



DUR Capsules

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Sleep Hygiene

Sleep hygiene is the practicing of certain activities that sustain the internal and external environments in a manner conducive to sleep. Sleep hygiene requires attention to the details across a range of environmental, chemical, emotional, behavioral, and dietary factors.¹

Poor sleep health is largely accounted for by the high prevalence of primary sleep disorders (e.g., sleep apnea, insomnia, narcolepsy, and restless legs syndrome) and the growing number of people living with chronic sleep deficiency, defined as a state of inadequate or mistimed sleep, independent of a primary sleep disorder. The Institute of Medicine estimates that 50 to 70 million adult Americans have a chronic sleep disorder that contributes to poor health.²

Caffeine lasts 5 to 6 hours in the body before wearing off. Stop caffeine consumption in the early afternoon, so it will not interfere with good night's sleep.

SLEEP DISORDERS³

INSOMNIA

Insomnia is characterized by an inability to initiate or maintain sleep. It may also take the form of *early morning awakening* in which the individual awakens several hours early and is unable to resume sleeping. Difficulty initiating or maintaining sleep may often manifest itself as *excessive daytime sleepiness*, which characteristically results in functional impairment throughout the day. Before arriving at a diagnosis of primary insomnia, the healthcare provider will rule out other potential causes, such as other sleep disorders, side effects of medications, substance abuse, depression, or other previously undetected illness. *Chronic psychophysiological insomnia* (or “learned” or “conditioned” insomnia) may result from a stressor combined with fear of being unable to sleep. Healthcare providers may treat chronic insomnia with a combination of sedative-hypnotic or sedating antidepressant medications, along with behavioral techniques to promote regular sleep.

NARCOLEPSY

Excessive daytime sleepiness (including episodes of *irresistible sleepiness*) combined with sudden muscle weakness are the hallmark signs of narcolepsy. Episodes of narcolepsy have been described as “sleep attacks” and may occur in unusual circumstances, such as walking

and other forms of physical activity. The healthcare provider may treat narcolepsy with stimulant medications combined with behavioral interventions, such as regularly scheduled naps, to minimize the potential disruptiveness of narcolepsy on the individual's life.

RESTLESS LEGS SYNDROME

Restless legs syndrome (RLS) is characterized by an unpleasant "creeping" sensation, which often feels like it originates in the lower legs, although it is associated with aches and pains throughout the legs. This often causes difficulty initiating sleep and is relieved by movements of the leg, such as walking or kicking. Abnormalities in the neurotransmitter *dopamine* have often been associated with RLS. Healthcare providers often combine a medication to help correct the underlying dopamine abnormality along with a medication to promote sleep continuity in the treatment of RLS.

SLEEP APNEA

Persons with sleep apnea characteristically make periodic gasping or "snorting" noises, during which their sleep is momentarily interrupted.

Those with sleep apnea may also experience excessive daytime sleepiness, as their sleep is commonly interrupted and may not feel restorative. Treatment of sleep apnea is dependent on its cause. If other medical problems are present, such as *congestive heart failure* or nasal obstruction, sleep apnea may resolve with treatment of these conditions. Gentle air pressure administered during sleep (typically in the form of a nasal *continuous positive airway pressure* device) may also be effective in the treatment of sleep apnea. As interruption of regular breathing or obstruction of the airway during sleep can pose serious health complications, symptoms of sleep apnea should be taken seriously. Treatment should be sought from a healthcare provider.

National Napping Day is celebrated annually the day following the return of daylight saving time. "Napping has been found to be both physiologically and psychologically beneficial. Napping for 20 minutes can help refresh the mind, improve overall alertness, boost mood, and increase productivity. Napping may benefit the heart."⁵

CHRONIC DISEASES⁴

Insufficient sleep has been linked to the development and management of a number of chronic diseases and conditions, including diabetes, cardiovascular disease, obesity, and depression.

DIABETES

Recent research suggests that optimizing sleep duration and quality may be an important means of improving blood sugar control in persons with type 2 diabetes.

CARDIOVASCULAR DISEASE

Persons with sleep apnea have been found to be at increased risk for a number of cardiovascular diseases. Notably, hypertension, stroke, coronary heart disease, and

irregular heartbeats (*cardiac arrhythmias*) have been found to be more common among those with disordered sleep than their peers without sleep abnormalities.

OBESITY

It is believed that sleep in childhood and adolescence is particularly important for brain development and that insufficient sleep in youngsters may adversely affect the function of a region of the brain known as the *hypothalamus*, which regulates appetite and the expenditure of energy.

DEPRESSION

The interrelatedness of sleep and depression suggests that it is important that the sleep sufficiency of persons with depression be assessed and that symptoms of depression be monitored among persons with a sleep disorder.

