

# Hypersomnia Due to a Medication or Substance

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People with this condition have excessive daytime sleepiness, napping or nighttime sleep that is associated with taking sedating medication, alcohol or recreational drugs. Hypersomnolence can also occur during withdrawal from amphetamines or other stimulants including caffeine. Many prescription medications are sedating including sedatives, sleeping pills, barbiturates, opioids and other narcotic pain medications, anticonvulsants, antipsychotics, antidepressants, antihistamines, beta-blockers, and antispasmodics. Sleepiness can also be caused by non-prescription drugs including marijuana and gamma hydroxybutyrate (GHB).



## Diagnosis

The diagnosis of *Hypersomnia Due to a Medication or Substance* is based on a history of daily periods of excessive daytime sleepiness, napping or prolonged night time sleep associated with current use of a sedating medication or substance, or withdrawal from a stimulant. The sleepiness is not explained by another medical, psychiatric or sleep disorder. A *Nocturnal Polysomnogram* is not usually required unless an underlying sleep disorder is suspected. *MSLT* results may vary depending on the substance. A urine drug screen may be positive for the suspected substance. The diagnosis is usually confirmed after the drug or substance is discontinued and the symptoms of hypersomnia resolve.

## Management

Confirming the diagnosis by discontinuing the responsible medication or substance is also usually the best management. However, there will be times when the responsible medication is also the best medication for the condition being treated and there may or not be a satisfactory alternative. If the condition is chronic and long-term use of the sedating medication is required, then symptomatic treatment with stimulant medication may be considered although not the best solution. Stimulant medication is reasonably safe with minimal side effects in young healthy narcoleptics. However, in older patients with chronic medical or psychiatric conditions, the side effects from stimulant medication such as

hypertension or cardiac arrhythmia are more of an issue.

Often times a medication review will result in a reduction or discontinuation of more than one non-essential medication resulting in improvement of the overall well being of the patient.

When non-prescription drugs and substances are responsible for the hypersomnia, addiction is likely an issue and will require appropriate treatment.

When stimulant withdrawal is the cause of excessive sleepiness, symptoms will usually resolve spontaneously over a period of a few days to a few weeks. Residual fatigue or sleepiness may persist and in fact, may sometimes preexist the abuse of stimulants. Preexisting fatigue or sleepiness may have been the trigger for self medication with stimulants. A referral for a sleep disorder evaluation should be considered for persistent sleepiness and fatigue.