

The danger of Z-drugs for dementia patients

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Strong sleeping pills known as 'Z-drugs' are linked with an increased risk of falls, fractures and stroke among people with dementia—according to research from the University of East Anglia.

Sleep disturbance is common among people with [dementia](#) and the impact for patients and their families is significant.

To date there are no proven effective treatments available, however people with dementia are often prescribed Z-drugs (zopiclone, zaleplon, and zolpidem).

But a new study published today reveals that stronger doses of these drugs are linked with an increased risk of adverse effects.

These adverse effects were found to be similar or greater than those for higher dose benzodiazepines or 'benzos' - which are also used to treat sleep disturbance, and are known to have several adverse effects.

The team say that patients already taking [higher doses](#) of Z-drugs should not stop taking their medication suddenly, however they should seek a

review with their GP.

Prof Chris Fox, from UEA's Norwich Medical School, said: "As many as 90 percent of people with dementia suffer [sleep disturbances](#) and it has a big impact on their mental and [physical health](#), as well as that of their carers.

"Z-drugs are commonly prescribed to help people sleep—however these medicines were never licensed for dementia and they have been associated with adverse events such as falls and fracture risks in older people.

"We wanted to find out how they affect people with dementia, who are frequently prescribed them to help with sleep disturbance."

The team analysed data from 27,090 patients in England diagnosed with dementia between January 2000 and March 2016. The average age of the patients was 83 and 62 percent were women.

They looked at the adverse events for 3,532 patients who had been prescribed Z-drugs and compared them to people suffering sleep disturbance who had not been prescribed sedatives, and patients who had been prescribed benzodiazepines.

They also looked to see whether Z-drug dosage played a part in adverse outcomes.

Prof Fox said: "We studied a range of adverse outcomes including fractures, falls, deep vein thrombosis, stroke and death—over two years. And we were particularly interested to see whether higher doses led to worse outcomes."

Higher dose Z-drugs and benzodiazepines were defined as prescriptions equivalent to >7.5mg zopiclone or >5mg diazepam daily.

"For patients prescribed Z-drugs, 17 percent were given higher doses. And we found that these patients on higher doses were more at risk of falls

and fractures, particularly hip [fractures](#), and stroke—compared with patients who were not taking any medication for sleep disturbance," said Prof Fox.

Those on lower doses however (

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