Pharmacist Delivery of Cognitive Behavioral Therapy for Insomnia

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Introduction

Cognitive behavioral therapy for insomnia (CBT-I) is the first-line treatment recommendation for insomnia, with studies reporting CBT-I being more effective than hypnotics in the long run. Additionally, it does not have the associated adverse effects and risk of tolerance and dependence that hypnotics do. However, CBT-I is widely underutilized due to a lack of education, awareness, and trained providers. Recent research has investigated and proven the efficacy of the provision of CBT-I by non-sleep experts, such as nurses.

Objectives

- Investigate the feasibility of pharmacist-delivered CBT-I
- Develop a CBT-I training manual and workshop for pharmacists.

Method

Literature search (PubMed, IPA, Google) – efficacy and accessibility of CBT-I; methods of delivering CBT-I; reports of pharmacist provision of CBT-I. Based on this information, a training manual for pharmacists with an accompanying workbook for patients was drafted. Content included sleep restriction, stimulus control therapy, sleep hygiene, cognitive restructuring and relaxation techniques. A focus group comprised of six practicing community pharmacists evaluated the manual, patient workbook, and concept of pharmacist provision of CBT-I.

Results

Focus group participants had a number of suggestions for revision of both the manuals. Overall they were very enthusiastic about both the manuals and the prospect of adding CBT-I to their practices:

"Medications are only a temporary fix and many patients (and physicians) just keep taking them as prescribed without looking at alternatives. I would love to be able to offer an alternative to drugs that is effective – CBT-I!"

Main barriers to practice that were identified revolved around the uncertainty of a reimbursement model, as all of the participants would require reimbursement for providing the service. Additionally, some participants stated that their pharmacies are not adequately staffed to support the addition of new pharmacy services.

Results (Continued)

Pharmacists’ knowledge and confidence in providing CBT-I was assessed using before and after surveys that utilized like-it scales. Before participating in training, pharmacists felt "slightly knowledgeable" on the topic of CBT-I and "not at all knowledgeable" on the specific topics of sleep restriction, stimulus control, and cognitive restructuring (Figure 1). The median confidence level for providing CBT-I in general was 17.5% (IQR[11.25,31.25]) and 0% (IQR[0,7.5]) for the specific components. Pharmacists felt most confident providing sleep hygiene, with a median score of 70% (IQR[55,70]).

After reading the training manual, pharmacists’ knowledge in providing CBT-I increased to "moderately knowledgeable" (Figure 2) and confidence increased to 73% (IQR[70,75]) (Figure 3). Their knowledge in sleep restriction, stimulus control and cognitive restructuring increased from "not at all knowledgeable" to "moderately knowledgeable". Their confidence levels for these components also rose from 0% to 68.80% (IQR[50,80]). Knowledge for providing sleep hygiene also increased to "extremely knowledgeable" and confidence increased to 90% (IQR[80,90]).

While knowledge and confidence levels were greatly improved after reading the training manual, many participants still felt they required some additional training before they would provide this service:

"I would like to practice on a few simulated patients before I would feel an increase in my confidence. I don’t think feeling immediately comfortable offering CBT-I is to be expected from reading a manual. Practicing this type of therapy is paramount to feeling confident and being successful."

Implications

Community pharmacists trained in CBT-I will provide greater access to a safe and effective alternative for sleep therapy beyond just hypnotics. This will not only improve patients’ quality of life and relationship with their pharmacist, but also reduce the burden of hypnotic-related adverse effects on the healthcare system. Additionally, it will further support the expansion of the pharmacists’ scope of practice and provide potential opportunities for new pharmacy revenue.

Future Directions

The next phase of the project is currently under development and will pilot the program in community pharmacies across Saskatchewan. Pharmacists will undergo the updated training program and recruit patients to participate in the six-week program. At this time, the effectiveness of pharmacist delivered CBT-I will be tested along with monitoring patient hypnotic use and patient/pharmacist satisfaction.