Overview

Zopiclone (Imovane® and generic forms) belongs to a group of medications called “hypnotics” or “sedatives”. It may also be more commonly referred to as a “sleeping pill”.

What is zopiclone used for?

Zopiclone is approved by Health Canada for short-term use for relief of sleeping difficulties (insomnia) in adults. Like many other medications prescribed for children and adolescents, Health Canada has not approved zopiclone for this age group. When the potential benefits (e.g., reducing your symptoms) of using zopiclone outweigh the potential risks (e.g., the side effects), many doctors may prescribe it to treat insomnia in children and adolescents.

Your doctor may be prescribing this medication to you for another reason. If you are unclear why this medication is being prescribed, please ask your doctor.

How does zopiclone work?

Zopiclone works by affecting the activity of the brain chemical (neurotransmitter) called GABA. By enhancing the action of GABA, zopiclone helps you to fall asleep faster and to increase total sleep duration and as well as sleep quality.

How well does zopiclone work in children and adolescents?

Zopiclone may improve insomnia by shortening the time it takes you to fall asleep, decreasing the number of times you wake up during the night, and increasing your total sleep duration.

Before starting treatment with zopiclone for sleep, it is suggested that you try behavioural changes first to see if you have a need for medication. Below are some suggestions for developing good sleep habits (sleep hygiene). Sometimes, good sleep hygiene may be all that is needed to improve your sleep difficulties. Whenever possible, adding good sleep hygiene strategies to zopiclone therapy increases the chance you will benefit from taking this medication.

Sleep hygiene strategies:

- Avoid caffeine (from tea, coffee, colas or energy drinks) and alcohol, nicotine or other recreational drugs
- Keep a regular sleep/wake schedule every day; avoid sleeping in or napping during the day
- Avoid stimulating activities before bedtime (e.g. computer or television time or exercise late in the evening)
- Ensure a quiet and comfortable sleep environment (e.g. comfortable temperature, dark room, no pets in bed)
- Doing something relaxing or enjoyable before bedtime (e.g. listen to soothing music or take a warm bath)
- avoid large meals just before bedtime
- Exercise regularly (during the daytime)
- Use your bedroom only for sleep; remove the clock from direct eyesight
- If you are not asleep within 20 minutes, get up and go to another room. Come back to bed when you feel drowsy.
How should zopiclone be taken?

Zopiclone is available in tablets that are taken by mouth. Your doctor will determine the dose of zopiclone that works best for you, based on your symptoms and your response to this medication. Zopiclone should be taken once a day just before your desired bedtime. Do not exceed the recommended dosage without consulting your doctor.

Avoid drinking alcohol while taking this medication, as it may result in increased side effects (e.g. increased drowsiness and impaired coordination). Do not drive or operate machinery until you know how this medication affects you. Do not take zopiclone if you need to be mentally alert or functional within 8 to 10 hours.

When will zopiclone start working?

You should start feeling drowsy within 30-60 minutes of taking zopiclone.

How long do I have to take zopiclone?

Zopiclone is normally taken only on an as-needed basis when you have sleep difficulties. Generally, its use should be limited to 7-10 consecutive days at a time, whenever possible. However, some patients may need to take zopiclone regularly for a longer period of time. Discuss with your doctor how long you may need to take zopiclone.

Is zopiclone addictive?

The use of zopiclone may lead to physical and psychological dependence or abuse. However, zopiclone appears to have a lower risk for dependence and rebound insomnia (see below) than other sleeping pills (e.g. benzodiazepine medications such as oxazepam (Serax®) and triazolam (Halcion®)).

As the zopiclone dosage and the duration of treatment increases, the risk of dependence or abuse becomes higher as well. If you have been taking zopiclone regularly for a long period of time and you suddenly stopped taking this medication, you may experience worsened sleep problems (“rebound insomnia”) or feelings of anxiety for 1 to 2 days. If you and your doctor decide to stop using zopiclone, your doctor will explain how to safely lower the dose gradually to prevent uncomfortable withdrawal effects as your body adjusts to being without it.

What are the side effects of zopiclone and what should I do if I get them?

