

Sleeping pills and minor tranquillisers

Explains what sleeping pills and minor tranquillisers are used for, how the medication works, possible side effects and information about withdrawal.

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What are sleeping pills and minor tranquillisers?

Sleeping pills and minor tranquillisers are sedative medications. This means they slow down your body and brain's functions. For example, this may be your breathing, heartbeat and thought processes.

These medications can be prescribed for severe <u>anxiety</u> or insomnia (difficulty getting to sleep or staying asleep). This includes prescribing:

- benzodiazepine medication for anxiety or insomnia
- <u>non-benzodiazepine sleeping pills</u>
- non-benzodiazepine anti-anxiety medication

You may also hear these drugs referred to as hypnotics and anxiolytics. And although we use the term 'sleeping pills' to describe many of these drugs, some of them may also be available as a liquid, either to swallow or inject.

How could sleeping pills or minor tranquillisers help me?

These drugs are usually prescribed to:

- reduce your symptoms of anxiety, such as feeling very agitated or shaky
- help you overcome insomnia, so you can return to a more healthy sleep pattern.

They can't cure anxiety or insomnia. This is because they don't deal with the underlying causes of these problems. But they can help you feel calmer and more relaxed in the short term.

Who can prescribe sleeping pills and minor tranquillisers?

The healthcare professionals who can prescribe you sleeping pills and minor tranquillisers include:

- your doctor (GP)
- a psychiatrist
- a specialist nurse prescriber
- a specialist pharmacist
- your dentist.

These information pages usually refer to 'your doctor' prescribing this medication. They are the most likely person to prescribe you these drugs.

When might I be offered sleeping pills or minor tranquillisers?

You should only be offered these drugs if:

- you have severe anxiety or insomnia that is having a significant effect on your daily life
- other forms of treatment or support are not suitable or haven't helped. For example, this may include having <u>cognitive behavioural therapy (CBT)</u>, or making changes to improve your sleep.

These recommendations come from healthcare guidelines produced by the <u>National</u> <u>Institute for Health and Care Excellence (NICE)</u>, the <u>Royal College of Psychiatrists</u> and the <u>British National Formulary (BNF)</u>. Doctors and other prescribers should follow these guidelines when they offer you any kind of drug.

How long will I have to go on taking my medication?

Healthcare guidelines recommend that you only take sleeping pills and minor tranquillisers for a short time. This is because for most people:

- they become less effective if you take them for longer period of time
- they can cause dependence if you take them regularly.

These are the recommendations for how long to take the different types of drug:

- Take sleeping pills for no longer than three weeks, ideally no longer than a week.
- Take **anti-anxiety drugs** for no longer than four weeks, including the withdrawal period.
- For any of these drugs, you should try to avoid taking them every day.

These are only guidelines for doctors to follow. You can discuss what is best for you with your doctor.

What do I need to know before taking sleeping pills or minor tranquillisers?

This page has information which may help you decide whether to begin taking sleeping pills or minor tranquillisers. It covers:

• Side effects from sleeping pills and minor tranquillisers

- Driving while taking sleeping pills or minor tranquillisers
- Legal controls for sleeping pills and minor tranquillisers

See our page on <u>what you should know before taking any psychiatric drug</u> for more information that may help with your decision.

Side effects from sleeping pills and minor tranquillisers

Sleeping pills and minor tranquillisers can have side effects, which can be unpleasant. Whether or not you get side effects depends on which drug you are taking and how you react to that drug.

For information on the side effects of specific types of medication, see our pages on:

- <u>side effects of benzodiazepines</u>
- <u>non-benzodiazepine sleeping pills</u>
- <u>non-benzodiazepine anti-anxiety medication</u>

It may also help to know the following:

- How common side effects are. You can find out how likely you are to experience side effects from the <u>Patient Information Leaflet (PIL)</u> of a specific medication. You can download the PILs for individual drugs from our <u>sleeping pills and minor</u> <u>tranquillisers A-Z</u>. You should also have a copy of the PIL inside your medication package. Information on how common side effects are may not available for some older drugs.
- Allergies and dietary considerations. Certain drugs may contain ingredients that you might be allergic to or wish to avoid, such as lactose. You can find a list of ingredients for a specific drug from its PIL. Or see our pages on <u>comparing</u> <u>benzodiazepines</u>, <u>non-benzodiazepine sleeping pills</u> and <u>non-benzodiazepine antianxiety medication</u> for information on dietary considerations for different drugs.

