

SLEEP DISORDERS: TREATMENTS (Part 1 of 3)

Generic	Brand	Strength	Form	Dose ¹	Notes
INSOMNIA					
doxepin	Silenor	Ⓡ 3mg, 6mg	tabs	Adults: Initially 6mg once daily; max: 6mg/day. <i>Elderly, hepatic impairment, tendency to urinary retention:</i> initially 3mg once daily. Children: Not recommended.	Take within 30mins of bedtime. Do not take within 3hrs of a meal.
eszopiclone	Lunesta	CIV: 1mg, 2mg, 3mg	tabs	Adults: Initially 1mg; may increase to 2–3mg if needed; max 3mg/dose. <i>Elderly, debilitated, concomitant CYP3A4 inhibitors, or severe hepatic impairment:</i> max 2mg/dose. Children: <18yrs: Not established.	Effects delayed if taken with or after a heavy/high-fat meal. Take immediately before bedtime (with ≥7–8hrs remaining before planned time of awakening).
estazolam	—	CIV: 1mg+, 2mg+	tabs	Adults: Initially 1mg at bedtime; may increase to 2mg nightly. <i>Small or debilitated elderly:</i> initially 0.5mg. Children: <18yrs: Not recommended.	
flurazepam	—	CIV: 15mg, 30mg	caps	Adults: 15–30mg at bedtime. <i>Elderly or debilitated:</i> initially 15mg at bedtime. Children: <15yrs: Not recommended.	
lemborexant	Dayvigo	CIV: 5mg, 10mg	tabs	Adults: 5mg once per night; may increase to max 10mg/day based on clinical response and tolerability. <i>Concomitant weak CYP3A inhibitors, moderate hepatic impairment:</i> max 5mg/day. Children: Not established.	Effect may be delayed if taken with or soon after a meal. Take immediately before bedtime, with (≥7hrs) remaining before the planned time of awakening.
quazepam	Doral	CIV: 15mg+	tabs	Adults: Initially 7.5mg at bedtime; may increase to 15mg if needed. Children: Not established.	
ramelteon	Rozerem	Ⓡ 8mg	tabs	Adults: Take 8mg within 30mins of bedtime. Children: Not recommended.	Do not take with high-fat/heavy meals (delays effect).
suvorexant	Belsomra	CIV: 5mg, 10mg, 15mg, 20mg	tabs	Adults: 10mg once per night; may increase if ineffective; max 20mg/day. <i>Concomitant moderate CYP3A inhibitors:</i> 5mg; max 10mg/day. Children: Not established.	Effect may be delayed if taken with or soon after a meal. Take within 30mins of bedtime if able to get full night's sleep (≥7hrs) before awakening.
temazepam	Restoril	CIV: 7.5mg, 15mg, 22.5mg, 30mg	caps	Adults: Usual dose: 7.5mg–30mg at bedtime. <i>Elderly or debilitated:</i> initially 7.5mg. Children: Not established.	
triazolam	Halcion	CIV: 0.25mg+	tabs	Adults: 0.125–0.25mg at bedtime; max 0.5mg. <i>Elderly:</i> initially 0.125mg; max 0.25mg. Children: Not established.	Reevaluate if used ≥3wks.
zaleplon	Sonata	CIV: 5mg, 10mg	caps ²	Adults: 10mg; max 20mg. <i>Mild to moderate hepatic impairment, concomitant cimetidine, or low weight patients:</i> 5mg. <i>Elderly, debilitated:</i> 5mg; max 10mg. Children: Not established.	Effects delayed if taken with or after a heavy/high-fat meal. Take immediately prior to bedtime or after patient has gone to bed and experienced difficulty falling asleep (with ≥7–8hrs of sleep remaining).
zolpidem tartrate	Ambien	CIV: 5mg, 10mg	tabs	Adults: <i>Women:</i> initially 5mg. <i>Men:</i> initially 5mg or 10mg. <i>Both:</i> if 5mg ineffective, may increase to max 10mg. <i>Elderly, debilitated, or mild to moderate hepatic impairment:</i> 5mg. Children: <18yrs: Not recommended.	Effects delayed if taken with or after a meal. Take once per night immediately before bedtime (with ≥7–8hrs remaining before planned time of awakening).
	Ambien CR	CIV: 6.25mg, 12.5mg	ext-rel tabs	Adults: <i>Women:</i> initially 6.25mg. <i>Men:</i> initially 6.25mg or 12.5mg. <i>Both:</i> if 6.25mg ineffective, may increase to max 12.5mg. <i>Elderly, debilitated, or mild to moderate hepatic impairment:</i> 6.25mg. Children: <18yrs: Not recommended.	
	Edluar	CIV: 5mg, 10mg	SL tabs	Adults: Place 1 tab under the tongue and allow to dissolve; do not take with water. <i>Women:</i> initially 5mg. <i>Men:</i> initially 5mg or 10mg. <i>Both:</i> if 5mg ineffective, may increase to max 10mg. <i>Elderly, debilitated, or hepatic impairment:</i> 5mg. Children: <18yrs: Not recommended.	
	Intermezzo	CIV: 1.75mg, 3.5mg	SL tabs	Adults: Place 1 tab under the tongue and allow to disintegrate completely before swallowing. <i>Women:</i> 1.75mg. <i>Men:</i> 3.5mg. <i>Concomitant CNS depressants, elderly (≥65yrs), hepatic impairment:</i> 1.75mg. Children: <18yrs: Not recommended.	Effects delayed if taken with or after a meal. Take only once per night as needed (with ≥4hrs of bedtime remaining before planned time of waking).
	Zolpimist	CIV: 5mg/spray	oral soln spray	Adults: <i>Women:</i> initially 5mg (1 actuation). <i>Men:</i> initially 5mg or 10mg (2 actuations). <i>Both:</i> if 5mg ineffective, may increase to max 10mg. <i>Elderly, debilitated, or hepatic impairment:</i> 5mg. Children: <18yrs: Not recommended.	Effects delayed if taken with or after a meal. Take once per night immediately before bedtime (with ≥7–8hrs remaining before planned time of awakening).

