

Treating Insomnia: The Newer Sleeping Pills

What is insomnia?

Insomnia means that you have a hard time falling asleep, staying asleep, or both.

Short-term insomnia can last up to 14 days, but it often goes away after a few nights. Stress and jet lag are common causes. Long-term, chronic insomnia can interfere with your life. If you have trouble sleeping three or more nights a week for a month or longer, talk to your doctor. There may be a medical cause for your insomnia.

How is insomnia treated?

If insomnia is a problem, these treatments may help:

- Avoiding alcohol or caffeine.
- Learning good sleep habits.
- Taking an over-the-counter sleep aid, such as diphenhydramine (in Benadryl, Nytol, Sominex, and Unisom). Do not use for more than a few nights in a row.
- Taking a benzodiazepine, a kind of prescription drug. These drugs are usually effective, but side effects include sleepiness the next day. There is also a risk of addiction. And they can make insomnia worse.

There is also a newer group of prescription sleeping pills. This report tells you about them.

The newer sleeping pills include:

- eszopiclone (Lunesta)
- ramelteon (Rozerem)
- zaleplon (Sonata and generic)
- zolpidem (Ambien and generic) also available as an:
 - extended release tablet (Ambien CR and generic)
 - dissolvable tablet (Edluar)
 - oral spray (Zolpimist)

How effective are the newer pills?

All of the newer sleeping pills help people fall asleep faster. Zolpidem appears to help people fall asleep faster than the others, and may result in better quality sleep.

It is not clear how well these pills help you stay asleep. Some people sleep longer. Others still wake up at night.

What are the side effects?

All sleeping pills can cause side effects. Using alcohol increases the risk of side effects. Side effects include:


- Dependence and abuse
- Insomnia again when you stop the pills
- Sleepiness the next day, headaches, and dizziness
- Rare side effects: sleep-walking, sleep-driving, sleep-eating, loss of memory, and hallucinations

Our advice:

If you need help sleeping for just a night or two: Try over-the-counter sleep aids, such as diphenhydramine (in Benadryl, Nytol, Sominex, and Unisom). They usually work as well as the newer sleeping pills, and they cost much less.

If you have chronic insomnia: Cognitive-behavioral therapy (CBT) may be a better choice than pills. A therapist works with you to change your sleep routines. Ask your health insurance if it covers CBT.

If you and your doctor decide that you need a sleeping pill, we chose this as a **Consumer Reports Best Buy Drug:**

 **Generic zolpidem tablets**—they have the same active ingredient as Ambien but cost less. Details are on the chart on the next page.

To reduce side effects, we recommend:

- Use the lowest dose possible. Older adults should start with half the regular dose to help prevent falls.
- Use them briefly—not more than seven nights in a row.

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Can Ambien and newer sleeping pills really cause sleep-driving and sleep-eating? Yes. But all insomnia drugs pose some risks—which is one reason you're usually better off with nondrug measures.

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Q. I've heard a lot lately about the sleeping pill Ambien causing odd side effects, like sleep-driving and sleep-eating. True?

A. Yes. Ambien, Lunesta, and other newer insomnia drugs carry a warning that people who take them might attempt to drive or eat while still asleep with no memory of doing so. And long-acting Ambien CR (and generic) stays in your body so long it could impair your ability to drive the next morning. In fact, a number of celebrities—including Kerry Kennedy, Eminem, and Tom Brokaw—have reportedly blamed Ambien for causing impaired driving, memory lapses, and other problems. And several people accused of impaired driving, and worse, have even used the “Ambien defense” in court cases.

While those side effects are rare, sleeping pills can cause more common problems, including diarrhea, dizziness, headache, and nausea. They can even worsen your sleeping problems when abused, misused, or taken too often.

A better option for chronic insomnia—three or more nights a week for months—is behavioral therapy. Some studies suggest it's more effective than insomnia medications. That involves getting help from a therapist to learn a new set of sleep behaviors. For example, you might be directed to get up at the same time every day and learn relaxation techniques and mental tricks to help you get to sleep.

If you've only had insomnia for a night or two, reassess your sleep routine before turning to medication. Are you watching TV or using computers, tablets, or phones in bed? That can make it difficult to fall asleep, so switch them off long before you hit the sack. If you drink alcohol or caffeine, take your last sip at least 3 hours before bedtime. A [comfortable mattress](#), covers, and pillow can also help. And make sure your bedroom isn't too noisy, bright, or hot.

If those steps don't work and you want to try a medication, [Consumer Reports Best Buy Drugs report on insomnia drugs](#) recommends that most people start with short-term use of an over-the-counter sleeping aid, such as diphenhydramine (Nytol, certain Unisom products, and generics), or doxylamine (Unisom SleepTabs and generic). If your sleep problems persist, talk to your doctor about zolpidem, the generic version of Ambien. We think it's the best initial prescription option because of its efficacy, relative safety, and low price. Just be careful to use as low a dose as possible to help reduce the risk of side effects. And don't take sleeping pills—prescription or over the counter—for more than seven nights.

