

A patient's guide to understanding

Treatments for Disorders of Excessive Daytime Sleepiness

This patient's guide summarizes the AASM's recommendations for medical treatments for people with disorders of excessive daytime sleepiness. If you have been diagnosed with a disorder of excessive daytime sleepiness, this guide is intended to help you know what to expect when talking with your medical provider about treatment options. If you want more information about these recommendations, you can read the <u>full clinical practice guideline</u>.

Based on the published medical literature, the AASM guideline provides either STRONG (\checkmark) or CONDITIONAL (†) recommendations for treatments listed in the following table. Medications given a STRONG recommendation should be considered for use in nearly all patients with the disorder because evidence shows that the benefits outweigh the risks. Medications given a CONDITIONAL recommendation are also appropriate for the majority of patients, but the medical literature in support of their use is less conclusive about the balance of potential benefits and harms.

Medications	Narcolepsy	Idiopathic Hypersomnia	Hypersomnia due to Traumatic Brain Injury	
TREATMENTS FOR ADULTS				
Modafinil	✓	✓	+	
Pitolisant	✓	+		
Sodium Oxybate	✓	†		
Solriamfetol	✓			
Armodafinil	+		+	
Dextroamphetamine	+			
Methylphenidate	+	†		
Clarithromycin		†		

TREATMENTS FOR CHILDREN				
Modafinil	+			
Sodium Oxybate	†			

[✓] STRONG recommendation for

WHAT ELSE SHOULD YOU DISCUSS WITH YOUR MEDICAL PROVIDER?

The decision about which medication is best for each individual is a complex one, which should be determined by each patient and their provider, working together to consider the evidence-based recommendations above. Factors to consider are common side effects, serious side effects, other medical conditions, cost and accessibility issues, and individual preferences. Serious side effects for some of the above medications include abuse and dependency, harm if taken during pregnancy or during breastfeeding, reduced effectiveness of hormonal contraception (such as oral contraceptives), seizures, coma, and heart disease. Medication choices for each individual may change over time or with lifestyle. Some patients might also get one or more of these treatments.

In some cases, medications and other treatments (naps, light therapy, etc.) not included in the recommendations above may be considered for treatment of disorders of excessive daytime sleepiness. If your medications are not included in the above table, it means that the AASM did not find enough evidence to make a recommendation. But it does not mean that the AASM is recommending against their use. Please see the full clinical practice guideline for information about these additional disorders of excessive daytime sleepiness: Kleine-Levin syndrome, hypersomnia secondary to alpha-synucleinopathies, genetic disorders with primary central nervous system somnolence and hypersomnia secondary due to other central nervous system disorders.

NEXT STEPS

You should talk with your medical provider if you think you have a disorder of excessive daytime sleepiness or if you have questions about treatment. For more information about treatment of disorders of excessive daytime sleepiness or to find an accredited sleep center near you, please visit **sleepeducation.org**.



[†] CONDITIONAL recommendation for