## Which hypnotic for the elderly?: in the elderly calm days and restful nights start with Heminevrin capsules.

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Astra Pharmaceuticals Ltd., CNS/Respiratory Division, St. Peter's House, 2, Bricket Road, ST. ALBANS, Herts. AL1 3JW 2

Please send me Clinical Information on Heminevrin® in:—  Sleep disorders in the elderly
Daytime tranquillisation in the elderly
List any specific detail required
Name(please print)
Address
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# Which Hypnotic for the Elderly?

Astra Pharmaceuticals Ltd., CNS/Respiratory Division, St. Peter's House, 2 Bricket Road, St. Albans, Herts. AL1 3JW

Dear Doctor.

At a time when precautionary notes are being written about the use of benzodiazepines, particularly the long-acting ones in the elderly, it is worth considering alternative ways of treating insomnia in this age group.

Heminevrin® (chlormethiazole) has been used successfully as a hypnotic for many years.<sup>2</sup> The short elimination half-life means that it is rapidly cleared from the body, making less likely the daytime drowsiness and confusion often reported with the longer acting benzodiazepines.<sup>1,3</sup>

From the attached table, it can be seen that of those hypnotics currently available, Heminevrin®, a non-benzodiazepine, has the shortest elimination half-life in the elderly. The elimination of some drugs has not even been studied in the elderly!

In a recent study on Heminevrin® 3, the result was described thus: "... the plasma concentration time curve of chlormethiazole is ideal for an hypnotic: rapid absorption, fast elimination and only minimal amounts persisting 8 hours after dosing ..."

Heminevrin®, therefore, helps the patient to a full night's sleep with minimal effects on daytime alertness. This, of course, is especially desirable in the elderly, who may already have some functional disability.

Further information on Heminevrin® can be obtained by completing and returning the attached reply-paid postcard.

Yours faithfully,

J. Attley, Ph.D., Product Manager

References:

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## In the Elderly

Calm days and restful nights start with

# Heminevr Capsules

"It appears that improved sleep, control of restlessness and improvement in mood, work together to cause the patients to be more agreeable and co-operative"16

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**Prescribing Information Heminevrin Capsules** Presentation Off-white oval capsule containing 192mg of chlormethiazole in arachis oil. Indications Sleep disturbances in the elderly. Confusional states associated with agitation and restlessness. Dosage Sleep disturbances—2 capsules at night. Confusional states—1 capsule three times daily. Side-effects Heminevrin has very low toxicity. The most common side-effects appear to be a tingling sensation in the nose and sneezing which may occur some 15-20 minutes after taking the capsules. Conjunctival irritation has also been noted in some cases and occasionally these symptoms may be severe and may be associated with severe headaches. Gastrointestinal disturbances have been reported after oral therapy.

Precautions Heminevrin may potentiate or be potentiated by centrally acting depressant drugs, including alcohol, thus when used concomitantly dosages should be appropriately reduced. Moderate liver disorders associated with alcoholism do not preclude the use of Heminevrin. However, as with all drugs which are metabolised in the liver, great caution should be observed in patients with gross liver damage and decreased liver function, particularly as sedation can mask the onset of liver coma. Caution should be observed when treating addiction-prone patients, especially on an out-patient basis. As with all sedative/hypnotic drugs the driving of vehicles and operating of machinery is inadvisable when under treatment. Package quantities Bottles of 100. Price £4.64 for 100 capsules. Legal category P.O.M. Product licence number 0017/5009.

> Further information on request to: CNS-RESPIRATORY

> > DIVISION OF ASTRA PHARMACEUTICALS LTD

### Pharmacokinetics of Hypnosedatives Given Once Daily

	Drug	Elimination half-life (hours)		Time to steady state (days)	Drug Acc. (doses)	Ref.
		Young	Elderly			
Long acting	flurazepam* diazepam chlordiazepoxide* n-desmethyldiazepam* nitrazepam	47-100 20-65 5-25 30-60 14-43	unknown 65-90(H) 10-45(H) unknown 15-70(IP)	7.8-17.0 11.0-15.0 2.0-8.0 5.0-10.0 3.0-12.0	x2.8-6.0 x3.9-5.4 x1.0-2.7 x1.8-3.2 x1.0-4.2	1 2 3 4 5, 6
Short	lorazepam oxazepam temazepam triazolam* chloral hydrate* chlormethiazole	16-24 7-22 5-11 15-20 2-5 8-11 3-7	unchanged (H) unchanged (H) 15-30** unknown ?unchanged ?3-9	3.0-4.0 1.0-4.0 2.0-5.0 1.0 2.0 1.0-2.0	x1.0-1.4 x1.0-1.3 x0.1-1.8 < 1 < 1 < 1	7, 8 8, 9 10, 4 11 12, 13 14

<sup>\*</sup> Drug with active metabolite. H Healthy volunteers. IP In-patient volunteers.

Time to steady state taken as 4 elderly half-lives where known. Drug accumulation = 1.44 x t ½ hours/24(15)

\*\* Unpublished data (P. Cook).

Table after Cook, P., (1980), Current Trends in Therapeutics in the elderly. Conference Proceedings.

Medical Education Services Ltd., Oxford.