



Dear Dr. \_\_\_\_\_,

Your patient, \_\_\_\_\_, has enrolled in the PharmaZzz Non-Medication Therapy for Insomnia (NMTi) program. Current guidelines recommend non-medication therapy (behavioural +/- cognitive therapy) as a first-line treatment for insomnia, with studies reporting it is more effective than hypnotics in long-term outcomes. (See next page for details on the PharmaZzz protocol.)

NMTi is more likely to be effective if patients stop their sleep medications.

\_\_\_\_\_ (Patient name) is currently taking

\_\_\_\_\_ (drug name / strength / dose), and is willing to try tapering and discontinuing it as part of the PharmaZzz protocol.

**If insomnia is the sole indication for this medication and it is otherwise safe for the patient to discontinue the medication, we ask for authorization to taper the medication according to the following protocol:**

**To authorize the taper, please sign and date this form and return it to the pharmacy.**

Physician signature \_\_\_\_\_ Date \_\_\_\_\_

Pharmacy name: \_\_\_\_\_

Pharmacy fax: \_\_\_\_\_ Pharmacy telephone: \_\_\_\_\_

The program will be delivered in a series of weekly or biweekly sessions (average number is six) by a pharmacist trained in NMTi techniques. These sessions may involve sleep restriction therapy, stimulus control therapy, sleep hygiene, basic cognitive therapy and relaxation techniques as appropriate:

- Sleep restriction therapy: limiting the amount of time spent in bed to the patient's total sleep time as measured over the previous 1 to 2 weeks on a sleep log. This therapy is adjusted weekly or biweekly based on efficiency of sleep as recorded in the sleep logs.
- Stimulus control therapy: limiting patients' activities in the bedroom to sleep and sexual activity. Patients will be asked to get out of bed and leave the bedroom when unable to sleep during the night.
- Sleep hygiene: includes a number of recommendations specific to environment and lifestyle that may help to improve sleep, e.g. avoid caffeine and alcohol in the evening, avoid napping, get regular exercise, etc.
- Cognitive therapy: may be used if patients have difficulty complying with sleep restriction and stimulus control or if their sleep patterns are not improving despite compliance. Cognitive therapy includes discussing negative beliefs about sleep and addressing any anxieties or worries about sleep.
- Relaxation techniques: breathing exercises, muscle relaxation exercises or guided imagery may also be recommended.

**If you have any questions about the program, please feel free to contact us or the PharmaZzz program coordinators.**

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