

Choosing Wisely[®]

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ConsumerReportsHealth



Treating sleep problems

Antipsychotic drugs are usually not the best choice

If you often have trouble falling or staying asleep, you have insomnia. This is a common condition. It can get in the way of working, driving, and even thinking. And it can cause health problems.

To treat insomnia, doctors sometimes prescribe drugs called antipsychotics. The U.S. Food and Drug Administration (FDA) has approved these drugs to treat mental illness, but not to treat insomnia. However, doctors can legally prescribe them. This is called “off-label” prescribing.

But these drugs should not be the first treatment for sleep problems, according to the American Psychiatric Association. Here’s why:

Antipsychotics don’t help much.

These drugs are known as atypical antipsychotics. They include aripiprazole (Abilify), olanzapine (Zyprexa), quetiapine (Seroquel), risperidone (Risperdal), and others.

The drugs often make people drowsy, but there is little evidence that they actually help you fall or stay asleep. Antipsychotics don’t have clear benefits, and the risks can be serious.



Antipsychotics can have serious risks.

Many people who start taking an antipsychotic drug, stop because of side effects:

- Dizziness, drowsiness, confusion, and a higher risk of falls and injuries.
- Weight gain.
- Diabetes.
- High cholesterol.
- Muscle twitches, tremors, and spasms. These may not go away even when the drug is stopped.
- Blood clots. These can lead to serious problems and death if not treated.

Other approaches often work better.

It is almost always best to try other approaches first.

Get short-term relief. If you need help sleeping for only a night or two, ask your doctor about an over-the-counter sleep aid. A low dose of Melatonin taken three hours before bedtime can help, especially if you have jet lag.

Talk to a doctor. You may have a medical problem if you often have trouble sleeping—three or more nights a week for a month or more. Your doctor may be able to help treat insomnia caused by arthritis pain, hot flashes, anxiety, depression, and medications. Other treatable causes may include:

- Sleep apnea—severe snoring.
- Restless legs syndrome—a strong urge to move your legs.
- Urinating often at night—this may be a sign of diabetes, enlarged prostate, or a urinary tract infection.
- Gastroesophageal reflux disease (GERD)—frequent heartburn.

Behavioral therapy. A therapist who specializes in insomnia can often help you “cure” it. Pills only treat symptoms.

When should you consider antipsychotics for insomnia?

The FDA has approved these drugs to treat adults with bipolar disorder, schizophrenia, and—in some cases—depression. Consider them if:

- You have a serious mental illness, such as bipolar disorder with mania, which is keeping you from sleeping.
- Other steps, including prescription sleep drugs, have failed.
- You are very distressed due to lack of sleep.

Start the drug at the lowest possible dose. Check with your doctor that there are no serious side effects. Stop the drug if it is not helping or you no longer need it.

Advice from Consumer Reports

Tips to manage sleep problems

Things you can do to sleep better:

Exercise. Aim for 150 minutes of moderate exercise a week, such as brisk walking. But don't work out in the evening. It heats you up, and you may not sleep as well.

Set regular bedtime and wake-up times. This trains your body to expect sleep at a certain time each night.

Use your bed only for sleep and sex. If you don't doze off in 20 minutes, get up. Do something relaxing in dim light until you're sleepy.

Establish a soothing bedtime routine, like a warm bath, reading a book, or listening to music.

Keep your bedroom cool, dark, and quiet. Try heavy curtains or a

sleep mask to shut out light.

Block noise with earplugs, a fan, or a sound machine.



Use natural light. It keeps your body clock on a healthy schedule. Open shades to wake with the sun. Spend at least 30 minutes outside each day.

Limit naps. If you nap after 3pm you may have problems sleeping at night.

Avoid large, late meals. They can cause heartburn. (But a glass of warm milk at bedtime can make you drowsy.)

Don't smoke for 2 hours before bedtime.

Avoid caffeine for at least 8 hours before bedtime.

Avoid alcohol for 4 to 6 hours before bedtime.

Don't watch TV or use electronics just before bedtime.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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