Introduction to Sleep Reset and Yunha Kim

Hi. It's Dr. Audrey Wells again. I'm your host for the Sleep Deep Summit. New Approaches At Treating Sleep Apnea And Insomnia. My next guest is Yunha Kim and she is the Founder and CEO of Sleep Reset Sleep Reset is a personalized, science-backed sleep program which is clinically proven to reduce insomnia symptoms.

And especially relevant to our discussion today is her personal experience in dealing with a diagnosis of sleep apnea and insomnia. I imagine this is what drove her desire to make a real difference in the lives of others.

And we're going to get into it. Welcome Yunha Kim. Thank you for having me, Dr. Wells. Yeah, it's it's great to have you and kind of talk about someone who's had personal experience with the two diagnoses that we're addressing in this summit.

So I'm wondering if you can walk us through when the first one happened and what the circumstances were. Yeah. So it was around 2020 where things got a little crazy with like, you know, no longer going to the office anymore.

We're working from home. And also as a business owner, you there's a lot more changes that are happening. And I don't know if that's what's caused it or not, but that's around.

When I started getting these symptoms around, I couldn't fall asleep at night. So at first it started off with like 30 minutes before I used to sleep so well.

Like, I just like, go to sleep right away. But 30 minutes. And at some point it's like now 2 hours to fall asleep.

Onset of Insomnia During 2020

And I wake up in the middle of the night, can't fall back asleep. And it just ended up being, like, a debilitating thing. And. And at that time, I thought that the best thing that I could do if I cannot fall asleep is to just try to go to bed even earlier.

So it got to a point where I was like, at 7 p.m., I'm in bed trying to fall asleep. And now, like now that I'm in this space and like I know what we're asking our members to do, I sleep, be like, that's the worst thing that you can do, but I was doing all of that and I bought all the gadgets possible.

I was taking all these sleeping pills. It started off with melatonin and then more stronger sleeping pills. And, you know, some of them were able to get me to fall asleep, but then I would wake up feeling like a zombie, like super groggy.

And I remember going to work, obviously, like on Zoom and telling my team members, hey, my brain is not working very well. And yeah, it was like a period where I felt so irritable.

I felt like now not like my self. I can tell you a little bit more about how that like evolved into this whole thing. But yeah, that's how it started.

Yeah. And I want to just say that that experience is so common among people who start having issues with their sleep and start trying to troubleshoot it.

A very common response is going to bed earlier just to be there in case you fall asleep. Yeah. And so what happened next? What did you do? And after my foray into all the wearables, like all the supplements and sleeping pills, and at one point I realized, okay, I can't live like this anymore.

So I signed up for Stanford Sleep Clinic to get CBT-I sessions, and then I was waitlisted for six months and you know. So that's there. Cognitive Behavioral Therapy for Insomnia Program.

Yeah, that's right. Because I was Google searching, like doing all this research and I learned a CBT-I is like the go to treatment for insomnia. But then, you know, when you're when you're on a waitlist for six months and you struggle with sleep and sleep is a thing where you don't sleep even one day it just like that day is all like done right.

And so we had been on a six month waitlist was like a death sentence to me and it was kind of like interesting, coincidental thing where at that time I was running a company called Simple Habit, which had over 7 million customers that were using our product, our meditation app, to meditate.

And actually, less than 10% of our meditation content was was designed for sleep, but it represented over 70% of user engagement. Oh, that's so fascinating.

I remember, you know, I was like secretly struggling with insomnia. And then my data scientist is like, insomnia is a reason why people are using our product.

And so I started interviewing all these customers. And one thing that we found is that all these people are using our product because they don't want to use sleeping pills.

Finding CBT-I and Building a Digital Sleep Program

So anyways, when I was on a waitlist, that's how I learned that access to care for sleep is not really there. Yeah, yeah. It's a huge problem. There's not enough sleep medicine physicians.

There's also not enough clinical psychologists who do the CBT-I technique for insomnia. So I imagine that this was kind of strange being this place where you had a product that addresses insomnia and at the same time you're struggling yourself and lack of sleep is kind of the great equalizer, right?

It will bring anybody to their knees if you're not sleeping well. So, you know, this is so you were trying to kind of cope with it. And I wonder, how did you end up handling it?

Mm Actually, so when I was on this waitlist, I tried a bunch of like sleep coaching. Like, I went on the sleep coaching website trying to get a doctor appointment.

