

Sedative-hypnotics

Photo: Dean812, flickr.com

You May Be at Risk

You are taking one of the following
sedative-hypnotic medications:

- Alprazolam (Xanax®)
- Bromazepam (Lectopam®)
- Chlorazepate
- Chlordiazepoxide-amitriptyline
- Clidinium-chlordiazepoxide
- Clobazam
- Clonazepam (Rivotril®, Klonopin®)
- Diazepam (Valium®)
- Estazolam
- Flurazepam
- Loprazolam
- Lorazepam (Ativan®)
- Lormetazepam
- Nitrazepam
- Oxazepam (Serax®)
- Quazepam
- Temazepam (Restoril®)
- Triazolam (Halcion®)
- Eszopiclone (Lunesta®)
- Zaleplon (Sonata®)
- Zolpidem (Ambien®, Intermezzo®, Edluar®, Sublinox®, Zolpimist®)
- Zopiclone (Imovane®, Rhovane®)

TEST YOUR KNOWLEDGE ABOUT THIS MEDICATION



QUIZ

SEDATIVE-HYPNOTIC DRUGS

1. The medication I am taking is a mild tranquilizer that is safe when taken for long periods of time.

TRUE **FALSE**
2. The dose I am taking causes no side effects.

TRUE **FALSE**
3. Without this medication I will be unable to sleep or will experience unwanted anxiety.

TRUE **FALSE**
4. This medication is the best available option to treat my symptoms.

TRUE **FALSE**



ANSWERS



1. FALSE

It is no longer recommended to take a sedative-hypnotic drug to treat insomnia or anxiety. People who these medications are putting themselves at an increased risk of side effects:

- 5-fold higher risk of memory and concentration problems
- 4-fold increased risk of daytime fatigue
- 2-fold increased risk of falls and fractures (hip, wrist)
- 2-fold increased risk of having a motor vehicle accident

2. FALSE

Even if you think that you have no side effects, and even if you take only a small dose, a sedative-hypnotic drug worsens your brain performance and slows your reflexes.

3. TRUE

Your body has probably developed a physical addiction to this medication. If you stop it abruptly, you may have trouble sleeping and feel greater anxiety. Millions of people have succeeded in slowly cutting this drug out of their lives and/or have found alternative treatments.

4. FALSE

Although it is effective over the short term, studies show that sedative-hypnotic drugs are not the best long-term treatment for anxiety or insomnia. Sedative-hypnotic medication covers up the symptoms without actually solving the problem. Please keep on reading to learn more about developing healthier sleep patterns and diminishing stress.

DID YOU KNOW?



Your medication is in a family of drugs that bind to the receptors in the brain that cause sedation. Sedative-hypnotic drugs can be highly addictive and can cause many side effects. Except in special circumstances, these medications should never be taken.



These drugs remain longer and longer in your body as you age. This means that they can stay for up to several days and could be making you feel tired and weak, impair your balance, and reduce your other senses.



Sedative-hypnotic drugs can also be associated with hip fractures, memory problems, and involuntary urine loss. Their sedative properties can cause you to be drowsy during the day which can lead to car accidents and sleep walking. Even if you are not experiencing these symptoms, be sure to speak to your doctor or pharmacist to ensure you do not develop them in the future.



Alternate therapies are available to relieve your anxiety or improve your sleep with fewer side effects and better quality of life.

Please consult your doctor, nurse or pharmacist before stopping any medication.

SO ASK YOURSELF:

YES OR NO?

Have you been taking this sedative-hypnotic drug for a while?

Y **N**

Are you often tired and groggy during the day?

Y **N**

Do you ever feel hungover in the morning, even though you have not been drinking?

Y **N**

Do you ever have problems with your memory or your balance?

Y **N**

AS YOU AGE

Age-related changes take place in your body and modify the way you process medications. Drugs stay in your body longer and diminished liver function and poor blood flow to your kidneys may increase side effects. The chances you will take more than one medication increases as you age, as does your likelihood of having multiple chronic illnesses.

Unfortunately, this important information is often not passed on to patients who are taking this drug. Please consult your doctor, nurse or pharmacist to discuss this further. Alternative therapies could relieve your anxiety or improve your sleep with fewer side effects and improved quality of life.

ALTERNATIVES

Are you taking this sedative-hypnotic drug to help you sleep?

There are lifestyle changes that can help:

- Do not read or watch TV in bed. Do so in a chair or on your couch.
- Try to get up in the morning and go to bed at night at the same time every day.
- Before going to bed, practice deep breathing or relaxation exercises.
- Get exercise during the day, but not during the last three hours before you go to bed.
- Avoid consuming nicotine, caffeine and alcohol as they are stimulants and may keep you awake.
- Ask your doctor or nurse about using a sleep diary, which can help you understand disruptive sleep patterns.
- Check out the Sleepwell Nova Scotia website (mysleepwell.ca), which offers online cognitive behavioural therapies to improve sleep.
- See our brochure, ***How to get a good night's sleep without medication*** (www.criugm.qc.ca/fichier/pdf/Sleep_brochure.pdf).



ALTERNATIVES

Are you taking this sedative-hypnotic drug to help reduce your anxiety?

There are other solutions to deal with your stress and anxiety:

- Talking to a therapist is a good way to get help to work through stressful situations and identify the sources of your anxiety.
- Support groups can help relieve your stress and make you feel you are not alone.
- Relaxation techniques like stretching, yoga, massage, meditation or tai chi can help relieve your everyday stress and aid you in working through anxiety.
- Talk to your doctor about other anti-anxiety medications that have less serious side effects.





MRS. ROBINSON'S STORY

She had been taking lorazepam, a sedative-hypnotic drug just like yours

“I am 65 years old and took lorazepam for 10 years. A few months ago, I fell in the middle of the night on my way to the bathroom and had to go to the hospital. I was lucky and, except for some bruises, I did not hurt myself. I read that lorazepam puts me at risk for falls. I did not know if I could live without lorazepam as I always have trouble falling asleep and sometimes wake up in the middle of the night.

I spoke to my doctor who told me that my body needs less sleep at my age – 6 hours of sleep per night is enough. That’s when I decided to try to taper off lorazepam. I spoke to my pharmacist who suggested I follow the step-by-step tapering program (on the next page).

I also applied some new sleeping habits I had discussed with my doctor. First, I stopped exercising before bed; then, I stopped reading in bed; and finally, I got out of bed every morning at the same time whether or not I had a good night’s sleep.

I succeeded in getting off lorazepam. I realize now that for the past 10 years I have not been living to my full potential. Stopping lorazepam has lifted a veil – it’s like I had been semi-sleeping my life away. I have more energy and don’t have so many ups and downs anymore. I am more alert: I don’t always sleep well at night, but I don’t feel as groggy in the morning. It was my decision! I am so proud of what I have accomplished. If I can do it, so can you!”

TAPERING-OFF PROGRAM

We recommend that you follow this schedule under the supervision of your doctor, nurse or pharmacist.

WEEKS	TAPERING SCHEDULE							✓
	MO	TU	WE	TH	FR	SA	SU	
1 and 2								
3 and 4								
5 and 6								
7 and 8								
9 and 10								
11 and 12								
13 and 14								
15 and 16								
17 and 18								

EXPLANATIONS

Full dose
 Half dose
 Quarter of a dose
 No dose

