



## Effective Health Care Management of Chronic Insomnia Nomination Summary Document

### Results of Topic Selection Process & Next Steps

- Management of chronic insomnia will go forward for refinement as a systematic review. The scope of this topic, including populations, interventions, comparators, and outcomes, will be further developed in the refinement phase.
- When key questions have been drafted, they will be posted on the AHRQ Web site and open for public comment. To sign up for notification when this and other Effective Health Care (EHC) Program topics are posted for public comment, please go to <http://effectivehealthcare.ahrq.gov/index.cfm/join-the-email-list1/>.

### Topic Description

<b>Nominator:</b>	Anonymous individual
<b>Nomination Summary:</b>	The nominator questions the comparative effectiveness and harms of interventions for chronic insomnia.  <b>Staff-Generated PICO</b> <b>Population(s):</b> Adults and children with chronic insomnia with or without comorbid mental or general health conditions that are associated with insomnia (e.g., depression and dementia) <b>Intervention(s):</b> Pharmaceutical management of insomnia (including benzodiazepines, benzodiazepine receptor agonists, or antidepressants), complementary and alternative care, relaxation therapy, cognitive behavioral therapy, hormones <b>Comparator(s):</b> Placebo or comparison to another insomnia intervention <b>Outcome(s):</b> Quality of life, sleep quality, fatigue, and harms (headaches, nightmares, changes in thoughts or cognition, addiction)
<b>Key Questions from Nominator:</b>	1. For patients with insomnia, how do commonly used medications compare for effectiveness and harms, including addictive potential?

### Considerations

- The topic meets all EHC Program selection criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)

- Insomnia is defined as the inability to initiate or maintain sleep or a lack of restorative sleep and is experienced by as many as one-third of adults. Insomnia can be associated with various harms, including decreased quality of life, cognitive deficits, and an increased risk of psychiatric disorders. Treatment of chronic insomnia is a dilemma commonly encountered in primary care. There is uncertainty surrounding which medications are most effective and when medications should be used as opposed to nonpharmacologic treatments. A review on this topic will help to compare the relative benefits and harms of these interventions.