And then at the same time at my work, we had a kind of like a project to we. So the question that we asked is like, okay, now we are using meditation to help people cope with insomnia, but how can we actually help them like address the root cause of insomnia?

And so then we actually, our company started working with doctors at the Stanford Sleep Clinic to digitize what they do at the clinic. And it's interesting because doctors were saying, you know, actually, like this thing, we don't this doesn't have to be in person, then we can digitize this and provide access to care.

And so we built this on the side, too, so we can offer to our simple habit customers, actually. And I happened to be the first customer for this product because I was still on a waitlist.

And yeah, so that program, which now became Sleep Visa, is like where you do a sleep logging manual, sleep logging, unlike the wearables where like they keep on telling you you didn't sleep well, you didn't see well, it just only causes more anxiety.

You are doing like manual sleep logging. There's educational exercises, but most importantly, there was a human sleep coach that like really empathized with this problem and she would actually look at my data and be like and she found a lot of it.

So I thought that sleep hygiene wise, I was like a plus. That's what a lot of people with insomnia think because

they've done so much right and nothing has worked.

But she has helped me understand some of the issues that I was having and I started like making some changes to it. And actually within four weeks, insomnia basically got cured for me.

And I think the root of it is that people who have insomnia end up creating this bad relationship with sleep. That was my problem. So because I was spending 2 hours in bed unable to fall asleep.

Now, whenever I see that mattress, it's a source of stress and anxiety. Right. And I had no idea that was the root cause of my insomnia. I couldn't even imagine that that like if somebody pitched me on that or somebody pitched me that, hey, addressing that will solve insomnia.

Like, I would have to leave that. But in four weeks, that's how I ended up resolving it. And I can tell you a little bit about the sleep apnea journey also, but that's how my sleep started getting better.

Yeah. Yeah. What you're describing is that cognitive pairing with not being able to sleep and your bed. And I think, you know, it it is a challenge.

Diagnosing Sleep Apnea After Insomnia Improves

I've had that experience myself where I'm trying to convince somebody that this is a real thing. And I kind of make the analogy that, you know, if you want to lose weight, don't walk into your kitchen or, you know, you have another cognitive pairing of when you get into your car, you put your seatbelt on mindlessly out of habit.

You know, that's that movement is now in your subconscious because you've done it so many times. Yeah. And that cognitive pairing with the bed is definitely a factor for people who struggle with insomnia.

Yeah. And you mentioned, too, that it's really helpful to have somebody, another person, a live human being. Yeah. They're giving you encouragement, looking at your information.

You know, that having a dialog. And I'm wondering, is that component included with the Sleep Reset Program? Yeah, because I've went through this experience and I realize how important and critical that is.

It's part of the program, in fact, like critical part of the program. So all of our sleep coaches, they're not A. I. A lot of people ask that all the way.

I know they're they're actually human beings that live in the United States. They look at your data. They care about you. But yeah, that's that that is part of our program.

Yeah. Oh, that's amazing. Yeah. And so how did you end up getting diagnosed with sleep apnea? It sounds like that came later. Yeah. So four weeks into the program, that's where my like, I started sleeping within like 10 minutes.

Like, it was a miracle, right? Like, I no longer am staring at the ceiling for two, 2 hours, and so. And I was still sleep logging and my coach was like, hey, you know, you're kind to fall asleep and spent time spent in bed awake has reduced drastically that's awesome.

But the sleep quality that you're reporting is still okay. It's not high, as we would expect. Have you ever gotten tested for sleep apnea? And as you can see, like I'm I'm in my mid-thirties, I weigh £110.

I would not have thought that I have sleep apnea, because when you look at the sleep apnea like commercials, it's usually like older men, right? Far more overweight.

So I never got past it, but she suggested it. And so I actually that's yet another journey. So I told my doctor that I want to get tested and you have to go through the insurance hurdles where you have to get tested at home first

and then you go into a clinic.

It took another six months actually to get tested for that. But yeah, I was diagnosed with sleep apnea. Yeah. Yeah. You know, I think that misconception is really rampant, that sleep apnea only affects people who are overweight.

It predominantly affects men, predominantly affects, you know, people who are of a certain age. And, you know, I can sympathize because one of the things that I have discovered in testing some of these homes, sleep test devices, is that I have sleep apnea and it's quite mild right now, but I'm sort of capturing the beginning of it, which is no surprise given my family history.

But like you, I don't think people would look at someone like me and say that person has sleep apnea. So one of my missions in life is to dispel that myth.

And I think especially for women, it's challenging too, because women tend to arouse more from sleep rather than drop their blood oxygen levels. Yeah.