Preferred Drug List for Sedative Hypnotics

CURRENT CRITERIA

Fourteen (14) day trials of the preferred agents in both categories are required before a non-preferred agent will be authorized unless one (1) of the exceptions on the PA form is present.

IMPORTANT
Effective October 1, 2015, the criteria to get a non-preferred Sedative Hypnotic will require 30-day trials of all preferred agents of only 15 doses per 30 days.

- Preferred agents in the BENZODIAZEPINE category are temazepam 15 mg and 30 mg.
- Non-preferred agents in the BENZODIAZEPINE category are:

| | | | |
|----------|-----------|-----------|----------------------------|
| Dalmane® | Doral® | Estazolam | Flurazepam |
| Halcion® | Quazepam | Restoril® | Temazepam 7.5 mg & 22.5 mg |
| | Triazolam | | |

- Preferred agents in the NON-BENZODIAZEPINE category are zolpidem 5 mg and 10 mg.
- Non-preferred agents in the NON-BENZODIAZEPINE category are:

| | | | |
|--------------|-------------------------------|-----------------|------------|
| Ambien® | Ambien CR® | Chloral hydrate | Edluar® |
| Eszopiclone® | Intermezzo® | Lunesta® | Rozerem® |
| Silenor® | Somnote® | Sonata® | Zaleplon |
| | Zolpidem ER 6.25 mg & 12.5 mg | | Zolpimist® |

WEST VIRGINIA MEDICAID: UTILIZATION OF SEDATIVE HYPNOTICS**Table 1: Utilization of Sedative Hypnotics**

| Rx Count | Qty Dispensed | Label Name |
|----------|---------------|--------------------------|
| 5 | 150 | AMBIEN 10 MG TABLET |
| 5 | 150 | AMBIEN CR 12.5 MG TABLET |
| 5 | 150 | EDLUAR 10 MG SL TABLET |
| 4 | 120 | ESTAZOLAM 2 MG TABLET |
| 9 | 243 | ESZOPICLONE 1 MG TABLET |
| 74 | 1929 | ESZOPICLONE 2 MG TABLET |
| 278 | 7997 | ESZOPICLONE 3 MG TABLET |
| 3 | 90 | FLURAZEPAM 30 MG CAPSULE |
| 27 | 810 | LUNESTA 3 MG TABLET |
| 108 | 2880 | ROZEREM 8 MG TABLET |
| 8 | 240 | SILENOR 3 MG TABLET |
| 1934 | 55887 | TEMAZEPAM 15 MG CAPSULE |

| Rx Count | Qty Dispensed | Label Name |
|----------|---------------|--------------------------------|
| 21 | 630 | TEMAZEPAM 22.5 MG CAPSULE |
| 4018 | 118490 | TEMAZEPAM 30 MG CAPSULE |
| 21 | 484 | TEMAZEPAM 7.5 MG CAPSULE |
| 1 | 30 | TRIAZOLAM 0.125 MG TABLET |
| 23 | 752 | TRIAZOLAM 0.25 MG TABLET |
| 58 | 1900 | ZALEPLON 10 MG CAPSULE |
| 9 | 206 | ZALEPLON 5 MG CAPSULE |
| 104 | 3019 | ZOLPIDEM TART ER 12.5 MG TAB |
| 20 | 573 | ZOLPIDEM TART ER 6.25 MG TAB |
| 20318 | 588619 | ZOLPIDEM TARTRATE 10 MG TABLET |
| 5272 | 785349 | ZOLPIDEM TARTRATE 5 MG TABLET |
| | | |

Table 2: Sedative Hypnotic Utilization in Females

| Age (Decades) | Rx Count | Qty Dispensed |
|---------------|----------|---------------|
| 000-9 | 1 | 30 |
| 010-19 | 119 | 3383 |
| 020-29 | 1256 | 35542 |
| 030-39 | 3821 | 108290 |
| 040-49 | 6039 | 174311 |
| 050-59 | 7505 | 218060 |
| 060-69 | 2734 | 79387 |
| 070-79 | 28 | 840 |

Table 3: Sedative Hypnotic Utilization in Males

| Age (Decades) | Rx Count | Qty Dispensed |
|---------------|----------|---------------|
| 010-19 | 133 | 3723 |
| 020-29 | 823 | 23130 |
| 030-39 | 1959 | 56182 |
| 040-49 | 2970 | 85654 |
| 050-59 | 3724 | 108128 |
| 060-69 | 1215 | 35365 |
| 070-79 | 11 | 330 |
| | | |

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- ⁵ Nap. Wikipedia. Last updated 2015 May 23. Available from: <https://en.wikipedia.org/wiki/Nap>.

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