

*Choosing Wisely Canada* is a campaign to help physicians and patients engage in conversations about unnecessary tests, treatments and procedures, and to help physicians and patients make smart and effective choices to ensure high-quality care.

For more information on Choosing Wisely Canada or to see other patient materials, visit [www.choosingwiselycanada.org](http://www.choosingwiselycanada.org).  
Join the conversation on Twitter @ChooseWiselyCA

## Insomnia and anxiety in older people

Sleeping pills are usually not the best solution

Nearly one third of older people in Canada take sleeping pills. These drugs are called “sedative-hypnotics” or “tranquilizers.” They affect the brain and spinal cord.

Doctors prescribe the drugs for sleep problems. The drugs are also used to treat other conditions, such as anxiety or alcohol withdrawal.

Usually older adults should try non-drug treatments first. There are safer and better ways to improve sleep or reduce anxiety. Here’s why:

### **Sleeping pills may not help much.**

Many ads say that sleeping pills help people get a full, restful night’s sleep. But studies show that this is not exactly true in real life. On average, people who take one of these drugs sleep only a little longer and better than those who don’t take a drug.

### **Sleeping pills can have serious, or even deadly side effects.**

All sedative-hypnotic drugs have special risks for older adults. Seniors are likely to be more sensitive to the drugs’ effects than younger adults.



And these drugs may stay in their bodies longer.

The drugs can cause confusion and memory problems as well as changes in balance that:

- More than double the risk of falls and hip fractures. These are common causes of hospitalization and death in older people.
- Increase the risk of car accidents.

### **The new “Z” drugs also have risks.**

“Z” drugs include Zolpidem (Ambien and generic) and Zopiclone (Imovane and generic). Studies suggest they have as much or more risk than the older sleep drugs. There are also concerns they may be as addictive as other sedatives.

### **Try non-drug treatments first.**

Get a thorough medical exam. Sleep problems can be caused by depression or anxiety, pain, restless leg syndrome, and many other conditions.

Even if an exam does not turn up an underlying cause, you should try other solutions before you try drugs (tips for better sleep are found below).

### **Kinds of sleeping pills (sedative-hypnotics).**

All of these pills have risks, especially for older adults:

#### **Benzodiazepines**

For anxiety:

- Alprazolam (Xanax and generic)
- Diazepam (Valium and generic)
- Lorazepam (Ativan and generic)

For insomnia:

- Flurazepam (Dalmane and generic)
- Oxazepam (Serax and generic)
- Temazepam (Restoril and generic)
- Triazolam (Halcion and generic)

#### **”Z” drugs**

- Zolpidem (Ambien and generic)
- Zopiclone (Imovane and generic)

Sometimes medications under the class antipsychotics or antidepressants are prescribed primarily for sleep including:

- Quetiapine (Seroquel and generic)
- Trazodone (Desyrel and generic)
- Amitriptyline (Elavil and generic)

### **Over-the-counter drugs may not be a good choice.**

Side effects of some drugs can be especially bothersome for seniors: next-day drowsiness, confusion, constipation, dry mouth, and difficulty urinating. Avoid these over-the-counter sleep drugs:

- Diphenhydramine (Benadryl Allergy, Nytol, Sominex, Gravol, generic)
- Advil PM
- Tylenol PM

### **When to try sedative-hypnotic drugs.**

Consider these drugs if the sleep problems are affecting your quality of life and nothing else has helped. But your health care provider should watch you carefully to make sure that the drug is helping and not causing bad side effects.

If it is considered necessary, then it should be used at the lowest possible dose and for a limited time.

© 2014 Consumers Union of United States, Inc., 101 Truman Ave., Yonkers, NY 10703-1057. Developed in cooperation with the Canadian Geriatrics Society for Choosing Wisely Canada, in partnership with the Canadian Medical Association. Portions of this report are derived from Canadian Geriatrics Society’s “Five Things Physicians and Patients Should Question” list. This report is not a substitute for medical advice. Neither the University of Toronto, Canadian Medical Association, Canadian Geriatrics Society nor Consumer Reports assume any responsibility or liability arising from any error or omission or from the use of any information in this report.

## **Tips for better sleep**

**Exercise.** Physical activity helps people sleep better. But avoid vigorous activity for several hours before bedtime.

**Keep a routine.** Try to go to bed and wake up at about the same time every day, even on weekends.

**Try not to eat right before bedtime.** Eat three hours or more before going to bed.

**Avoid caffeine after 3 p.m.** Some people need to avoid caffeine even earlier.

**Limit alcohol.** Alcohol causes sleepiness at first, followed by wakefulness.

**Create the right environment.** Keep the bedroom peaceful. And avoid mental excitement before bedtime.

**Avoid bright lights.** Watching a bright screen can make you stay awake.

**Control pets.** Pets disrupt sleep if they are on and off the bed, taking up space, or wanting to be let out.

If you don’t fall asleep soon, get out of bed and do something that will make you sleepy, such as reading. Return to bed after you start to feel drowsy.