Driving while taking sleeping pills or minor tranquillisers

All sleeping pills and minor tranquillisers slow your thinking and your reactions. This means driving or operating machinery after taking these drugs could be dangerous.

How long you should avoid these activities for depends on which drug you take and how long its effects last. With some medication, you may need to avoid driving or using machinery the day after taking the drug.

You are not breaking the law if:

• you take your medication as directed by whoever prescribes it to you, and

• your driving is not impaired by the drugs.

But it is illegal to drive or attempt to drive if your ability to do so is impaired by any drug. This includes medication which you have been legally prescribed.

For some minor tranquillisers, it is also an offence to drive, attempt to drive, or be in charge of a motor vehicle while you have more than a certain amount of that drug in your body. The person who prescribes your medication should discuss this with you.

They may be also legally obliged to report you to the Drivers Vehicle and Licence Association (DVLA) if they suspect your ability to drive is affected.

See our page on medication and driving for more information about this.

Legal controls for sleeping pills and minor tranquillisers

Some of these medications are **controlled drugs** under the <u>Misuse of Drugs Act</u>. This means that stricter rules may apply to these drugs, such as for writing and dispensing prescriptions.

It also means that if you are in possession of these drugs when you haven't been prescribed them, or you pass on any of these drugs to relatives or friends, you are technically committing a criminal offence. This means you could be liable to imprisonment or a fine.

Which sleeping pills and minor tranquillisers are controlled drugs?

- Most benzodiazepines are class C controlled drugs. This includes every drug listed on our page on <u>comparing benzodiazepines</u>. These are the benzodiazepines currently licensed for prescription in the UK.
- The sleeping pills <u>zopiclone</u> and <u>zolpidem</u> are also class C controlled drugs.
- The anti-anxiety drug <u>pregabalin</u> is a class C controlled drug.
- <u>Barbiturates</u> are a class B controlled drug. These are rarely prescribed nowadays as sedative medication.

If you want to more about this, you can speak to your doctor or pharmacist. The National Institute for Health and Care Excellence (NICE) also has <u>information about controlled</u> <u>medicines</u>, including how to store and get prescriptions for controlled drugs.

What are benzodiazepines?

Benzodiazepines are a type of sedative medication. This means they slow down the body and brain's functions. They can be used to help with <u>anxiety</u> and insomnia (difficult getting to sleep or staying asleep).

This page covers:

- How do benzodiazepines work?
- When might I be prescribed benzodiazepines?
- Who should avoid taking benzodiazepines?
- Benzodiazepines during pregnancy and breastfeeding
- <u>Taking benzodiazepines with other medication</u>

How do benzodiazepines work?

Your body has a natural chemical called gamma aminobutyric acid (GABA). This chemical reduces the activity in the areas of the brain responsible for:

- reasoning
- memory
- emotions
- essential functions, such as breathing.

Benzodiazepine drugs increase the effects of GABA on your brain and body. This means these drugs can:

- make you feel relaxed and sleepy (sedation)
- reduce your anxiety
- relax your muscles.

Where does the name benzodiazepine come from?

The term benzodiazepine is the name for a chemical structure that affects your brain and body in certain ways.

All benzodiazepine drugs contain this chemical structure. This means they will all have similar effects on your brain and body.

"During one particularly bad time I was prescribed diazepam alongside my antidepressants. It really helped me at the time. However, as my body got used to the drug I needed more of it to get the same effect."

When might I be prescribed benzodiazepines?

Benzodiazepines should only be prescribed to treat severe anxiety or severe insomnia, when either is having a significant impact on your daily life.

There are some situations when benzodiazepines may not be the most effective treatment. For example, if you are experiencing <u>bereavement</u>, these drugs may numb your emotions and stop you grieving properly.

But you may also be unable to sleep because of grief and anxiety. In this case, taking these drugs for a short time may help you relax and start to recover.

Our page on <u>what you may need to know before taking medication</u> has a list of things to ask your doctor before you begin taking any medication. This can help you to decide whether benzodiazepines are right for you.

How often to take benzodiazepines

Benzodiazepines are likely to be most effective if you take them as a one-off dose. They can also be effective as a short-term treatment for a few weeks. Doctors will usually advise that you should:

- avoid taking them every day
- take them for no longer than four weeks.

These drugs are less likely to keep working if you take them continuously for more than a few weeks. This is because your brain can get used to their effects. It can also mean that when you stop taking the drugs, your brain becomes very sensitive to natural brain chemicals.

