XANAX TO SLEEP STOPPED WORKING OUT

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She blogs on Tuesdays on The Chart. Read more from her at Dr. I tested for every sleep disorder known to man and god and found no underlying problem with his sleep quality. At our initial visit, I had expressed my concern that his hypnotic medication, Clonazepam, could be part of the problem, especially because his dose of 2 mg was rather high for a man his age.

He had been reluctant to make any changes to a medication that, from his point of view, had worked so well for him over the years. Now, with all other explanations ruled out, he was ready to try to get off it in order to feel less groggy in the morning. I tapered him slowly and he had no withdrawal symptoms nor any rebound insomnia. He feels more energetic and less sleepy in the daytime and he only occasionally uses a sleeping aid when he has trouble falling asleep. This is a scenario that is played out every day in my sleep clinic: Clonazepam Klonopin is a common culprit.

It belongs to a class of drugs called benzodiazepines. They have been used as sleeping agents for decades. They have many other uses including the treatment of anxiety, seizure and muscle spasm. In general, these drugs can be very useful sleep aids, but must be used cautiously because they will often cause dependence, tolerance, withdrawal and rebound insomnia if used long enough on a nightly basis.

Dependence is fairly self-explanatory and means that a person cannot sleep without the drug. Tolerance means that that the dosage has to be repeatedly increased to achieve the same affect. It is not the same as addiction but is often confused with it. They can also cause withdrawal which means the emergence of a new set of symptoms that were not present before using the medication.

Common withdrawal symptoms include agitation, nausea, sweating and palpitations. The benzodiazepines can cause rebound insomnia. Rebound insomnia means insomnia that is worse than it was before a patient started the drug. Typically, it lasts only one or two nights. The problem with Clonazepam in particular is that it has a very long half life. Therefore, it takes a long time to clear the system and its hypnotic and sedating effects can last well into the next day. There can be withdrawal if stopped abruptly, but it is less likely to cause rebound insomnia when compared to shorter-acting benzos.

Besides daytime sedation, any of the benzodiazepines can cause amnesia, sleepwalking and sleep eating. There are studies showing increased fall risk in the elderly, but there is also research showing that untreated insomnia increases falls. There is definite concern that these medications can have multiple deleterious effects in the elderly including memory and cognition problems. As with most medications, the doses should be lower when patients are elderly or have liver or kidney impairment.

For insomnia treatment, it is better to use benzodiazepines that have a medium half life such as lorazepam or temazepam. They will usually help someone get to sleep and stay asleep most of the night without too much hangover effect the next morning. As with most prescription sleep aids, I recommend intermittent use so that tolerance and withdrawal might be avoided. Medications such as zolpidem Ambien are called non-benzodiazepines but that is misleading because they act on the same GABA benzodiazepine receptors in the brain.

One bad effect is that drugs like Ambien have no anti-anxiety properties and most people with insomnia have anxiety either that is fueling the insomnia or as a consequence of the insomnia. Therefore, if someone has chronic, nightly difficulty falling asleep or staying asleep, I recommend CBT-I cognitive behavioral therapy for insomnia. As I have discussed in previous posts, it is the safest treatment and actually the most effective one in the long term.

I have been using Temezapam for over a year now and have had no side effects. I hope it stays that way. It works very well for me. Dont truly know if I could sleep without it. My sleep is important. I use both Temezapam and Clonozopine. I use both due to the fact that either one, taken individually, for me, only have an effective life of about 3 hours. Hence, I take both. And yes, I do take a daily nap. Taken together, I can sleep through the night.

Either one, taken individually, and I wake up two or three times during the night. Re Mike- You still have sleep apnea when taking sedatives but you don't wake up as much and go even longer without breathing. In other words sedative sleep aids Increase the death rate from sleep apnea and taking two of them together is just plain stupid. This article was very helpful. I have definitely experienced the symptoms she describes, and I will be discussing this with my doctor soon.

Anti-depressants and anti-seizures also cause insomnia, as well as this hangover effect. I take both to treat oro-facial nerve pain as a result of a root canal. Although I SO appreciate what these medications do for my pain, the chronic insomnia and

drowsiness are dreadful. There are nights when I literally do not get one minute's sleep. Coming off of a benzo will be the most horrific event in any persons life.

Benzo's are horrible drugs that should have never been invented. By all means stay away from them. I have been taking 50 mg of diphenhydramine hydrochloride each night for many months, which gives me a very good night's sleep. However, I find that I am prone to taking a nap of about an hour mid-morning, and sometimes in the afternoon.

When I stopped taking this, I could usually get to sleep with no problem, but going back to bed after a mid-sleep bathroom trip left me unable to get back to sleep. However, I am going to try stopping again. I am a year old male in very good health. Gordon — I too had trouble going back to sleep after mid-sleep break.

I was precribed Zaleplon which only lasts in the system for about an hour that I take at that mid-sleep break. I go right back to sleep and don't need the afternoon naps any longer. I only put one pill by my bedside so if I don't take it, I know the next morning. My sleep doc's goal is to re-train the body to get the sleep we all need and taking shorter and shorter acting meds really helped me.

As does chronic use of alcohol, pot, etc, etc. But of course all those things produce a high that feels pretty damn good for a minute and that is hard to walk away from. Anyone can sleep well by completely eliminating caffeine from their diet. People make money from the above and market them to victims. Get a grip people. Many of us take beta blockers for blood pressure control. They tend to block the body's normal production of melitonan which leads to insomnia.

Therefore, we need some help to get to sleep and stay asleep. Dex, don't you think you are being pretty harsh? I've used clonazepam for several years. As soon as I start to feel that strange feeling, I shut off the tv, and go to sleep rather than lay and enjoy the 'high'. You are suggesting that all people are using just to get that feeling and it's untrue. I don't drink caffeine past 11am, ever. I work hard all day, but cannot stay asleep at night.

I found what you said harsh and very judgemental for people you don't know. It's a wonderful medication for many things. It also keeps my jaws relaxed during the night, stops my restless leg and keeps my anxiety mild the next day. It's a wonder drug, if not abused! Everything is as it was, and every thought is teased out and betrayed by emotion. Struggling to sleep, you pray to the personal trainers and begin to run away from your insomnia with some cardio. Of course it worked, everyone is just like you.

You have sat on mount Olympus with the original cross fit gods, and this qualifies you. No, morally obliges you to share your workout journal and kale smoothie recipes from upon high. And definitely with these weak minded — drug addicted deadbeats who can't exercise and eat healthy and take prescriptions to regulate their internal cycles. Did we establish that eating well and exercising is negatively correlated to taking benzos?

Are people receiving medical attention some how unable to take care of themselves holistically? I mean, you do know everything about everyone on a drug you took temporarily. Thanks for sharing the good word, I will looking for you on the street corner screaming at all the sinners like every other quack with all the answers. There are many people that need to take sleeping pills due to medical issues, not to get a "high". I myself have restless legs and periodic limb movement disorder and can't sleep without them.

Before I started taking them I was getting more tired every day and it was starting to affect my health.

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- does xanax and valium come up the same on a drug test

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- xanax mixed with soma
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- can you get high off .25 xanax
- 10mg valium equal 1mg xanax
- interaction between xanax and sudafed
- can u take too many xanax
- taking xanax with buspirone
- how to know if xanax is real
- is adderall or xanax better for your mood ring colors
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