If you are 55 or older, avoid sleeping pills unless absolutely necessary. Older people have a higher risk of side effects, such as dizziness and sedation, which can lead to falls and hip fractures.

—Steve Mitchell

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Compare the Newer Sleeping Pills

Consumer Reports Best Buy Drugs are in blue. We recommend these drugs because they are at least as effective and safe as the other drugs listed, and they cost less.

Generic Name & Strength	Brand Name	Average Time to Fall Asleep	Average Cost for: Seven days ¹ /15 days ¹
Zolpidem 10 mg tablet	Ambien	33–46 minutes	\$53/\$115
Zolpidem 5 mg tablet	Ambien	33–46 minutes	\$54/\$118
CR BEST BUY Zolpidem 10 mg tablet	Generic	33–46 minutes	\$12/\$27
CR BEST BUY Zolpidem 5 mg tablet	Generic	33–46 minutes	\$14/\$31
Zolpidem 6.25 mg sustained-release tablet	Ambien CR	33–46 minutes	\$56/\$122
Zolpidem 12.5 mg sustained-release tablet	Ambien CR	33–46 minutes	\$56/\$121
Zolpidem 6.25 mg sustained-release tablet	Generic	33–46 minutes	\$41/\$89
Zolpidem 12.5 mg sustained-release tablet	Generic	33–46 minutes	\$40/\$87
Zolpidem 5 mg dissolvable tablet	Edluar	20 minutes	\$47/\$102
Zolpidem 10 mg dissolvable tablet	Edluar	20 minutes	\$53/\$116
Eszopiclone 1 mg tablet	Lunesta	50 minutes	\$56/\$121
Eszopiclone 2 mg tablet	Lunesta	50 minutes	\$57/\$123
Eszopiclone 3 mg tablet	Lunesta	50 minutes	\$58/\$125
Ramelteon 8 mg tablet	Rozerem	75 minutes	\$47/\$103
Zaleplon 10 mg capsule	Sonata	36–55 minutes	\$38/\$83
Zaleplon 5 mg capsule	Generic	36–55 minutes	\$18/\$39
Zaleplon 10 mg capsule	Generic	36–55 minutes	\$17/\$36

¹Recommended use is one pill at bedtime.

Prices are based on nationwide retail average prices for October 2011. *Consumer Reports Best Buy Drugs* obtained prices from data provided by Wolters Kluwer Pharma Solutions, which is not involved in our analysis or recommendations.

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Tom Lamb

From: Tom Lamb [Trad1237@aol.com]
Sent: Monday, February 17, 2014 8:24 AM
To: Tom Lamb
Subject: Sleeping Pills - Consumer Reports Health

http://www.consumerreports.org/health/best-buy-drugs/insomnia_drugs.htm?referrer=Baker

Sleeping Pills - Consumer Reports Health

Sleeping Pills: Summary of Recommendations

Four drugs used to treat insomnia—eszopiclone (Lunesta), ramelteon (Rozerem), zaleplon (Sonata and generic) and zolpidem (Ambien, Ambien CR, Edluar, Zolpimist, and generic)—are effective but not necessarily better than behavioral therapy or older, less expensive drugs for many people who need a sleep aid for a night or two.

Nonprescription drugs containing an antihistamine—for example, diphenhydramine (the active ingredient in Benadryl, but also sold as a sleep aid under the brand names Nytol and Sominex and as a generic) or doxylamine (Unisom and generic)—and older prescription sedatives called benzodiazepines, such as estazolam (generic only), flurazepam (Dalmane and generic), and temazepam (Restoril and generic), might work just as well as the newer sleeping pills.

But we recommend that both prescription and nonprescription sleeping pills be used judiciously because research has found that people with mild insomnia sometimes unnecessarily take these medications when they might be able to resolve their sleep issues with nondrug measures.

In addition, all insomnia medicines can cause side effects and dependency, and even worsen your sleeping problems when abused, misused, or taken too often. Possible side effects include daytime sleepiness, dizziness, unsteadiness, and rebound insomnia. Sleep-walking, sleep-driving, sleep-eating, memory lapses, and hallucinations have also been reported.

That said, people with persistent, chronic insomnia—three or more nights a week for months—should seek treatment. We advise cognitive behavioral therapy—a form of psychotherapy—that can improve sleep habits, possibly combined with a cautious use of sleeping pills. Research has found this can help relieve chronic insomnia.

For the average person seeking short-term help—for a few nights—we suggest trying an over-the-counter sleep aid first. If that doesn't work, our comparison of the newer drugs led us to choose zolpidem as a Best Buy. This is the less expensive, generic version of the drug Ambien. Fifteen pills cost \$27 to \$31, depending on the dose and where you buy it.

This report was published in January 2012.

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