(continued)

SLEEP DISORDERS: TREATMENTS (Part 2 of 3)

Generic	Brand	Strength	Form	Dose*	Notes
NARCOLEPSY					
amphetamine sulfate	Evekeo	CII : 5mg, 10mg	tabs	Adults and Children: <6yrs: Not recommended. Usual range 5–60mg/day. 6–12yrs: initially 5mg daily, may increase by 5mg/day at weekly intervals. ≥12yrs: initially 10mg daily; may increase by 10mg/day at weekly intervals.	Give first dose upon awakening and additional doses at 4–6hr intervals.
armodafinil	Nuvigil	CIV : 50mg, 150mg, 200mg, 250mg	tabs	Adults: ≥17yrs: 150mg or 250mg once daily in the AM. Children: <17yrs: Not recommended.	
dextroamphetamine sulfate	—	CII : 5mg+, 10mg+	tabs	Adults: 5–60mg daily in divided doses. Children: <6yrs: Not recommended. 6–12yrs: initially 5mg daily; may increase by 5mg/day at weekly intervals.	Avoid late evening doses. Give first dose upon awakening and 1–2 more doses 4–6hrs apart.
	Dexedrine Spansule	CII : 5mg, 10mg, 15mg	sust-rel caps	≥12yrs: initially 10mg daily; may increase by 10mg/day at weekly intervals.	
	Zenzedi	CII : 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg	tabs	≥12yrs: initially 10mg daily; may increase by 10mg/day at weekly intervals.	
methylphenidate HCl	—	CII : 5mg, 10mg+, 20mg+ 2.5mg, 5mg, 10mg	tabs chew tabs ³	Adults: 10–60mg daily in 2–3 divided doses preferably 30–45mins before meals. Chew tabs: take with 8oz of water or other fluid. Children: <6yrs: Not established. ≥6yrs: initially 5mg twice a day before breakfast and lunch. Increase gradually by 5–10mg per week if needed; max 60mg daily.	May use methylphenidate ER tabs (max 60mg/day) in place of IR tabs when the 8-hr dose of methylphenidate ER corresponds to the titrated 8-hr dose of the IR.
	Methylin Oral Solution	CII : 5mg/5mL, 10mg/5mL	oral soln		
	Ritalin	CII : 5mg, 10mg+, 20mg+	tabs	Adults: Give in 2–3 divided doses preferably 30–45mins before meals. Usual dose: 20–30mg/day; max 60mg/day. Children: <6yrs: Not established. ≥6yrs: initially 5mg twice daily before breakfast and lunch. May increase by 5–10mg weekly; max 60mg/day.	
mixed dextroamphetamine/ amphetamine salts	—	CII : 5mg, 7.5mg, 10mg, 12.5mg, 15mg, 20mg, 30mg	double-scored tabs	Adults and Children: <12yrs: use dextroamphetamine sulfate. ≥12yrs: Usual range 5–60mg/day in divided doses.	Avoid late evening doses; give upon awakening and 4–6hrs apart.
modafinil	Provigil	CIV : 100mg, 200mg+	tabs	Adults: ≥17yrs: 200mg once daily in the AM; max 400mg/day. <i>Severe hepatic impairment:</i> 100mg once daily. Children: <17yrs: Not established.	
pitolisant	Wakix	Rx : 4.45mg, 17.8mg	tabs	Adults: Week 1: initially 8.9mg once daily; Week 2: increase to 17.8mg once daily; Week 3: may increase to max 35.6mg once daily. Adjust dose based on tolerability. Children: Not established.	Take in the AM upon awakening.
sodium oxybate	Xyrem	CIII : 500mg/mL	soln	Adults: Initially 4.5g/night in 2 equally divided doses, at bedtime then again 2.5–4hrs later. May increase by 1.5g/night (0.75g/dose) at weekly intervals; usual range: 6–9g/night; max 9g/night. Children: <7yrs: Not established. ≥7yrs (20–<30kg): initially ≤2g/night in 2 equally divided doses, at bedtime then again 2.5–4hrs later. May increase by 1g/night (0.5g/dose) at weekly intervals. Max total dose: 6g/night. (30–<45kg): initially ≤3g/night in 2 equally divided doses, at bedtime then again 2.5–4hrs later. May increase by 1g/night (0.5g/dose) at weekly intervals. Max total dose: 7.5g/night. (≥45kg): initially ≤4.5g/night in 2 equally divided doses, at bedtime then again 2.5–4hrs later. May increase by 1.5g/night (0.75g/dose) at weekly intervals; max total dose: 9g/night.	Take on empty stomach. Dilute each dose with 60mL of water. Allow 6hrs before becoming active after last dose.