But in some cases, doctors may prescribe them at low doses for longer periods. This does not always cause problems, and it could be the best treatment for some people.

Who should avoid taking benzodiazepines?

Your doctor will not normally prescribe you benzodiazepines if you have:

- severe lung disease or breathing problems
- sleep apnoea (breathing problems during sleep)
- severe liver or kidney disease
- severe and uncontrolled myasthenia gravis (a neuromuscular condition).

Your doctor may be cautious about offering you benzodiazepines if you have:

- chest and lung problems
- muscle weakness, such as myasthenia gravis
- a history of <u>alcohol or drug abuse</u>
- a diagnosis of personality disorder.

Your doctor should prescribe a reduced dose of benzodiazepines if you have:

- liver or kidney problems
- porphyria (a rare, inherited illness)

Whether you are prescribed benzodiazepines may also depend on your age:

- Benzodiazepines are not suitable for children. This is except for rare cases of anxiety or insomnia caused by fear or sleepwalking, when diazepam may be prescribed.
- Older people should be given a lower dose than the standard adult dose.

If you have any medical conditions or are receiving any other treatments, let your doctor know. This includes any conditions which aren't listed here.

They can help you decide whether or not it is safe for you to take this medication.

Benzodiazepines during pregnancy and breastfeeding

There is not enough research to know exactly how common problems are with taking benzodiazepines while you are pregnant. Some people have reported the following problems with their baby after taking benzodiazepines during pregnancy:

- cleft palate
- urinary tract abnormalities
- heart abnormalities
- stomach abnormalities
- dyslexia (difficulty reading and writing)
- dyspraxia (problems with co-ordination and movement)
- autism
- attention deficit hyperactivity disorder (ADHD).

Some people have also reported the following problems in their baby after taking benzodiazepines towards the end of their pregnancy:

- drowsiness
- floppy muscles
- breathing problems
- low body temperature
- withdrawal symptoms including abnormal sleeping patterns, high-pitched crying, tremor (shaking), vomiting and diarrhoea.

If you take certain benzodiazepines while breastfeeding, the medication may be present in your breast milk. In some cases, this can build up in your baby's body and cause side effects.

If you are breastfeeding, pregnant or planning to become pregnant, you can ask your doctor about the risks of taking your specific medication.

Taking benzodiazepines with other medication

Combining benzodiazepines with other medications can change the effects of the drugs. This may include reducing the positive effects of either drugs. Or it may lead to negative side effects.

Sometimes doctors may prescribe you benzodiazepines at the same time as other drugs. For example, they may prescribe benzodiazepines with <u>antidepressants</u> or <u>antipsychotics</u>.

The benzodiazepines may be to help you cope with anxiety while you wait for the other medication to begin working. But there may also be negative effects from this, if the drugs interact in a way that causes unwanted side effects.

You can find out about known medication interactions for individual benzodiazepines from the <u>British National Formulary (BNF) A-Z list of drug interactions</u>.

You can also speak to your doctor or pharmacist if you are concerned about taking any other medication with benzodiazepines. This includes prescribed medication, over-the-counter drugs and <u>herbal remedies</u>.

Benzodiazepines with alcohol or recreational drugs

Drinking alcohol can increase the sedative effect of benzodiazepines. This can cause some dangerous side effects. You can speak to your doctor or pharmacist about whether it's safe to drink alcohol with a specific benzodiazepine.

Some recreational drugs can also interact with benzodiazepines in a dangerous way. See our page on <u>recreational drugs and medication</u> for more information on how recreational drugs can interact with medications.

What side effects can benzodiazepines cause?

This page lists many of the known side effects of benzodiazepines. The effects may be slightly different between individual drugs. And everyone reacts to medication differently, so you may or may not experience these effects.

The most common side effects of benzodiazepines include:

- drowsiness
- light-headedness
- confusion
- unsteadiness (especially in older people, who may fall and experience injuries)
- dizziness
- slurred speech
- muscle weakness

- memory problems
- constipation
- nausea (feeling sick)
- dry mouth
- blurred vision.

Some less common side effects of benzodiazepines include:

- headaches
- low blood pressure
- increased saliva production
- digestive disturbances
- rashes
- sight problems, such as double vision
- tremors (shaking)
- changes in sexual desire
- incontinence (loss of bladder control)
- difficulty urinating.

Some rare side effects of benzodiazepines include:

- blood disorders
- jaundice (yellow skin)
- gynecomastia (breast development in people assigned male at birth).