So so I got tested, right. And so I went to my mom and dad. I was like, I don't care if you have symptoms at all, but you need to get tested. And guess what?

They they got their age high of like something in the thirties and forties. Oh my goodness. Yeah. And they had no idea for 56 years. They were both positive for sleep apnea.

Yeah. Oh, man. So they're both like, so the setup journey is very fast now. So I got CPAP and I was telling my RTR what is that called? You're right, the respiratory therapist.

Yeah.

Adapting to CPAP and Building the Habit

In my checking call after two weeks of using CPAP, I was like, I cannot do this. This is like, you know, like not only does this look ugly, but also like the air leaking, I can't deal with it.

And I was going to just like, give up on it and just live like it. But then the AARP was like, hey, most people like, if you just, like, follow through for like 30 days, a lot of people will come out of that saying that this is the best thing in your life.

So because she said that I actually did it and now I just sleep up every night I carry with everywhere I go and I'm a huge step up fan. So like that human element is so needed, which is why actually in our program now.

So we started off with insomnia, right? Like we or we, we help people fall asleep or stay asleep and after four weeks when we most of our customers start seeing results by week two and most of the results we see in like 6 to 8 weeks.

But if we start not seeing the sleep quality increase, that's when we bring up the sleep apnea testing. Because also like you kind of need to first fixture insomnia before you get like sleep apnea testing or even like imagine having insomnia and on top of that put CPAP machine on your face.

Like that's just going to except you're going to have like a moderate sleep anxiety on top of CPAP anxiety. I think so. Anyways, that's kind of like what we do now.

As Sleepy said. That's fantastic. And I just want to point out the irony that you have a company called Simple Habits and there's respiratory therapists is telling you if you can get to the habit phase with this CPAP, then you might grow to like it.

And oh man, there's so many patients that I've treated like there's some kind of hump that they get over, and then it

becomes kind of part of the routine and, you know, helping somebody through that is absolutely critical.

And unfortunately, the health care delivery system doesn't allow for that human touch very well. So, yeah, yeah, I can totally resonate with that experience.

And you know, one thing that is a big obstacle for a lot of folks is the mask. Was that part of your challenge is getting used to the house? I started off with the big mask and it was like leaking right?

And then I started the nasal line and then like nasal there's like a one that's like a tube and then there's like a, like a, I don't know all the names of it, but yeah, I had to like experiment with salt.

And on top of that, I have like I'm allergic to silicon. Oh, okay. Like that crease yet. And other times I need like mass liner. So, yes, I'm in this knee deep in this exploration.

Yeah. Yeah, that that's really interesting what you're describing is nasal pillows. That's the kind that just fits on the inside of your nostrils. Yeah. Yeah.

And then there's nasal cradle that just kind of goes up to the base of your nose. Yeah. You know, the silicone allergy can be challenging for sure. You know, even just having silicone on your skin for 8 hours for some people is tough.

So the mask liner can help. Trial and error. There's quite a bit of that. Are you up to the point where you're able to use CPAP through the whole night?

At this point? Yeah, I've been like I got to that point a year ago I think. Mm. It took me like maybe so that first 30 days was important. It was more like a psychological challenge.

And then the second month is about like not waking up throughout the night because it's not leaking, kind of like knowing how to adjust. You're kind of the headbanger.

Mm hmm. Yeah. So, yeah, I don't. I don't wake up anymore. Like, in the middle of the night. My sleep is just so wonderful now, so. Oh, that's great. That's really great to hear.

It looks like you're good. I mean, we're kind of in the middle of the day now. You look quite alert in a way. Thank you. So something I coach on quite a bit is how to help people over that psychological resistance.

And I wonder if you can draw on your expertize with habits and just give people who are in that spot where they're still feeling like, Oh, I don't want to use this thing.

What can you give them to help them get inspired again for KOBASHI? Mm hmm. Hmm. So in the like, habit world of, like we always say, start small. Like if going to the gym for 30 minutes every day is hard, start with like, just go there for 5 minutes, right?

Like, I don't know. Is that something that you guys would recommend in the capital? That's not a recommendation I got. Well, actually, what help from me is the testimonials of other people who said this was so hard, but after it, just go do it for 30 days and you're going to like, appreciate me for saying it or that's that's what I did.

But yeah, I'm curious what you what do you recommend for that? Yeah. Yeah, it's it's a really good question because depending on how a person is reacting, I kind of tailor that approach.

