

# Review of: "Insomnia Prevalence and Mental Health Correlates Among 18,646 Users of an Internet-Based Cognitive-Behavioural Therapy Website: Archival Real-World Data From the United States, 2017–2019"

Deirdre A. Conroy<sup>1</sup>

<sup>1</sup> Behavioral Sleep Medicine, University of Michigan - Ann Arbor, United States

Potential competing interests: No potential competing interests to declare.

The study examined data from almost 20,000 users of a Cognitive Behavioral Therapy web-based platform for mental health disorders. The author examined archival data from the app that was provided to college students and working adults. The author has previously published single-author papers on this data set.

The conclusions were that insomnia is comorbid with other common mental health conditions and linked to work performance problems.

Overall study results are consistent with other data showing that about 1/3<sup>d</sup> of the population has sleep difficulties and highlight the transdiagnostic nature of insomnia. Could you provide specific examples of how the study's findings on insomnia's comorbidity with mental health conditions could be applied in clinical settings?

The strengths of the study lie in the large sample size and the specific focus on how insomnia relates to mental health and work performance. The inverse relationship between insomnia severity and age was somewhat inconsistent with previous findings that insomnia increases with age, but this may be due in part to a younger user base.

Limitations of the study include the low follow-up rate of participation at 3.8%. Longer duration of examination may prove beneficial. What specific strategies could improve participant follow-up rates, and how might they alter the study's conclusions?

Could the author provide further clarification on the inverse associations between the psychological conditions and the perceived general health factor (average  $r = -.29$ )? Specifically, the statement "These findings underscore that the psychological nature of insomnia is stronger than its impact on physical health." The relationship between insomnia's impact on physical health is very common in patients. How might the study's findings inform specific therapeutic interventions or screening processes in clinical practice?

In the acknowledgements section, the author refers to the program as an "online iCBT service," but the platform appears to provide general CBT and not specifically CBT for insomnia (iCBT). This clarification may be helpful.