Memory problems with benzodiazepines

For some people, benzodiazepines can cause problems with memory. These problems are likely to be with retaining new memories while you take the medication. It is unlikely that they will cause you to forget old memories.

Your doctor may not prescribe benzodiazepines to help you sleep unless you are sure that you can sleep for a full night without being disturbed. This usually means sleeping for around seven to eight hours. This is because of how your mind works to retains memories while you are sleeping. Some benzodiazepines can disturb this process.

Paradoxical effects of benzodiazepines

Benzodiazepines sometimes cause effects which are the opposite of the medication is meant to do. You may hear these referred to as 'paradoxical' effects. They include:

- aggressive behaviour
- agitation
- anxiety
- <u>delusions</u> (strongly held beliefs that other people don't share)
- <u>depersonalisation</u> (feeling detached from your surroundings)
- depression
- <u>derealisation</u> (feeling out of touch with reality)
- hallucinations
- inappropriate behaviour, with loss of normal inhibitions
- irritability
- nightmares
- personality changes
- <u>psychosis</u>
- rages
- restlessness
- suicidal thoughts or behaviour.

These effects may happen with any benzodiazepine. They are more common in children and older people, and with <u>short-acting benzodiazepines</u>.

Effects of long-term benzodiazepine use

If you take benzodiazepines for more than two to four weeks, you may experience symptoms like:

- difficulty concentrating
- feeling dulled and slow
- feeling isolated and unreal
- feeling cut off from your emotions
- feeling irritable and impatient
- loss of confidence
- weight problems
- memory problems.

You may also experience <u>withdrawal symptoms</u> while you are still taking the drugs. Or you may need to take a higher dose to continue feeling the positive effects of the medication.

Reporting side effects of benzodiazepines

If you experience side effects from any medication, you can report them to the <u>Yellow</u> <u>Card scheme</u>, which is run by the <u>Medicines and Healthcare Products Regulatory Agency</u> (<u>MHRA</u>). This is the organisation which regulates the use of medications in the UK.

You can report any side effect you experience, including any that are may already be known. You can also ask a healthcare professional to report any side effects for you.

"Recently I had a tough time and would love to go back on diazepam to help me through it, but personally wouldn't trust myself on it as I have a three-year-old son and I'm a single parent. I'm not sure I'd wake in the night or be able to function in the day."

Coming off benzodiazepines

This page covers:

- <u>Can benzodiazepines cause withdrawal problems?</u>
- What are the withdrawal symptoms of benzodiazepines?
- When might I experience withdrawal symptoms from benzodiazepines?
- How can I safely stop taking benzodiazepines?
- Antidepressants and benzodiazepine withdrawal

Can benzodiazepines cause withdrawal problems?

You will not normally experience any withdrawal problems with benzodiazepines if you:

- take them occasionally, as a one-off dose
- follow your doctor's recommendations on how to take them.

But if you take benzodiazepines regularly and for a long time, you may become dependent on them. This might mean you experience physical withdrawal symptoms if you stop or reduce your dose. Or you may feel that you cannot cope with your day-to-day life unless you take them.

What are the withdrawal symptoms of benzodiazepines?

If you experience withdrawal problems from benzodiazepines, you may have some of the following symptoms:

- abdominal cramps
- <u>agoraphobia</u> (fear of situations which feel difficult to escape)
- <u>anxietu</u>, including physical symptoms such as muscle tension, tight chest, fast heartbeat, sweating, trembling or shaking
- blurred vision
- concentration problems
- dizziness
- face and neck pain
- headaches
- increased sensitivity to light, noise, touch and smell
- loss of interest in sex
- loss of appetite
- mild to moderate depression
- nausea (feeling sick)
- nightmares
- panic attacks
- restlessness
- sleep problems
- sore eyes
- sore tongue and metallic taste
- tinnitus (ringing in your ears)
- tingling in the hands and feet (pins and needles)
- unsteady legs
- vomiting (being sick)
- weight loss.

Some people may also experience more severe withdrawal symptoms from benzodiazepines. These may include:

- burning sensations in the skin
- confusion
- <u>delusions</u> (strongly held beliefs that other people don't share)

- <u>depersonalisation</u> (feeling detached from your surroundings)
- <u>derealisation</u> (feeling out of touch with reality)
- hallucinations
- memory loss
- muscle twitching
- <u>paranoia</u>
- seizures (fits).

