The RxFiles www.sdh.sk.ca/RxFiles May - 2001

Almost everyone has trouble sleeping once in a while, but this is seldom a chronic problem. If <u>you</u> suffer from insomnia, you have difficulty experiencing a regular sleep pattern. As a result, you are not able to function normally in the daytime. Many factors may cause insomnia including shift work, travelling, stress, pain, grief, depression, caffeine, alcohol or medications.

The goals of therapy for insomnia are to improve sleep (ie. decrease time it takes to fall asleep, decrease the frequency of nighttime awakenings & increase the duration of sleep) and to improve daytime functioning.

Try to have underlying medical, psychiatric or environmental causes resolved first. Changing sleep habits, relaxation techniques & cognitive therapy may be more effective than medications. All drugs have limitations especially with prolonged use & may result in your body relying on them to get to sleep.

Good Sleep Hygiene Measures:

- 1. Maintain a regular schedule
- 2. Go to bed only when sleepy
- 3. Use the bedroom for sleep & occasionally sex (no TV)
- 4. Avoid daytime naps
- 5. Avoid caffeine & nicotine especially within 4-6hrs of bedtime
- 6. Do not drink alcohol (especially within 4hrs of bedtime), since it causes fragmented sleep
- 7. Avoid heavy meals before going to bed, but a light carbohydrate snack before bedtime is acceptable
- 8. Do not eat chocolate or large amounts of sugar before bedtime
- 9. Avoid drinking excessive amounts of fluid in the evening
- 10. Minimize noise, light & extreme temperature in the bedroom
- 11. Exercise regularly during the day, but avoid vigorous exercise within 3 hrs of retiring
- 12. Develop relaxing rituals (e.g. reading, listening to music) before bedtime
- 13. Get out of bed & go to another room if unable to sleep within 20 minutes. Return when sleepy

Highlights:

- Sleeping pills should be used in combination with non-drug measures to promote sleep
- Ideally, sleeping pills should be taken only for short periods depending on the medication (2-4 weeks)
- All prescription sleeping pills are equally effective
- All sleeping pills may cause daytime drowsiness & confusion
- Low doses of short acting sleeping pills have a lower risk for side effects when taken on a short term basis
- Sleeping pills can be "habit forming". Expect one to two nights of poor sleep when stopped
- Take the lowest dose possible and only when required
- Consider drugs that cause insomnia

Examples of drugs which can sometimes cause insomnia:

alcohol, amantadine, atenolol, bupropion, caffeine, clonidine, corticosteroids, daunorubicin, decongestants, dextroamphetamine, diuretics, felbamate, fluoxetine, flutamide, goserelin, interferon, ipratropium, lamotrigine, leuprolide, levodopa, medroxyprogesterone, methyldopa, methylphenidate, nicotine, oral contraceptives, pemoline, phenylephrine, phenytoin, pindolol, progesterone, propranolol, pseudoephedrine, quinidine, reserpine, salbutamol, salmeterol, selegiline, SSRI's (eg. fluoxetine, paroxetine, sertraline), terbutaline, theophylline, thyroid hormones & venlafaxine