And I know that brief exposure can be helpful. Sometimes that occurs at night, like just getting used to putting on the mask and falling asleep with Iran.

And then if they wake up in the middle of the night, it's okay to take it off and put it to the side. But you still go back the next day and put on the mask and fall asleep so that there's that that pairing between mask and sleep.

How Sleep Reset Works and Closing Remarks

Some people can't even tolerate that, though. So what I asked them to do is use the mask earlier in the day where there's no pressure to sleep. And that's really important because then they're not getting agitated at a time when they need to relax, to fall asleep.

So that practice earlier in the day start with 2 minutes, start with 5 minutes, something you know, bite sized and then work up from there. I see. Yeah.

Interesting. Yeah. I think like a part of it was like lowering your own standard because I thought the success of using CPAP is like, I sleep with it and I love, I need to love it, right?

But like this happens with our, our customers to a lot of our customers are like, I have to. So we ask our customers to sleep in a consistent like bedtime and wake, wake time.

Right. So so a lot of our customers are like type A's or like I have failed because I slept 15 minutes later. And, you know, we try to like losing that a little bit, saying like, yes, this is what we recommend and we really want you to do this, but you're a human and we're going to be like sleeping for like every day for the rest of our lives.

And there will be days where you would fail. So maybe like, well, what I love about what you're doing is like lowering the bar a little bit, saying like, it's okay not to, like, sleep through the night with it, but start with it at least, and then.

And you'll get used to it. Yeah. It took me a while for me to convince my mom and dad to use a couple. So like they were diagnosed with sleep apnea, but my mom was like, I can't do the seek up thing.

And yeah, for me, what I told her, it wasn't the kind of clinical advice that you gave, which would have been awesome if I did that. I just said like, just trust me for 30 days. Yeah.

And how's she doing now? Oh, they're both like, it's so funny. Hilarious going into their, like, room, because they're both using it and night. And they also, whenever we go for travel, they, like, bring their seatback sheets.

So that's great. That's really great. Yeah. You know, it's, it's really funny. I think that once you're kind of over that step, you start looking for other people who are using CPAP and it's a great way to connect with them.

You know, it affects everything good sleep affects your relationships, it affects your job performance, it affects your mood and how you talk to yourself.

So I think it's really worth it to get to that place where your sleep is truly fixed. So great job at persevering. Thank you. Thank you. You know, as as we kind of close here, I just want to underscore that it seems that your own personal experience was a big driver for you to start and and fine tune the Sleep Reset Program.

Can you tell the audience a little bit more about how it works and where that they could go to find out more? Yeah. First of all, you can go to thesleepreset.com and you can take a quiz that will help you understand whether you're the right fit for sleep reset and whether sleep reset can help you improve your sleep.

So it's thesleepreset.com And how it works is we have you take a quiz to like better understand your lifestyle like exactly what are the symptoms that you're having and it will kind of tell you like what would are so you would like fill out this quiz and then the next day will give you this like sleep evaluation that will kind of address some of the potential root causes.

Obviously, we won't know all of it in just one survey, but like potentially like areas that we would want to work on. For example, if I took that quiz couple a few years ago, it would have probably said, you seem to have sleep anxiety or like unhealthy relationship with sleep.

And, you know, something that I did not know before. And then based on that, the coach will put a plan for you that will address some of those issues, and that includes daily logging of your sleep, as well as lessons and exercises that are created by our in-house sleep doctors, as well as a human sleep coach that's going to text you and stay in connection with you every day or every week however you like.

Yeah. And we've had thousands of customers go through our program and and if you look at our App Store reviews because our, our program is also delivered via mobile app.

So it's convenient for you on a daily basis. If you go to our App Store and look at the reviews, you'll see a lot of people are these are people who have been addicted to sleeping pills like Ambien for decades and they weren't able to fall asleep or stay asleep and do this program within like first 4 to 6 weeks.

If not, if not like three weeks, they start seeing huge results. Yeah. Wow, that's fantastic. And you know, I really encourage people to check it out and see if it's a fit because like you, you know, that, you know, I think people when they reach out to local clinics, the most common response is that there is a big waitlist.

There are simply not enough providers to go around in a one on one in-person relationship. Yeah, I really love talking to you today. I think that your experience would resonate with many people watching this summit, so thank you for sharing that.

Oh, thank you. And for those of you who are listening to this, I hope you get on your sleep journey and sleep better, because once you start sleeping better, your life is wonderful.

Love it. Great to see you today. Thank you, Dr. Wells.