If you suddenly stop taking benzodiazepines, this can cause serious withdrawal symptoms. These include:

- confusion
- <u>psychosis</u>
- seizures
- a collection of symptoms including a rapid heartbeat, sweating, high blood pressure, tremor (shaking), hallucinations and agitated behaviour.

"Eventually my doctor weaned me off it, very slowly, over months. Which was hard, but I knew it was the right thing to do."

When might I experience withdrawal symptoms from benzodiazepines?

Withdrawal symptoms can begin several hours after you stop taking a short-acting benzodiazepine. Or they can begin up to three weeks after you stop taking a long-acting benzodiazepine. This is because long-acting benzodiazepines can stay active in your system for a while after you have stopped taking them.

The longer you take benzodiazepines, the more likely it is that you will find it difficult to stop and the greater your risk of withdrawal symptoms. Short-acting benzodiazepines can be especially difficult to come off if you have taken them for a long time.

See our page on <u>comparing benzodiazepines</u> for more information on short-acting and long-acting benzodiazepines.

How can I safely stop taking benzodiazepines?

If possible, you should reduce your dose gradually when you stop taking benzodiazepines. This reduces the risk of experiencing withdrawal symptoms.

Your doctor can provide more specific advice on how to safely withdraw from your medication. You may also find it helpful to speak to others about your withdrawal. For

example, this may be from a local or online support group, or help from friends and family.

See our pages on <u>coming off psychiatric medication</u> for more information, including different ways to find support.

Antidepressants and benzodiazepine withdrawal

Some people experience depression after coming off benzodiazepines. If you experience this, your doctor may offer you antidepressants to help you deal with the symptoms of depression. Although some research suggests that <u>selective serotonin reuptake inhibitor</u> (<u>SSRI</u>) antidepressants are not effective for treating depression that happens after coming off benzodiazepines.

See our pages on <u>antidepressants</u> for more information about this medication, including the possible benefits and side effects. You can also discuss any questions or concerns you have about this with your doctor.

Comparing benzodiazepines

This page has information to help you compare different benzodiazepines. It has tables for comparing benzodiazpines mainly used for <u>anxiety</u>, and for comparing benzodiazepines mainly used for insomnia (difficulty getting to sleep or staying asleep).

It also has information explaining how benzodiazepines differ from each other.

Some of the drugs in these tables have more than one name. You might know a drug by its generic name or its trade name. See our page on <u>drug names</u> for more information.

Comparing benzodiazepines mainly used for anxiety

Long-acting drugs				
Generic name	<u>Trade names</u>	Forms	<u>Half-life</u>	Dietary considerations
<u>chlordiazepoxide</u>	Librium Tropium	capsulestablets	36–200 hours	 contains lactose
diazepam	Diazemuls	 tablets oral liquid injectable liquid rectal tubes suppositories 	36–200 hours	 tablets contain lactose

	Diazepam RecTubes			
	Stesolid			
	Tensium			
		Short-acting drugs		
alprazolam	Xanax	 tablets 	12-15 hours	 contains lactose
lorazepam	Ativan	 tablets injectable liquid 	10–20 hours	 tablets contain lactose
oxazepam	none	tablets	6-20 hours	 contains lactose

Comparing benzodiazepines mainly used for insomnia

Long-acting drugs				
<u>nitrazepam</u>	Mogadon	 tablets 	24–40 hours	 contains lactose
	She	ort-acting drugs		
<u>loprazolam</u>		 tablets 	6-12 hours	 contains lactose
<u>lormetazepam</u>	Dormagen	 tablets 	10–12 hours	 contains lactose
temazepam		tabletsoral liquid	5–15 hours	 tablets contain lactose

"Different medications work for different people. Lorazepam suited me at the time I was in crisis, and diazepam suits me better in the longer term."

How benzodiazepines differ from each other

There are several ways in which benzodiazepines are different from each other:

Length of half-life

Some benzodiazepines act on your brain and body for longer than others. The half-life of each drug is a helpful way to understand how long a drug's effects may last.

Short-acting benzodiazepines have a shorter half-life. This means that the drugs are processed and leave your body more quickly. Short-acting drugs have a higher risk of withdrawal symptoms. This is because your body has less time to adapt to working without the drug once you stop taking it.

Long-acting benzodiazepines have a longer half-life. This means that the drugs are processed by your body more slowly and take longer to leave the body. You are more likely to experience a 'hangover' effect when taking these drugs. But you are less likely to have withdrawal problems.

