Sleepio - a Digital Sleep Improvement Programme

Sleepio is clinically proven to help overcome even long-term poor sleep without pills or potions, using Cognitive Behavioural Therapy (CBT) techniques personalised to you.

It’s hard to think of an area of life that sleep doesn’t affect - from how you feel on a daily basis to your long-term health. A good night’s sleep is the most important health behaviour in our lives.

Unfortunately, sleep problems affect 1 in 3 people in the UK at any one time, and about 10% of the population is affected on a chronic basis. That can mean problems falling asleep, staying asleep or with the quality of sleep. In addition, poor sleep can be linked to other mental and physical health problems such as anxiety and depression.

That’s where Sleepio comes in.

Sleepio was created by ex-insomnia sufferer Peter Hames and world sleep expert, Professor Colin Espie at the University of Oxford. Unable to access anything other than sleeping pills from his GP, Peter, an experimental psychologist, was forced to resort to a self-help book written by Professor Espie. In six weeks, he had made the necessary cognitive and behavioural changes to overcome his own sleep problem.

Frustrated by his own experience, Peter, along with Colin, began developing a technological solution to address insomnia: Sleepio.

Sleepio offers a highly personalised experience based on the patient’s goals, needs, and sleep history and is accessible through online and mobile platforms. The lessons are taught by ‘The Prof’, a virtual sleep expert, whose use of humor and light-heartedness offers an entertaining way of learning critical sleep knowledge. The sessions are underpinned by a motivational system and community support.

Sleepio also provides tools such as a sleep diary, to-do lists, and recommended reading to help manage behaviour and to learn about sleep.

Sleepio is the first product of Big Health, the pioneering healthcare company that delivers personalised, clinically-proven behavioral medicine via web and mobile.

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