

A Better Sleep Without Pills: Safer Strategies for Older Adults

Transcript

[0:00 Introduction]

Dr. Anthony Levinson: Hello, I'm Dr. Anthony Levinson from McMaster University. Many older adults find that getting a good night's rest becomes a challenge as they age. This guide is designed to help you learn more about a safer, more effective path to better sleep. Let's get started by defining what insomnia is.

[0:30 What is insomnia?]

Dr. Anthony Levinson: Insomnia disorder isn't just one bad night. It's defined as having trouble falling or staying asleep at least three nights a week, for three months or more, and it significantly affects your daytime functioning—leaving your 'battery' feeling low.

[0:51 Do sleeping pills really help?]

Dr. Anthony Levinson: To cope, many people turn to medication. In fact, nearly one-third of older Canadians take sleeping pills, such as benzodiazepines or 'Z' drugs. Some examples include the '-epam' drugs like lorazepam, or Ativan, and 'Z' drugs such as zopiclone, or Imovane. While these are common, they are often not the best first choice for long-term health.

We have to ask: Are these pills really the best solution? While they might seem like a quick fix, evidence shows that for most older adults, the risks often outweigh the benefits.

[02:17 The real risk: benefit vs harm]

Let's look at the numbers. Scientific studies show that, on average, sleeping pills only provide about 23 extra minutes of sleep per night. For many, that small gain doesn't result in feeling more rested the next morning.

In medical terms, we often look at the 'Number Needed to Treat' or NNT. For these medications, the Number Needed to Treat is 13. This means 13 people need to take the medication for only one person to experience a real, noticeable improvement in their sleep quality.

Now, let's look at the 'Number Needed to Harm,' or NNH. For every six people who take these sleeping pills, one person will suffer a harmful side effect. So, on average, a person is actually more likely to experience harm from a sleeping pill than to get a significant sleep benefit.

[02:39 Risks for older adults]

Dr. Anthony Levinson: As we age, our bodies process these drugs more slowly, making us more sensitive to their effects. These pills more than double the risk of falls and hip fractures. They also increase the risk of car accidents, confusion, and memory issues, and can lead to physical dependence and withdrawal.

These potential harms are why major health organizations, including Choosing Wisely Canada, don't recommend the use of benzodiazepines or other sedative-hypnotics in older adults as the first choice for treating insomnia.

[03:20 A safer path to better sleep: Cognitive Behavioural Therapy for Insomnia]

Dr. Anthony Levinson: So, if pills aren't the answer, what is? There is a safer, more effective path to resting well that treats the root cause of the problem rather than just masking the symptoms.

Cognitive Behavioural Therapy for Insomnia, or CBT-I, is the first-line evidence-based treatment recommended by experts. Most importantly: it's a skill, not a pill. CBT-I works by changing habits. Stimulus control retrains your brain to associate the bed only with sleep—not scrolling on your phone or watching TV. Sleep restriction temporarily limits your time in bed to make your sleep more efficient, helping you fall asleep faster and stay asleep longer.

It also addresses the psychological side of insomnia. Cognitive therapy helps replace unhelpful, anxious beliefs about sleep with more realistic ones. Coupled with relaxation techniques to calm the mind and body, these tools provide long-lasting benefits without the side effects of medication.

Ready to get started? Check out CBT-I resources like the 'CBT-i Coach' app or websites like 'MySleepWell.ca'. If you are taking medications don't stop abruptly. Talk to your healthcare team about your options.

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