

PRESS RELEASE

NICE issues guidance on the use of drugs for the management of insomnia

The National Institute for Clinical Excellence (NICE) has today issued guidance to the NHS in England and Wales on the use of zaleplon, zolpidem and zopiclone for the management of insomnia. The guidance recommends that hypnotic drugs should only be used in the short-term management of insomnia interfering with normal daily life.

The guidance further recommends that:

- Doctors should consider non-medical treatments, such as advising patients to have regular sleeping hours and avoid drinking alcohol or coffee at bedtime, and treatments such as cognitive behavioural therapy and relaxation techniques, before prescribing hypnotic drugs for the treatment of insomnia.
- The drugs should be prescribed for short periods of time only, in strict accordance with their licensed indications.
- Because of there is no firm evidence to distinguish between the hypnotic zaleplon, zolpidem and zopiclone or the shorter-acting benzodiazepine hypnotics; the drug with the lowest purchase cost (taking into account daily required dose and product price per dose) should be prescribed.
- Switching from one drug to another should only occur if the patient experiences side effects that are specifically related to the medicine. This is the only circumstance in which the drugs with higher acquisition costs are recommended.
- Patients who have not responded to one of these hypnotic drugs should not be prescribed any of the others.

Insomnia is the disturbance of normal sleeping patterns commonly characterised by difficulty in initiating and/or maintaining sleep. Insomnia can contribute to excessive daytime tiredness, which in turn may be responsible for accidents, recurrent infections, poor concentration, irritability, work and relationship problems, and a general inability to cope. It may also lead to mental health problems such as anxiety.

Andrea Sutcliffe, Planning and Resources Director and Executive Lead for the appraisal, said: “It is estimated that 1 in 10 people suffer from insomnia which can be very distressing, not only because it causes daytime tiredness but also because of the impact it has on daily and social life. Whilst some people can overcome their insomnia without using medicines, for others drugs are necessary. This guidance sets out when it is appropriate to use medicines to treat insomnia and highlights the importance of prescribing these drugs in line with their licensed indications.”

Ends

For more information contact Sarita Tamber on 020 7067 5915, or 0207 067 5900.

Notes to Editors

About insomnia and hypnotic drugs

1. Insomnia is a disturbance of normal sleep patterns commonly characterised by difficulty in initiating sleep and/or difficulty maintaining sleep.
2. Insomnia is highly subjective and although most healthy adults typically sleep between 7 and 9 hours per night, sleeping patterns vary greatly between people and from night to night.
3. There are many causes of insomnia; a major cause is stress or anxiety. Drinking coffee or alcohol before bedtime may also cause sleeplessness. Removal of the problem/stimuli may relieve the insomnia. Other causes include medical problems, use of certain medicines or illness.
4. Insomnia can be treated without using medication, for example having regular sleeping hours, avoiding drinking coffee or alcohol before going to sleep, and sleeping in a comfortable bed in a room at a comfortable temperature. Other non-pharmacological treatments include a form of psychotherapy called cognitive behavioural therapy and relaxation techniques.
5. Hypnotics are drugs used to induce sleep. They provide relief from the symptoms of insomnia, but do not treat the underlying cause. Zaleplon, zolpidem and zopiclone are hypnotic medicines used to treat insomnia. Another group of hypnotic medicines are the benzodiazepines, which include the shorter-acting benzodiazepines (that have effects which do not last as long as other medicines in the group).
6. All hypnotic drugs should only be used for short periods of time because of tolerance to the drug and the risk of dependency.
7. A quick reference version of the guidance is available on the NICE website at www.nice.org.uk/TA077quickrefguide. The full guidance is also available on the NICE website at www.nice.org.uk/TA077guidance.

About NICE

8. NICE is part of the NHS. It is the independent organisation responsible for providing national guidance on treatments and care for those using the NHS in England and Wales. Its guidance is for healthcare professionals and patients and their carers to help them make decisions about treatment and healthcare. For further information about NICE you can visit www.nice.org.uk.
9. NICE produces guidance in three areas of health:
 - the use of new and existing medicines and treatments within the NHS in England and Wales – technology appraisals.
 - the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales – clinical guidelines.
 - whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use – interventional procedures.
10. NICE also funds three enquiries that undertake research into the way patients are treated to identify ways of improving the quality of care (the investigations are known as confidential enquiries).
11. NICE guidance and recommendations are prepared by independent groups that include professionals working in the NHS and people who are familiar with the issues affecting patients and carers.