

# Interventions for Insomnia Disorder

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## Clinical Report



The comparative effectiveness and safety of drug or non-drug interventions versus other drug or non-drug interventions for the management of insomnia is unclear.

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Cognitive behavioural therapy for insomnia appears to be effective in improving sleep outcomes and likely has minimal harm.

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Short-duration treatment (i.e., treatment that is typically less than or equal to 16 weeks) with zolpidem, triazolam, doxepin, and melatonin appear to improve sleep outcomes. The long-term effectiveness and safety of these interventions is unknown.

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## Patient Perspectives and Experiences



Patients with insomnia tend to seek treatment when the condition starts to impact their ability to carry out daytime activities. Some patients prefer drugs for the management of insomnia for the fast relief they provide. Others prefer psychological and behaviour therapy, as they feel it provides a long-term solution and addresses the root of the problem. Many patients feel that when they bring forth their complaints of insomnia, they are misunderstood by their peers and health care professionals.

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According to patients, insomnia treatment should be based on an holistic discussion between the clinician and patient. The discussion should consider a patient's concerns and values; the available treatments; and the benefits, harms, and limitations of those options.

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## Current Practice Analysis



Clinicians (physicians, nurses, and pharmacists) caring for patients with insomnia prefer to start with behavioural therapy and integrate drug therapy when needed. Among the behavioural therapy options, sleep hygiene and relaxation therapy were the most commonly recommended.

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For drug therapy, concerns surrounding the addictive nature of the sedative-hypnotic drugs (benzodiazepines, Z-drugs) were raised and respondents indicated that these medications should only be used for the short term. The most commonly recommended medications for insomnia by health care practitioners were sedating antidepressants, Z-drugs, and over-the-counter products.

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