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Cognitive-Behavioral Therapy Shows Promise Managing Menopausal Insomnia and Hot Flashes

New study demonstrates that cognitive-behavioral therapy intervention can produce meaningful short-term improvements in insomnia severity, hot flash interference, sleep self-efficacy, and depressive symptoms

CLEVELAND, Ohio (May 6, 2026)—Insomnia is a common problem, affecting as many as 20% to 60% of perimenopausal and postmenopausal US women. Because of its possible severe physical and psychological effects, ongoing research is focused on identifying effective treatment options. A new study suggests that cognitive-behavioral therapy intervention may produce at least short-term benefits. Results of the study are published online today in *Menopause*, the journal of The Menopause Society.

Insomnia is defined as disturbed sleep associated with distress or impairment and is one of the most common complaints in perimenopause and postmenopause. The health and functional consequences of insomnia include reduced quality of life, increased health care use and costs, disability, and incidence of depression and cardiovascular disease.

Hot flashes occur in 60% to 80% of women during the menopause transition and can persist for 4 to 5 years on average. Nocturnal hot flashes are associated with sleep disruption. Midlife women with hot flashes often report diminished sleep quality and are more likely to meet criteria for insomnia disorder. Consequently, women may engage in compensatory behaviors, such as napping or extending time in bed, both of which can perpetuate insomnia.

Previous studies have already confirmed that cognitive-behavioral therapy is an effective treatment for insomnia that is based on structured, short-term, skill-focused psychotherapy aimed at changing maladaptive cognition (eg, thoughts and beliefs) and behaviors contributing to insomnia.

Insomnia in women during the menopause transition and beyond is complex and can have many causes, including aging, hormone fluctuation, hot flashes, other sleep disorders, psychiatric and medical conditions, and psychosocial stressors. As midlife women with acute and sustained insomnia experience greater negative health consequences, it is imperative to provide effective treatments for menopause-related insomnia.

Although there is prior research demonstrating cognitive-behavioral therapy as an effective strategy for coping with hot flashes and other menopause symptoms, few such trials have addressed both insomnia and hot flashes. That's why this latest pilot study aimed to demonstrate the effectiveness of cognitive-behavioral therapy intervention for both insomnia and such menopause symptoms as hot flashes in perimenopausal and postmenopausal women. Based on the results, researchers concluded that this type of therapy represents a feasible and promising approach to address menopause-related insomnia and nocturnal hot flashes. The intervention produced meaningful, short-term improvements in insomnia

severity, hot flash interference, sleep self-efficacy, and depressive symptoms, although benefits did diminish after 3 months.

Study results are published in the article “Cognitive behavioral therapy for menopausal insomnia in perimenopausal and postmenopausal women with insomnia and nocturnal hot flashes: a randomized-controlled pilot trial.”

“Nocturnal hot flashes (night sweats) and sleep disruption can have a significant effect on the quality of life with many women claiming extreme impairment due to symptoms that often start in early perimenopause and last 10 or more years. Sleep disturbances can persist even in those using pharmacologic therapy to manage hot flashes. The study's findings highlight the utility of cognitive-behavioral therapy as a standalone treatment for insomnia and hot flashes, offering women an alternative or adjunct to pharmacologic treatments,” says Dr. Monica Christmas, associate medical director for The Menopause Society.

For more information about menopause and healthy aging, visit www.menopause.org.

The Menopause Society is dedicated to empowering healthcare professionals and providing them with the tools and resources to improve the health of women during the menopause transition and beyond. As the leading authority on menopause since 1989, the nonprofit, multidisciplinary organization serves as the independent, evidence-based resource for healthcare professionals, researchers, the media, and the public and leads the conversation about improving women's health and healthcare experiences. To learn more, visit menopause.org.