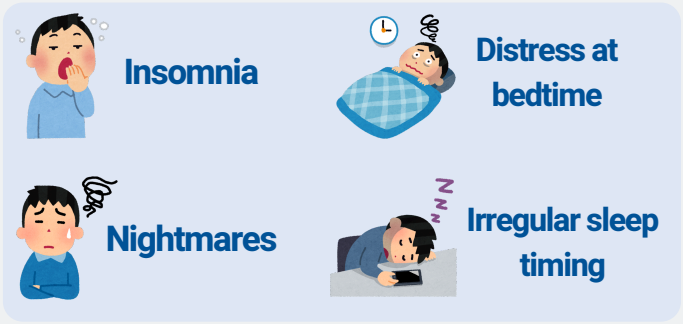
CONNECTION LEARNING HEALTH SYSTEMS
HUB-WIDE DATA SNAPSHOT
SLEEP AND FIRST-EPISODE PSYCHOSIS

Sleep disturbances are highly prevalent in individuals with psychosis-spectrum disorders. However, the nature of these disturbances is unclear. This snapshot involves data from 406 First Episode Psychosis (FEP) participants in CSC programs within the Connection Learning Healthcare System (CLHS) Hub of the Early Psychosis Intervention Network (EPINET).

Sleep problems in FEP include:



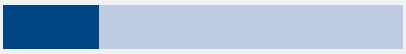
The **Minimal Insomnia Symptom Scale (MISS)** was used to measure:

- Difficulties with falling asleep
- Nighttime awakenings
- Non-restorative sleep

The MISS results in a total score of **sleep difficulty severity**.

Sleep in FEP characterized

406 individuals provided data on insomnia severity



24% endorsed clinically signficant symptoms of insomnia

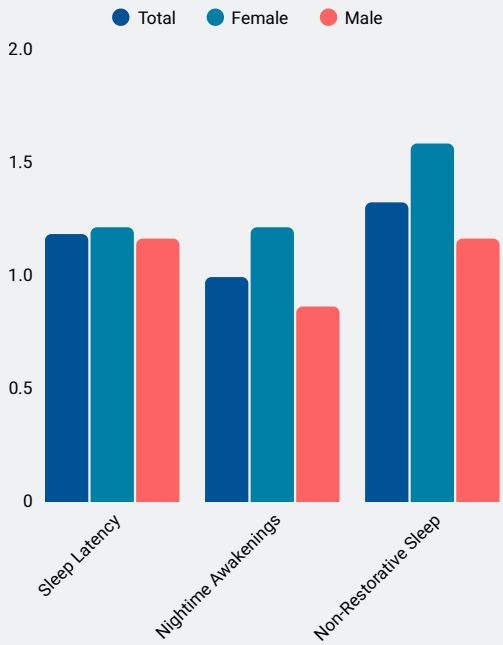
Insomnia has been positively associated with:

- Higher rates of suicide
- Increased psychosis symptoms
- Poorer school/work engagement
- Lower quality of life

Sex based sleep differences:

Females reported

- Higher overall insomnia severity
- More nighttime awakenings
- Less resorative sleep



Indirect Effect of Sleep on **Social Functioning** through **Suspiciousness** in FEP

Insomnia (or poor sleep) can increase feelings of mistrust, making it harder to function in daily life.

Poor sleep → **Increased suspiciousness** → **Decreased social functioning**

These findings in the CAB data highlight how crucial sleep is for those struggling with serious mental illness. Sleep disturbances are an important treatment target for individuals engaging in FEP programs.