P01-171

CORRELATES OF INSOMNIA IN PATIENTS WITH SOCIAL PHOBIA: ROLE OF DEPRESSION AND ANXIETY

T. Raffray^{1,2}, A. Pelissolo³

¹Department of Psychiatry, Centre Hospitalier Universitaire Vaudois, Lausanne, Switzerland, ²Department of Psychiatry and Human Behavior, Alpert Medical School of Brown University, Providence, RI, USA, ³Department of Adult Psychiatry, CHU Pitié-Salpêtrière, AP-HP, Université Pierre et Marie Curie, Paris, France

Introduction: Most of the literature examining sleep in anxiety disorders has focused on post-traumatic stress disorder and generalized anxiety disorder. Few studies have examined sleep disturbances in social phobia. Yet, social phobia has a lifetime prevalence of 12%. Previous studies assessed sleep disturbances in small samples of individuals with social phobia. Most studies reported bivariate analysis, the only multivariate analysis being in non treatment-seeking individuals.

Objectives: To assess insomnia severity in a population of treatment-seeking patients with social phobia and investigate correlations between insomnia, depression, general anxiety, and social anxiety.

Aims: To demonstrate that positive associations exist between anxiety, depression, and insomnia in patients with social phobia, depression contributing the most to insomnia severity.

Methods: One hundred and seventy-nine treatment-seeking individuals with a DSM-IV diagnosis of social phobia completed the Insomnia Severity Index (ISI), the Hospital Anxiety and Depression Scale (HAD-A and HAD-D) and the Liebowitz Social Anxiety Scale (LSAS). Results: Two-thirds of our sample had insomnia. Depression, anxiety, social anxiety, and insomnia were positively correlated. Sex, HAD-A and LSAS significantly contributed in explaining the ISI total score after accounting for age, medication use, and depression, whereas HAD-D was not a significant contributor. The model explained 33.5% of the overall variance.

Conclusion: Assessing sleep quality and quantity, and understanding the interactions between insomnia, anxiety and depression, is needed to improve treatment in patients with social phobia and could allow adapting cognitive and behavioral therapy for insomnia programs to social anxiety.