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Oral presentation

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Title

Experiences of insomnia for patients and prescribers in the primary care consultation
– a focus group study

Introduction

Insomnia has a prevalence of 40%. Half of those with insomnia seek help from primary care and hypnotic drugs are commonly prescribed costing over £22 million each year. The aim of the study was to explore the experiences of patients and prescribing primary care professionals (PPCPs) during the GP consultation in order to understand how to improve the management of insomnia.

Methods

Four focus groups were held with PPCPs in local surgeries and 4 with patients in a convenient non-healthcare venue at widespread locations in Lincolnshire, UK. Professionals were recruited by letter from 8 practices participating in an insomnia collaborative (REST*) project. Patients who had presented with sleep problems [excluding those terminally ill or addicted to illegal substances] in the previous 3 months, were recruited by letter from the same practices. Data were recorded, transcribed and analysed using a constant comparative approach using MAXQDA 2007.

Results

We are beginning to understand how sleep problems affects sufferers' lifestyle, ability to function and relationships with others. Patients visit their PPCP about sleep problems when desperate and after trying self-help. They hope the PPCP will listen, assess, reassure and offer something not previously tried. GPs frequently believed that patients with difficulty sleeping expected to be prescribed hypnotics whereas patients often expressed preference for an alternative and were generally aware of the potential addictive effect of hypnotics. Written information was considered a waste of time, unless it was also discussed and explained. PPCPs also highlighted good communication but this was not always reflected in the patient experience.

Conclusions

Patients are generally more willing to avoid hypnotics, to try alternatives and to withdraw from long-term sleeping tablets whereas PPCPs believed they would not wish to stop hypnotics because of withdrawal or worsening symptoms. Encouraging PPCPs to listen to patients' unique experiences of insomnia and provide education on adverse effects and alternatives to hypnotics, may lead to

reduced hypnotic prescribing and a better patient experience. The results will inform a complex intervention study.

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