As with most medications, side effects may occur when taking zopiclone. Most side effects are mild and temporary. Sometimes, side effects of this medication may occur before any of the beneficial effects. It is possible for some individuals to experience side effects that they feel are serious or long lasting. If you feel this has happened, speak with your doctor right away. On the next page are some of the more common side effects of taking this medication. In brackets are suggested ways to lessen these effects.
Common side effects

Side effects may be more common when starting a medication or after a dose increase. If any of these side effects is too troublesome for you, please discuss them with your doctor, nurse or pharmacist.

- Agitation, irritability (avoid caffeine from colas, coffee, energy drinks and some teas)
- Bitter or unpleasant taste
- Constipation, stomach ache (try drinking more fluids, exercising, or increasing the amount of fiber in your diet)
- Dizziness, lightheadedness (try getting up slowly from a sitting or lying down position. Do not drive or operate machinery until you know how this medication affects you.)
- Dry mouth (try chewing sugarless gum or sucking hard sugar-free candies, ice chips, or popsicles)
- Headache (try using a pain reliever like acetaminophen (Tylenol®))
- Incoordination (do not take drive, operate machinery or take part in activities that require physical coordination until you know how this medication affects you.)
- Increased sleep difficulties or anxiety after you stop taking zopiclone (also called a “rebound effect”) (this will usually go away after one or two days)
- Memory problems (amnesia) (you may have trouble remembering things that occur within several hours after taking this medication. Only take zopiclone when you are able to have a full night’s sleep.)
- Morning drowsiness/tiredness following zopiclone use (this usually goes away if the dose is decreased. Do not drive or operate machinery until you know how this medication affects you)
- Vivid dreams or nightmares

This medication may affect your ability to drive, operate machinery or carry out tasks that require mental alertness. This effect may be more pronounced if taken with alcohol.

Uncommon side effects (e.g. those occurring in less than 5% of patients)

Contact your doctor IMMEDIATELY if you have any of these side effects:

- Hallucinations (hearing or seeing things that are not there)
- Irregular heart beat (palpitations)
- Muscle spasms or stiff muscles
- Mood or behavioural changes or aggression
- Thoughts of self-harm, hostility or suicide
- Complex sleep-related behaviours: very rarely, patients taking zopiclone may get out of bed without being fully awake and take part in activities that they are unaware of (e.g. cooking, eating, driving and walking), and have no memory of the event.

What precautions should my doctor and I be aware of when taking zopiclone?

Several medications can interact with zopiclone, including sleep aides or antihistamines such as diphenhydramine (Benadryl®, Nytol®) and doxylamine (Unisom®); anti-anxiety medications such as lorazepam (Ativan®) and clonazepam (Rivotril®); antidepressants such as trazodone (Desyrel®) and amitriptyline (Elavil®); mood stabilizers such as carbamazepine (Tegretol®); antibiotics such as erythromycin, and several others. If you are (or begin) taking any other prescription or over-the-counter medications, be sure to check with your doctor or pharmacist to see if they are safe to use. Your doctor may need to change the doses of your medication(s) or monitor you carefully for side effects if you are taking certain other medications.
Tell your doctor or pharmacist if you:

- have had allergies or bad reactions to zopiclone or any other medication
- drink alcohol regularly or have a history of alcohol or drug abuse/addiction
- have a lung disease or breathing problems
- have sleep apnea (a sleep disorder in which you temporarily stop breathing while asleep)
- have liver or kidney problems
- have depression or any other psychiatric disorder
- have changes in mood or thoughts of self harm or suicide
- have myasthenia gravis (a muscular disease)
- miss a period, become pregnant or are trying to become pregnant or are breast-feeding

**What special instructions should I follow while using zopiclone?**

- Keep all appointments with your doctor. Inform your doctor about your sleep pattern. Your doctor will monitor your sleep disorder and your response to this medication.
- Do not allow anyone else to use your medication.

**What should I do if I forget to take a dose of zopiclone?**

If you take zopiclone regularly and you forget to take it, skip the missed dose and take your next dose at its regularly scheduled time the next day. Do NOT double your next dose.

**What storage conditions are needed for zopiclone?**

- Keep this medication in the original container, stored at room temperature away from moisture and heat (e.g., not in the bathroom).
- Keep this medication out of reach and sight of children.

You may wish to share this information with your family members to help them to understand your treatment options. Since every person's needs are different, it is important that you follow the advice provided to you by your own doctor, nurse and/or pharmacist and speak to them if you have any questions about this medication.