



Featured Web Resources

No one said parenting was easy. Do you know a parent who needs support? You will find an extensive list of Parenting Resource Centers at Nova Scotia Council for the Family Website. Don't hesitate to point someone in the right direction, or call on their behalf!

www.nscouncilfamily.org/parenting

Being able to recognize a person in distress could save their life. Familiarize yourself with the useful information on the Canadian Association of Suicide Prevention's website. You'll find advice on suicide first aid, support for survivors and links to attend national conferences on suicide prevention.

suicideprevention.ca

In The Know...

More than Meds: Cognitive Behavioural Therapy for Insomnia

Trouble sleeping is one of the most common complaints in primary care where about 30% of patients experience occasional sleep problems and 10% have chronic insomnia. People often complain about trouble falling asleep, staying asleep, and simply waking up not feeling refreshed. Often, people will resort to OTC sleep aids and alcohol, both of which are ineffective and possess unfavorable adverse effects. Alternatively, many patients come to rely on sedative hypnotics to help relieve their symptoms.

Benzodiazepines and Z-drugs (e.g., zopiclone) have been shown to improve surrogate sleep makers like sleep latency, sleep duration, and nighttime awakenings. However, they have been shown not to be more effective than placebo in primary insomnia for outcomes that matter to patients, such as quality of life, daytime function and cognition. [Evidence](#) of harm is more substantial. Hypnotics are associated with increased risk of falls, motor vehicle collisions, dependence, residual sedation, and cognitive impairment. As chronic insomnia is also associated with falls, impairs functioning, and adversely affects comorbid diseases, helping patients find safe and effective management strategies is a way pharmacists can improve the quality of life and health of their patients.

For symptoms lasting more than 4 weeks, [guidelines](#) recommend cognitive behavioural therapy for insomnia (CBTi) as first line therapy. CBTi is a brief, sleep-focused, and problem-solving therapeutic approach. Its main goal is changing sleep-related behaviours (e.g., poor sleep habits, sleep schedules) and cognitions that cause or exacerbate insomnia. It also involves education about proper sleep hygiene and relaxation techniques to alleviate stress and tension, equipping patients with tools to apply in the future.

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In addition to a lack of adverse effects, [studies](#) have shown CBTi to have superior efficacy and long term outcomes compared to pharmacotherapy. In clinical trials collectively involving over 4000 participants, 70% of patients who completed the course of CBTi achieved sustained improvement on sleep and daytime reports. While traditionally delivered via one-on-one or group sessions with trained professionals, CBTi can now be delivered online or through apps, providing an easily accessible and effective treatment option.

Pharmacists interact daily with patients refilling sedative hypnotic prescriptions or repeatedly purchasing 'Nytol® type' sleep aid products. How can pharmacists help these patients access helpful CBTi programs?

- Online Programs and Apps: [Medication InfoShare](#) has developed a detailed [pamphlet](#) that outlines key components of effective CBTi, the types of patients most likely to benefit, and offers detailed descriptions of 10 online programs.
- Community Clinics: [MedSleep](#) is a Canada wide network of sleep clinics that offer comprehensive diagnosis and integrated treatments (including CBTi) for a multitude of sleep disorders.

Helpful links:

- More information about [CBTi](#)
- Insomnia web resources: [About insomnia: American Academy of Sleep Medicine](#)
- Relaxation techniques and tools: www.allaboutdepression.com/relax/

In The News

More support needed for caregivers, Mental Health Commission says in new report...

The commission is releasing guidelines on how to provide better back-up for those caring for relatives with a mental illness. There are 41 suggestions, one of which calls on caregivers to be more formally considered by medical professionals handling their relatives' care, and suggests the health care system needs better training and resources to ensure that happens.

<http://www.vancouversun.com/health/More+support+needed+caregivers+Mental+Health+Commission+says/8585020/story.html>

Note: The views expressed in this newsletter are for information only. The information is not meant to replace or substitute for information from your health care provider (s). (C) More Than Meds



