Clinical Toolkit



Clinical Tips: Treating Insomnia with Pharmacotherapy

It is important to proceed with caution before prescribing medications to manage insomnia. Psychological interventions should be considered first. For more on assessing and responding to sleep difficulties in young people experiencing mental health difficulties, see the headspace Evidence to Practice guide.

If prescribing medication to manage insomnia, ensure that the risks have been clearly explained to the young person. It is also important to limit access to medication, and limit the duration of the treatment.

Some information about medication that may be considered are included below:

Benzodiazepines

Benzodiazepine can be effective in increasing the duration of sleep (although the quality of the sleep may be reduced), but should be used with caution due to the risks of tolerance, withdrawal rebound symptoms and dependence.

Measures to increase safety include:

- Adequate explanation of risks
- Limiting expectations of duration of treatment (lowest dose for the shortest period)
- Limiting access of supply (limit to several days or consider regular pick up from pharmacy)

Melatonin

While melatonin is increasingly prescribed to young people, its efficacy has not been established for them. It appears to be helpful in inducing sleep-onset, but is less effective for sleep duration.

It might be considered when a young person has a disrupted sleep-wake cycle that they wish to reset.

Z drugs

Zolpidem and Zopicone (known as 'Z drugs') are effective in the short term, although they should be used with the same caution as benzodiazepines due to risks of tolerance and withdrawal rebound symptoms.

They are also associated with complex sleep behaviours (especially Zolpidem), including sleep walking, sleep-related eating and sleep driving.

Off-label prescribing of antipsychotics

Quetiapine is an antipsychotic that has significant sedation as a side-effect, and is therefore sometimes used for insomnia.

Long-term use is associated with weight gain and metabolic consequences, and it is sometimes used recreationally for its sedative effects.

For these reasons, Quetiapine is not recommended as a treatment for insomnia.

