery

Marsha Linehan, in *Skills Manual for Treating Borderline Personality Disorder* (1993), outlines steps to develop the skills of emotional regulation to reduce emotional vulnerability, decrease emotional distress and increase resilience. While she was recommending these skills for a certain psychiatric symptoms, many individuals could benefit from her recommendations since the consistent use of these skills reduces irrational anger, impulsivity, poor judgment and negative behaviors.

She uses the acronym of PLEASE MASTER:
Reducing Vulnerability to Negative Emotions:

- Treat **P**hysical **I**llness
- Balanced **E**ating
- Avoid mood-**A**ltering drugs
- Balanced **S**leep: Try to get the amount of sleep that helps you feel good. Keep to a sleep program if you are having difficulty sleeping.

• Get **E**xercise
Build **M**ASTERY

James B. Mass presents his Golden Rules of Sleep (adapted below) (<http://www.powersleep.org/powersleep.htm>) :

1. *Get An Adequate Amount of Sleep Every Night*

Identify the amount of sleep that you need to be fully alert all day long.

2. *Establish A Regular Sleep Schedule*

Go to bed at the same time every night, and wake up without an alarm clock at the same time every morning, including weekends.

(continued)

3. *Get Continuous Sleep.*

For sleep to be rejuvenating you should get your required amount of sleep in one continuous block.

4. *Make Up For Lost Sleep.*

Make up for any lost sleep as soon as possible. Return to your regular sleep schedule as soon as possible.

References:

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Yoo SS, Gujar N, Hu P, Jolesz, FA, Walker, MP. The human emotional brain without sleep: a prefrontal amygdala disconnect. *Current Biology. Volume 17, Issue 20, R877-R878, 2007. Reviewed by Anwar, Y. Sleep loss linked to psychiatric disorders. Media Relations, October 22 2007.*

(The article was done with the research/writing assistance of Alice Miele, LICSW)

FROM THE FILES:

The Negative Impact of Verbal Abuse

A study conducted by clinicians at Harvard Medical School has suggested that when verbal abuse is constant and severe, it creates a risk of post-traumatic stress disorder. The research on which the report is based notes that children who are the target of frequent verbal mistreatment exhibit higher rates of physical aggression, delinquency and social problems than other children.

The study recruited 554 young people, aged 18 to 22 years, who responded to advertisements. About half were women and most were white. They all filled out questionnaires about unhappy childhoods and verbal abuse.

FROM THE FILES (Continued):

Verbal abuse, the researchers found, had as great an effect as physical or non-domestic sexual mistreatment. Verbal aggression alone turned out to be a particularly strong risk factor for depression, anger-hostility, and dissociation.

According to Martin Teicher, MD, associate professor of psychiatry at McLean Hospital, a Harvard-affiliated psychiatric facility and his research associates, "Our findings raise the possibility that exposure to verbal aggression may affect the development of certain vulnerable brain regions in susceptible individuals. Alternatively such exposure in childhood may put into force a powerful negative model for interpersonal relationships."

Harvard University Gazette Online, April 26, 2007

Teens , Anger and Alcohol

Researchers who conducted a national survey of 1,877 high school seniors found that 36% reported drinking just to experiment, while 32% said they drank for the thrill of the experience, and 15% said they used the alcohol to relax.

However, 18% of seniors indicated a number of reasons for drinking including to deal with anger and frustration, and these students were more likely to get drunk during the day, get drunk frequently, and to have started drinking by the 6th grade.

Join Together, January 4, 2008

Alcohol Use and Aggression Among College Students

Samantha Wells, a scientist at the Center for Addiction and Mental Health in Canada and her colleagues used data collected through the 2004 Canadian Campus Survey, a national survey of 6,282 students at 40 universities. Responses from 4,387 respondents (64.3% female, 35.7% male) were analyzed, focusing on the students three most recent drinking episodes.

Dr. Wells stated that, "We found that the more drinks students consumed, the greater their likelihood of experiencing aggression. We also found that aggression was more likely when students drank at a fraternity, sorority or residence, when their partner was present, and when they drank at three or more places on the same occasion. Drinking at a party also increased the likelihood of aggression, especially women. Conversely, aggression was less likely when students had a meal."

Her recommendations included developing programs that focused on preventing partner violence and other relationship-related conflicts.

Alcoholism: Clinical and Experimental Research (ACER), March 2008, 32 (3): 522-533.