Generally, short-acting benzodiazepines are used as sleeping pills and long-acting benzodiazepines are used for anxiety. But this is not always the case. Some drugs for anxiety may help you sleep if you take them at night. And lower doses of sleeping pills may help you feel calm if you take them during the day.

Potency (strength)

Benzodiazepines can have different levels of potency. This is to do with the strength of the chemical reaction that each drug causes in your body.

If you take a lower dose of a high-potency benzodiazepine, this may cause similar effects to a higher dose of a low-potency benzodiazepine.

Metabolisation (breakdown in the body)

Benzodiazepines are broken down by the body in different ways. This process is known as your body metabolising the drug.

Some benzodiazepine drugs, such as diazepam, produce further benzodiazepine chemicals when they are metabolised. These additional chemicals stay in your body and make the overall effect of the drug last longer.

Non-benzodiazepine sleeping pills

This page has information about non-benzodiazepine medications that you may be prescribed to help you sleep. See our page on <u>benzodiazepines</u> for information about benzodiazepine sleep medications.

This page includes a table to help you <u>compare non-benzodiazepine sleeping pills</u> by different factors.

There is also information explaining different types of non-benzodiazepine sleeping pill:

- The Z drugs
- Antihistamines

- <u>Melatonin</u>
- Chloral hydrate and clomethiazole
- Barbiturates

Although we use the term 'sleeping pills' to describe these drugs, some of them may also be available as a liquid, either to swallow or for injection.

Comparing non-benzodiazepine sleeping pills

This table lists all of the non-benzodiazepine sleeping pills currently licensed for use in the UK.

Some of these drugs have more than one name. You might know a drug by its generic name or its trade name. See our page on <u>drug names</u> for more information.

Generic name	<u>Trade</u> <u>names</u> (UK)	Forms available	Half-life	Dietary considerations
<u>chloral</u> (sometimes spelled 'cloral')	Welldorm	liquidtablet	more than 6 days (including active metabolite)	none
<u>clomethiazole</u> (sometimes spelled <u>'chlormethiazole')</u>	Heminevrin	capsulesliquid	3.6–5 hrs	 capsules contain gelatine
diphenhydramine	Sleepeaze Sleep aid tablets (many brands are available)	tablets	2.4–9.3 hrs	 contains lactose
<u>melatonin</u>	Circadin Slenyto Syncrodin	 tablets prolonged release tablet liquid 	0.5–4 hrs	 contains lactose
<u>promethazine</u>	Phenergan Sominex Some brands of 'night cold	 tablets liquid injection (only to be administered 	5–14 hrs	 tablets contain lactose

	and flu' medication	by healthcare professionals)		
zolpidem	Stilnoct	 tablets 	about 2.4 hrs	 contains lactose
zopiclone	Zimovane	 tablets 	about 5 hrs	 contains lactose

The Z drugs

The Z drugs are non-benzodiazepine sleeping pills, used to treat severe insomnia (difficulty getting to sleep or staying asleep). They are known as the Z drugs because their generic names begin with the letter 'z'.

The Z drugs currently licensed for prescription in the UK are <u>zolpidem</u> and <u>zopiclone</u>. The medication zaleplon used to be included in this group, but it is no longer licensed for use in the UK.

These drugs are not benzodiazepines, but they act in a very similar way. This includes causing similar problems with dependence and withdrawal.

They are short-acting drugs, which means their effects last for a short period. And they are less likely to have a 'hangover' effect than some other types of sleep medication.

When might I be prescribed a Z drug?

Your doctor should only prescribe you a Z drug if you are experiencing severe insomnia. And they should only do this after you have tried other, non-medication treatments.

If your doctor prescribes you a Z drug, they should:

- give you the lowest dose that has an effect
- prescribe them for the shortest time possible
- prescribe them strictly according to the licence for that specific drug.

If you are an older person, your doctor may offer you a Z drug ahead of other sleep medication. This is because any negative effects from these drugs are likely to last for less time than with other sleep medication. But you should still take them for the shortest time possible.

Who should avoid taking Z drugs?

Your doctor will not normally prescribe you Z drugs if you have:

• severe lung disease or breathing problems

- sleep apnoea (breathing problems during sleep)
- severe liver or kidney disease
- severe and uncontrolled myasthenia gravis (a neuromuscular condition).

Your doctor may be cautious about offering you Z drugs if you have:

- chest and lung problems
- neuromuscular weakness, such as myasthenia gravis
- a history of <u>alcohol or drug abuse</u>
- a diagnosis of personality disorder.

