

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 YOUR MEDICATION



QUIZ

Sedative-hypnotic medication

1. The medication I am taking is a mild tranquilizer that is safe to take 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

Although they can be effective for a short time, sedative-hypnotic medications are not the best long-term treatment for anxiety or insomnia. This is because they cover up the symptoms without actually solving the problem — while causing many side effects. Please keep on reading to learn more about how you can develop healthier sleep patterns and lessen your stress and anxiety.

2. FALSE

Even if you only take a small dose, sedative-hypnotic medication may have side effects. It worsens your brain function and slows down your reflexes.

3. TRUE

Your body has probably developed a physical dependence to this medication. If you suddenly stop taking it, you may have trouble sleeping and feel more anxiety. Millions of people have succeeded in slowly cutting this medication out of their lives and finding other ways to help their problem.

4. FALSE

Experts no longer recommend using a sedative-hypnotic medication to treat insomnia or anxiety. Why? Because people who take it are:

- 5 times more likely to have memory and concentration problems
- 4 times more likely to feel very tired during the day
- 2 times more likely to experience falls and fractures (hip, wrist)
- 2 times more likely to have a motor vehicle accident
- At risk of developing problems holding their urine

Did you know?



Sedative-hypnotic medication can be highly addictive and can cause many side effects. These medications can be harmful and prescriptions should be very carefully considered.



As you age, your medication will remain in your body for longer periods of time. This means it could be making you feel tired and weak. It could also impair your balance and reduce your other senses.



Your medication has also been linked to hip fractures, memory problems, and problems holding urine. It can cause you to be drowsy during the day, which can lead to car accidents. Even if you are not experiencing these symptoms, be sure to speak to your doctor, nurse or pharmacist so that you can determine if there are better treatment options for you.



Other treatments can help relieve your anxiety or improve your sleep with fewer side effects and better quality of life.



Stopping sedative-hypnotic medications suddenly can cause unpleasant withdrawal effects. To avoid this, the dose should be reduced gradually. An example of a tapering program is provided on page 11.

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

Ask yourself yes or no?

Have you been taking your medication for a while?

Y **N**

Are you often tired and sleepy 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**

If you answered YES to any of these questions, we recommend that you speak with your doctor, nurse or pharmacist to see if your sedative-hypnotic medication could be safely reduced or stopped.

As you age

Many changes take place in your body as your age, including:

- Changes in how your body processes medications.
- Decreases in your liver and kidney function.
- Changes related to illnesses you may have had.

This means that medications stay in your body longer as you get older, and your risk of side effects increases.

Unfortunately, this is important information that is often not given to patients who are taking this medication. Please talk to your doctor, nurse or pharmacist to discuss this further. Other treatments could relieve your anxiety or improve your sleep with less side effects and better quality of life.

Other ways to help you sleep

- Try to get up in the morning and go to bed at night at the same time every day.
- Do some deep breathing or relaxation exercises before you go to bed.
- Get exercise during the day, but not during the last three hours before you go to bed.
- Read or watch TV in a chair or on your couch, instead of in your bed.
- Try not to use any substances that may keep you awake. This includes caffeine, alcohol, tobacco or other products that contain nicotine.
- Use a sleep diary to help you understand what is disrupting your sleep. Your doctor or nurse may be able to give you a sleep diary, or you can find one in our brochure, ***How to get a good night's sleep without medication:*** (<https://www.deprescribingnetwork.ca/sleep>).
- Check out the Sleepwell website (mysleepwell.ca), which offers online cognitive behavioural therapies to improve sleep.



Other ways to deal with stress and anxiety

- Consider talking to a therapist or joining a support group. Both are proven to help people work out stressful situations and deal with what makes them anxious.
- Try relaxation techniques like stretching, yoga, massage, meditation or tai chi. All these can help you relieve everyday stress and work through your anxiety.
- Talk to your doctor about other anti-anxiety medications that have less serious side effects than the one you're taking.





Mrs. Robinson's story

She had been taking lorazepam, a medication like the one you're taking

"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. Except for some bruises, I didn't hurt myself. I read that lorazepam puts me at risk for falls. I did not know if I could live without lorazepam because I always have trouble falling asleep and sometimes wake up in the middle of the night.

My doctor told me that 7 hours of sleep per night is probably enough for me at my age. 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 changed some of my sleeping habits after talking about all this with my doctor. For one, I stopped exercising before bed. Then over time, I stopped reading in bed. The last change I made was to get out of bed every morning at the same time — even if I hadn't had a good night's sleep.

By taking those steps, I was able to stop using lorazepam. I realize now that I had not been living life to its fullest for the past 10 years. Stopping lorazepam has lifted a veil — it's like I had been semi-sleeping through life. I have more energy, and don't have so many ups and downs anymore. I'm also more alert. I don't always sleep well at night, but I don't feel as groggy in the morning. It was my decision, and I'm so proud of what I've accomplished. If I can do it, so can you!"

Tapering program

Below is an example of tapering program for sedative-hypnotic medication. Make sure to talk to your doctor, nurse or pharmacist before you try reducing your dose or stopping your medication. Together, you will develop a plan that is right for you.

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

