Anxiety, Sleep, and the Brain

Live Seminar (one)

- South Sioux City, Apr 17
- Des Moines, Apr 20
- Cedar Rapids, Apr 21
- Dubuque, Apr 23
- Bettendorf, Apr 24

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Profession(s)

Tuition

- $79 Individual Rate
- $74 Group Rate (3 or More Persons Registering Together)
- $89 On-Site Registration (if space is available)
- $290 Training Your Brain To Adopt Healthy Habits (2019) (296 pages)

Four Ways To Register

1. Internet: www.ibpceu.com
2. Mail: PO Box 2238, Los Banos, CA 93635 (make check payable to IBP)
3. Fax: (877) 517-5222
4. Phone: (866) 652-7414 (open 24 hours a day, 7 days a week)

Purchase orders are accepted. IBP tax identification number: 77-0026830

All major credit cards are accepted:

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The IBP Experience

Since 1984, our non-profit organization (tax ID 77-0026830) has presented informative and practical seminars. IBP is the leading provider of accredited programs concerning the brain and behavioral sciences.
Sleep Deprivation and Anxiety Disorders

A Night of Restorative Sleep: slow wave sleep, REM sleep, circadian rhythms, and healthy cortisol rhythm; how much sleep do we need and the impact of insufficient sleep.

How Anxiety-Related Disorders Interface with Sleep
- Generalized Anxiety Disorder
- Obsessive Compulsive Disorder
- Posttraumatic Stress Disorder
- Mixed Anxiety Disorder

The Significance of Different Aspects of Sleep Disturbance
- Lying awake for extended periods before sleep onset
- Shallow sleep indicated by Stage 1 and 2 Slow-Wave Sleep
- Multiple Awakenings
- NREM Behavior Disorder, Depression and Parkinson’s Disease
- Difficulty Returning to Sleep
- Total Sleep Time
- Excessive Daytime Fatigue
- Cortisol and Stress-Related Symptoms: cortisol, the adrenal hormone associated with chronic stress, is elevated with sleep deprivation, and is associated with neuro-inflammation and hypertension.

Anxiety and the Vigilant Brain: increased time lying awake; reduced restorative slow-wave sleep and less total sleep.

Anxiety and Depression: anxiety associated more with difficulty falling asleep whereas depression is related to early awakening with inability to return to sleep; REM sleep occurring at the time of sleep onset and cortisol suppression.

Sleep Loss and Memory Impairments:
- Insufficient slow wave or REM sleep impairs short-term memory, long-term memory and executive function for habits.

Short-Term Memory Consolidation: elevated cortisol strips hippocampal neurons of their dendrites.

Fear, Anxiety and the Sensitized Amygdala: elevated cortisol enlarges the amygdala, the brain’s “watch dog.”

Regret, Rumination, and “What If?” Thinking: how a region of the frontal lobes sensitive to aging is critical for producing restorative slow-wave sleep and “what if” thinking.

Removal of Neurotoxins: a key function of restorative slow wave sleep is the removal of waste products including beta-amyloid and tau, biomarkers of Alzheimer’s Disease.

ABOUT THE INSTRUCTOR
Michele Okun, Ph.D., a psychologist, teaches and is a Research Assistant Professor in the Department of Psychology, University of Colorado, Colorado Springs. She is an expert in the study of disturbed sleep, inflammation, and depression. Dr. Okun has authored or co-authored over three dozen scientific articles and book chapters and has presented her research at an invited speaker at numerous conferences and lectures in the North America and England.

Dr. Okun, the recipient of many honors and awards, is recognized for teaching excellence. Her Fellows particularly recommend her outstanding presentations for her personable and stimulating teaching style presented with clinical wisdom, wit, and warmth. In addition to Q & A in class, Dr. Okun will answer your questions during the second half of the lunch break and by email after the program concludes.

A Brain-Based Approach to Improve Sleep

A New Approach: by identifying the parts of the brain that impair sleep, optimal mind-body interventions can be practiced.

Calming the Alerting System—Tired But Wired: exercises that help us habituate to the bedroom by mindfully focusing on breath, feelings and interventions to quiet the reticular formation.

Reducing Pain: mind-body approaches to calm the pain matrix.

Reducing Hunger: hormones that keep us awake; low glycemic snacks that help to relax.

Cooling the Environment: to fall asleep, the body must cool itself by 2 degrees; rule of room temperature and the hypothalamus.

Resetting Circadian Rhythms: time markers (light-dark, meal time), cortisol rhythm in sleep-phase disorders (e.g., night owls).

Reducing Fear: calming the amygdala by the slower, wiser frontal cortex by visualizing more reasonable expectations.

Reducing Rumination: calms the fronto-polar region involved in “what if” reasoning.

Reducing Anticipatory Anxiety: parts of the prefrontal cortex “what if” component of sleep journal can distance us from thoughts that keep us awake.

Cognitive-Behavioral Approaches for Insomnia: CBT engages the parieto-temporal cortices to modify how we think about sleep; the mindset of stress-resistant people.

Mindfulness-Based Stress Meditation: unfocused attention (open monitoring) involves non-judgmental awareness of sensations, feelings and thoughts and diminished activity in anxiety-related brain areas.

Food, Neurotransmitters, Hormones and Sleep
- GABA, gabapentin, sedation and lavender.
- Serotonin, tryptophan, and reducing wakefulness.
- Melatonin: misuse and use for setting the time of sleep onset.
- Orexin: selected lipids that act like hypnic.

Adopting Brain-Protective Sleep Habits of SuperAger: how to attain and maintain positive habits.