Your doctor should prescribe a reduced dose of these drugs if you have:

- liver or kidney problems
- porphyria (a rare, inherited illness).

There may be risks with taking these drugs if you are pregnant or breastfeeding. But there is not enough research to know exactly how common these problems may be.

If you are pregnant, breastfeeding or planning to become pregnant, you can speak to your doctor about the risks and benefits of taking a Z drug. They can help you make the best decision for your situation.

How should I take Z drugs?

If you are taking Z drugs, you should:

- try not to take them with food or straight after eating, as this may make them work more slowly
- avoid taking them with alcohol
- not take a second dose in one night
- take them when you are ready for sleep, and not before. After taking them, you may feel unsteady or clumsy if you need to get up in the night, such as to go to the toilet.

You shouldn't normally take sleeping pills for more than three weeks. Ideally, you would take them for no more than one week.

How should I come off Z drugs?

When you stop taking Z drugs, you should withdraw from them gradually to avoid negative withdrawal effects. And if you find that one Z drug doesn't work for you, your doctor should not prescribe you another Z drug to try instead.

Z drugs and dangerous activity during sleep

All Z drugs can sometimes cause a type of sleep-walking, when you may get up and do things while you are not really awake. These include:

- dangerous activities like driving
- eating, including inappropriate food (such as raw food that should be cooked)
- having sex
- being violent to your bed partner.

When you wake up you may not remember anything about what you have done.

If you are taking a Z drug and you carry out dangerous activities while you sleep, you should tell your doctor about this immediately.

"In the past I have suffered manic and psychotic episodes. Being able to sleep was important in helping me recover, so the 'Z' drugs they gave me in hospital really helped."

Antihistamines

Antihistamines are a type of medication mainly used for treating symptoms of allergies, such as hay fever. But some of them also have drowsiness as a side effect. These drugs can also be used to help with short-term insomnia.

You can buy the following drugs without a prescription from a pharmacist, to help with insomnia:

- <u>diphenhydramine</u>
- promethazine

These are long-acting medications, which means their effects last for a longer time. This also means they are more likely to leave a 'hangover' effect the day after you take them.

They may also be slow to act, which means they may not make you feel sleepy straight away. And they may lose their effectiveness if you take them for a few days.

If you take antihistamines but they are no longer helping you sleep, you can speak to your pharmacist for advice.

Who should avoid taking antihistamines?

Your doctor or pharmacist may advise you to be cautious about taking antihistamines if you have:

- an enlarged prostate gland
- problems urinating (urinary retention)
- glaucoma (raised pressure in the eye)
- liver disease
- epilepsy

• porphyria (a rare, inherited illness).

Your doctor or pharmacist may advise you to avoid taking antihistamines if you are pregnant or breastfeeding. But there may be certain cases when your doctor will recommend or prescribe this medication.

If you are pregnant, breastfeeding or planning to get pregnant, you can speak to your doctor or pharmacist if you have questions about taking antihistamines. They can give you the best advice for your situation.

Side effects of antihistamines

Common side effects of antihistamines include:

- disorientation (feeling confused about where you are)
- dizziness
- headaches
- nightmares
- restlessness
- tiredness.

Occasional side effects of antihistamines include:

- blurred vision
- confusion
- dry mouth
- excitement
- urinary retention.

These occasional side effects are more common in older people. Children may also be more likely to experience excitement as a side effect.

Rare side effects of antihistamines include:

- blood cell disorders
- disturbances of heart rhythm
- loss of appetite
- low blood pressure
- muscle spasms
- sensitivity to sunlight
- shaking
- stomach discomfort

• tic-like movements.

You can speak to your doctor or pharmacist if you are unsure whether antihistamines are suitable for you. This includes letting them know if you are taking any other medication, including <u>herbal remedies</u>.

Melatonin

<u>Melatonin</u> is a natural hormone produced by your pineal gland. This is a gland in your brain which regulates your body's response to the 24-hour cycle of day and night.

Melatonin is also available as a medication to help with insomnia. It is usually offered as a short-term medication for people aged 55 and over.

It is not generally recommended for anyone under the age of 18. But it may be offered to them in certain circumstances. Your doctor may also avoid prescribing you melatonin if you are pregnant or breastfeeding. You can speak to your doctor or pharmacist if you are concerned about this.

Chloral hydrate and clomethiazole

<u>Chloral hydrate</u> and <u>clomethiazole</u> are older drugs with many side effects, including possible dependence. Chloral hydrate is a liquid drug, but it may also be available in tablet form called cloral betaine. And clomethiazole may also be spelled chlomethiazole.