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SLEEP DISORDERS: TREATMENTS (Part 3 of 3)

Generic	Brand	Strength	Form	Dose*	Notes
NARCOLEPSY (continued)					
solriamfetol	Sunosi	CIV: 75mg+, 150mg	tabs	Adults: Initially 75mg once daily; usual range 75–150mg/day. May double dose at intervals of ≥3 days; max 150mg/day. <i>Renal impairment:</i> CrCl 30–59mL/min: initially 37.5mg/day; may increase to max 75mg/day after ≥7 days. CrCl 15–29mL/min: initially and at max 37.5mg/day. CrCl <15mL/min: not recommended. Children: Not established.	Take upon awakening; avoid within 9hrs of planned bedtime.
NON-24-HOUR					
tasimelteon	Hetlioz	Rx: 20mg	caps	Adults: 20mg once daily before bedtime. Children: Not established.	Take at the same time every night. Avoid with food.
RESTLESS LEG SYNDROME					
gabapentin enacarbil	Horizant	Rx: 300mg, 600mg	ext-rel tabs	Adults: 600mg once daily at about 5pm with food. No additional benefit with 1200mg. <i>Renal impairment:</i> CrCl 30–59mL/min: initially 300mg/day and increase to 600mg as needed. CrCl 15–29mL/min: 300mg/day. CrCl <15mL/min: 300mg every other day. CrCl <15mL/min on HD: not recommended. Children: Not studied.	If dose not taken at recommended time, next dose should be taken the following day.
pramipexole	Mirapex	Rx: 0.125mg, 0.25mg+, 0.5mg+, 0.75mg, 1mg+, 1.5mg+	tabs	Adults: Initially 0.125mg once daily 2–3 hrs before bedtime. May double dose every 4–7 days; max 0.5mg/day (doses of 0.75mg/day have been used). <i>Renal impairment:</i> increase titration interval to every 14 days if needed. Children: Not established.	
ropinirole	Requip	Rx: 0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg, 5mg	tabs	Adults: Initially 0.25mg on Days 1 & 2, then 0.5mg on Days 3–7, increase by 0.5mg/day at 1-wk intervals to 3mg then may increase to 4mg after 1wk; max 4mg/day. <i>ESRD on HD:</i> initially 0.25mg/day; max 3mg/day. Children: Not established.	Take once-daily 1–3 hrs before bedtime. Titrate gradually.

NOTES

Key: + = scored; ER = extended-release; HD = hemodialysis; IR = intermediate-release; SL = sublingual

¹ Use lowest effective dose

² Contains tartrazine

³ Contains phenylalanine

Not an inclusive list of medications, official indications, or dosing information. Please see drug monograph at www.eMPR.com and/or contact company for full drug labeling.

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