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## Initial Management of Insomnia in Older Adult Patients

### PURPOSE

The project aimed to reduce the frequency of initial prescribing of sleep aid medications to manage insomnia in older adult patients in primary care through the use of a standardized protocol.

### BACKGROUND

The project was implemented in a high-volume and busy family practice in southeast Texas.

### METHODOLOGY

The project intervention included standard use of an insomnia screening tool, recommendation of cognitive-behavioral therapy for insomnia (CBT-I) as initial treatment, and referral to and therapy implementation by a CBT-I trained provider in the same practice. For inclusion in the project, patients must be at least 65 years old with a new diagnosis of insomnia not being treated with sleep medication.

### RESULTS

Eight months of post-implementation data were obtained, and 44 patients met project eligibility. Twenty-four patients (48%) were not screened or referred and 100% were prescribed sleep medication at initial report of insomnia, while 20 patients (40%) were screened and referred for CBT-I and completed their appointments. In the CBT-I group, 16 patients (80%) reported improved sleep without medication, while 4 patients (20%) were prescribed medication.

### IMPLICATIONS

Despite the project's findings that CBT-I effectively treats insomnia, more provider education and training will be needed to increase utilization in primary care.

In multi-provider primary care practices, training a few designated CBT-I providers may be more effective than training all providers. Having CBT-I available in the same practice location would increase access to CBT-I, resulting in a decrease in the initial prescribing of harmful sleep medication to older adult patients.