These drugs are not usually offered nowadays as medication for insomnia. But they may be used in some rare circumstances. Your doctor may avoid prescribing you these medications if you are pregnant or breastfeeding. They may also be cautious about prescribing them if you have a history of drug or alcohol abuse, or a diagnosis of a personality disorder.

If you are chloral hydrate, you should avoid it coming into contact with your skin as it may cause skin damage.

Barbiturates

Barbiturates were used as sedatives before <u>benzodiazepines</u> became available. They are rarely prescribed nowadays.

You should only be offered them to treat severe insomnia if:

- you are already taking barbiturates
- other treatments have not helped your insomnia.

Barbiturates should not be offered to older people.

Non-benzodiazepine anti-anxiety medication

This page has information about non-benzodiazepine medications that you may be offered to treat anxiety. See our page on <u>benzodiazepines</u> for information about benzodiazepine anti-anxiety medications.

The table below allows you to compare these drugs by different factors. Some of these drugs have more than one name. You might know a drug by its generic name or its trade name. See our page on <u>drug names</u> for more information.

Generic name	<u>Trade</u> names (UK)	Forms available	<u>Half-life</u>	Dietary considerations
<u>buspirone</u>	Buspar none	 tablets 	2–11 hrs	 contains lactose avoid grapefruit juice
<u>pregabalin</u>	Alzain, Axalid, Lecaent, Lyrica, Rewisca	capsulesliquid	about 6.3 hrs	 capsules contain gelatine

You may also be prescribed other types of medication to treat anxiety, such as:

- <u>antidepressants</u>
- <u>beta-blockers</u>
- low doses of <u>antipsychotics</u>.

Our page on <u>treatments for anxietu</u> has more information, including details of nonmedication treatment options.

Useful contacts

Mind's services

- <u>Helplines</u> our Infolines provide information and support by phone, email and text.
- <u>Local Minds</u> provide face-to-face services across England and Wales. These might be talking therapies, peer support and advocacy.
- <u>Side by Side</u> our supportive online community for anyone experiencing a mental health problem.

Other organisations

benzo.org.uk

benzo.org.uk

Information on benzodiazepines and Z drug sleeping pills, including addiction, withdrawal and detailed dosing schedules.

British National Formulary (BNF)

<u>bnf.org</u>

Publication listing recommendations for the use of medications and medical treatments in the UK. Information about specific medications, including their recommended use, side effects and safety guidance, is available at <u>bnf.nice.org.uk</u>.

electronic medicines compendium (emc)

medicines.org.uk/emc

Library of information about medications, including Patient Information Leaflets (PILs) available to download.

Medicines and Healthcare Products Regulatory Agency (MHRA)

<u>mhra.gov.uk</u>

Regulates medicines in the UK and runs the Yellow Card scheme for reporting side effects.

National Institute for Health and Care Excellence (NICE)

<u>nice.org.uk</u>

Produces guidelines on best practice in healthcare.

NHS III (England)

<u>111</u> <u>111.nhs.uk</u> Non-emergency medical help and advice for people in England.

NHS III Wales

<u>111</u> (Hywel Dda, Powys, Aneurin Bevan and Swansea Bay (including Brigend) Health Boards)
 <u>0845 46 47</u> (all other areas of Wales)
 <u>111.wales.nhs.uk</u>

Non-emergency medical help and advice for people living in Wales. The contact number for this service differs depending on which area of Wales you are in.

PostScript 360

<u>0117 966 3629</u>

postscript360.org.uk

Information and support for those coming off tranquillisers and sleeping pills. Formerly known as Battle Against Tranquillisers (BAT).

Rethink Mental Illness

<u>0300 5000 927</u>

rethink.org

Provides support and information for anyone affected by mental health problems, including local support groups.

Royal College of Psychiatrists

rcpsych.ac.uk

Professional body for psychiatrists. Includes information about mental health problems and treatments.

Samaritans

<u>116 123</u> (freephone) jo@samaritans.org Chris, Freepost RSRB-KKBY-CYJK PO Box 90 90 Stirling FK8 2SA samaritans.org

Samaritans are open 24/7 for anyone who needs to talk. You can <u>visit some Samaritans</u> <u>branches in person</u>. Samaritans also have a Welsh Language Line on <u>0808 164</u> <u>0123</u> (7pm–11pm every day).

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