

30 - E. Drugs and Disorders

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© SPMM Course E. Drugs and Disorders Disorder / drugs Changes Alcohol ☐ Increase SWS (chronic use – loss of SWS) ☐ Reduce initial REM but increase second half REM Alcohol withdrawal ☐ Loss of SWS ☐ Increased REM ☐ Intense REM rebound Anxiety disorders ☐ Increased stage 1 sleep (light sleep) ☐ Reduced REM, normal REM latency ☐ Reduced slow wave sleep Benzodiazepines ☐ Decrease sleep latency ☐ Increase sleep time ☐ Reduce stage 1 sleep ☐ Increase stage 2 sleep ☐ Reduce REM and SWS ☐ REM rebound on cessation ☐ Prevent the transition from lighter stage 2 sleep into deep, restorative (stages 3 and 4) sleep. Cannabis ☐ Increase SWS ☐ Suppress REM Carbamazepine ☐ Suppresses REM and increases REM latency ☐ Increases SWS Dementia ☐ Increased sleep latency & fragmentation ☐ Reduced sleep time Depression ☐ Loss of SWS slow wave sleep (first half) ☐ Increased REM (leading on to Early awakening) ☐ Reduced REM latency Lithium ☐ Suppresses REM and increases REM latency ☐ Increases SWS Opiates ☐ Decrease SWS & REM ☐ Withdrawal REM rebound Schizophrenia ☐ Inconsistent reduction in REM latency and slow wave sleep. ☐ N.B.: Antipsychotics have variable effects SSRIs ☐ Alerting due to 5HT₂ stimulation ☐ May reduce REM latency ☐ Variable effects of REM suppression Stimulants ☐ Reduce sleep time by decreasing both REM sleep and SWS ☐ REM rebound on cessation (except modafinil) Tricyclics ☐ REM suppression (especially Clomipramine) ☐ Increased SWS and stage 1 sleep Z hypnotics ☐ Less effect on sleep architecture; Zopiclone may increase SWS

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