

INSOMNIA MANAGEMENT KIT Sleep medication

The Insomnia Management Kit is intended to be used in conjunction with your GP.

To access further instructions on the use of this fact sheet and other components of the Insomnia Management Kit, go to 'Insomnia management' on the SA Health website: www.sahealth.sa.gov.au.

Sleep medication

Approximately one in three adults will have difficulty sleeping at some time in their lives.

It is now known there are many risks associated with using medication to treat sleep difficulties.

Therefore, the preferred approach to overcome sleep difficulties (insomnia) is NOT to use drugs. Non-drug therapies are more likely to be successful than long-term use of medication and provide longer lasting benefits.

Occasionally, medication maybe required for a short period (three to five days). However, sleep medication should always be used with extreme caution as it has many side effects and can actually lead to long-term insomnia.

Sleep medication only provides symptomatic relief.

Despite wide use of the benzodiazepine type of drugs as sleep medication, it is now known that they can be addictive. They have also been associated with a range of adverse side effects, particularly amongst the elderly.

Associated risks:

- > increased risks of falls
- > addiction (rapid onset of dependence)
- > respiratory depression.

Common side effects include:

- > drowsiness
- > dizziness
- > fatigue
- > muscle weakness
- > nocturnal bed wetting
- > memory loss
- > reduced ability to concentrate
- > confusion
- > depression.

Long-term use of sleep medication

Long-term use of sleep medication is not recommended as it may make sleep problems worse and cause sleep that is more shallow.

Medication versus no medication

Research in sleep laboratories has shown that when insomnia sufferers on medication were compared to those who were not, their total night time sleep was very similar. However, for those on medication, the quality of their sleep was worse (ie sleep not as deep and less restorative with more awakenings).

Sleep medication may be helpful in some situations, on a short-term basis ONLY. It is recommended that medication only be used for a period of three to five days at most. Benzodiazepines become less effective when used for more than five days on a regular basis.

This is due to developing a tolerance to the medication. Non-benzodiazepine (zopiclone, zolpidem) have the same potential for dependence and are not a safe option.

Continuous use of sleep medication can quickly result in increased quantities being required to achieve the same sleep pattern.

A dependence on sleep medication forms quickly, because an association develops between taking the medication and the ability to fall asleep at night.

Rebound insomnia

When sleep medication is used regularly for a period of time and then stopped, or greatly reduced, sleep difficulties may be experienced again. This is called rebound insomnia.

This often leads to the belief that sleep medication must again be taken to get a good sleep.

However, the rebound insomnia experienced is generally only a temporary side effect of the withdrawal process and should soon pass.

Benzodiazepines (withdrawal information)

The decision to reduce or stop the use of benzodiazepines for the management of insomnia should be made with your general practitioner or other health professional.

Gradually reducing the use of benzodiazepines can help to minimise withdrawal symptoms. Your general practitioner or health professional will provide guidance in this area.

Your general practitioner may need to substitute your current medication with another, during the withdrawal process.

The time required to withdraw from benzodiazepines varies between individuals, due to age and the length of time that the medication has been taken. Generally, it takes a period of about six to eight weeks.

Sometimes the withdrawal process may cause the return of some sleep difficulties, however, this is only temporary and usually does not effect daytime functioning.

Symptoms associated with withdrawal may include:

- > difficulty sleeping
- > change in emotions
- > change in senses (metallic taste, distorted hearing and vision)
- > fatigue
- > loss of appetite
- > dizziness
- > palpitations
- > shakiness
- > anxiety.

Any withdrawal symptoms will be more common in the first few weeks, but should then gradually subside.

Being aware of the possible side effects involved in withdrawal and being prepared should reduce your concern or worry.

Seeking support from family or friends during the early stages of withdrawal can be very useful.

It has been shown that the non-drug therapies are more effective following withdrawal from sleep medication.

For more information

Refer to 'Insomnia management' and 'Sleep problems' on the SA Health website, www.sahealth.sa.gov.au.

American Family Physician. Addiction: Part I. Benzodiasepines - Side Effects, Abuse Risk and Alternatives. L. Longo et. al. http://www.aafp.org/afp/2000/0401/p2121.html#sec-2

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