

# Ramelteon Improves Chronic Insomnia in Elderly

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Miami Bureau

BOCA RATON, FLA. — The newly approved drug ramelteon significantly reduced sleep latency and increased total sleep time in a phase III study of elderly patients with chronic insomnia. In addition, researchers reported no evidence of next-day residual cognitive, psychomotor, or memory effects.

"There was really no problem with next-day psychomotor impairment that you can see with gamma-aminobutyric acid (GABA)-ergic agents. This study was done in an elderly population, so that is particularly important," David Seiden, M.D., said in an interview at a poster presented at a meeting of the New Clinical Drug Evaluation Unit, sponsored by the National Institute of Mental Health. Use of sedative-hypnotic agents has been associated with increased risk of hip fractures from falls (*J. Am. Geriatr. Soc.* 1999;47:30-9).

Most agents approved by the Food and Drug Administration to treat insomnia work through the GABA-ergic system, including zolpidem (Ambien) or zaleplon (Sonata). But Dr. Seiden said ramelteon uses a novel approach and has a different mechanism of action through the melatonin system.

As a melatonin agonist, ramelteon has the ability to induce sleep and modulate

circadian rhythm by binding to the same receptors, M1 and M2, targeted by endogenous melatonin, said Dr. Seiden, medical director of the Broward Research Group and Sleep-Wake Disorders Center of South Florida in Pembroke Pines.

Dr. Seiden and his associates studied 100 elderly patients with chronic insomnia in a crossover design. The mean age was 71 years, and 37 participants were men. Each participant took either ramelteon 4 mg/night, ramelteon 8 mg/night, or

placebo for 5 weeks, followed by a 5- to 12-day washout period before switching. The drug was administered 30 minutes before the patient's usual bedtime.

The researchers used overnight polysomnography to assess efficacy. Patients also completed a postsleep questionnaire, Digital Symbol Substitution Test, and immediate and delayed memory recall tests.

"The major finding here is, there is an improvement in sleep latency," he said.

Participants taking 4-mg/night ramelteon fell asleep faster than those taking a placebo (29 minutes versus 38 minutes), according to polysomnography. Similar improvements occurred with the higher dose of ramelteon (31 minutes). These differences were statistically significant.

Patients' subjective assessments of sleep latency were significantly different between those taking the 4-mg/night dose of ramelteon and those taking placebo (48

## Is Drink a Day Good for Women?

A drink a day appears to protect elderly women from cognitive decline, according to new data from the ongoing Nurses' Health Study.

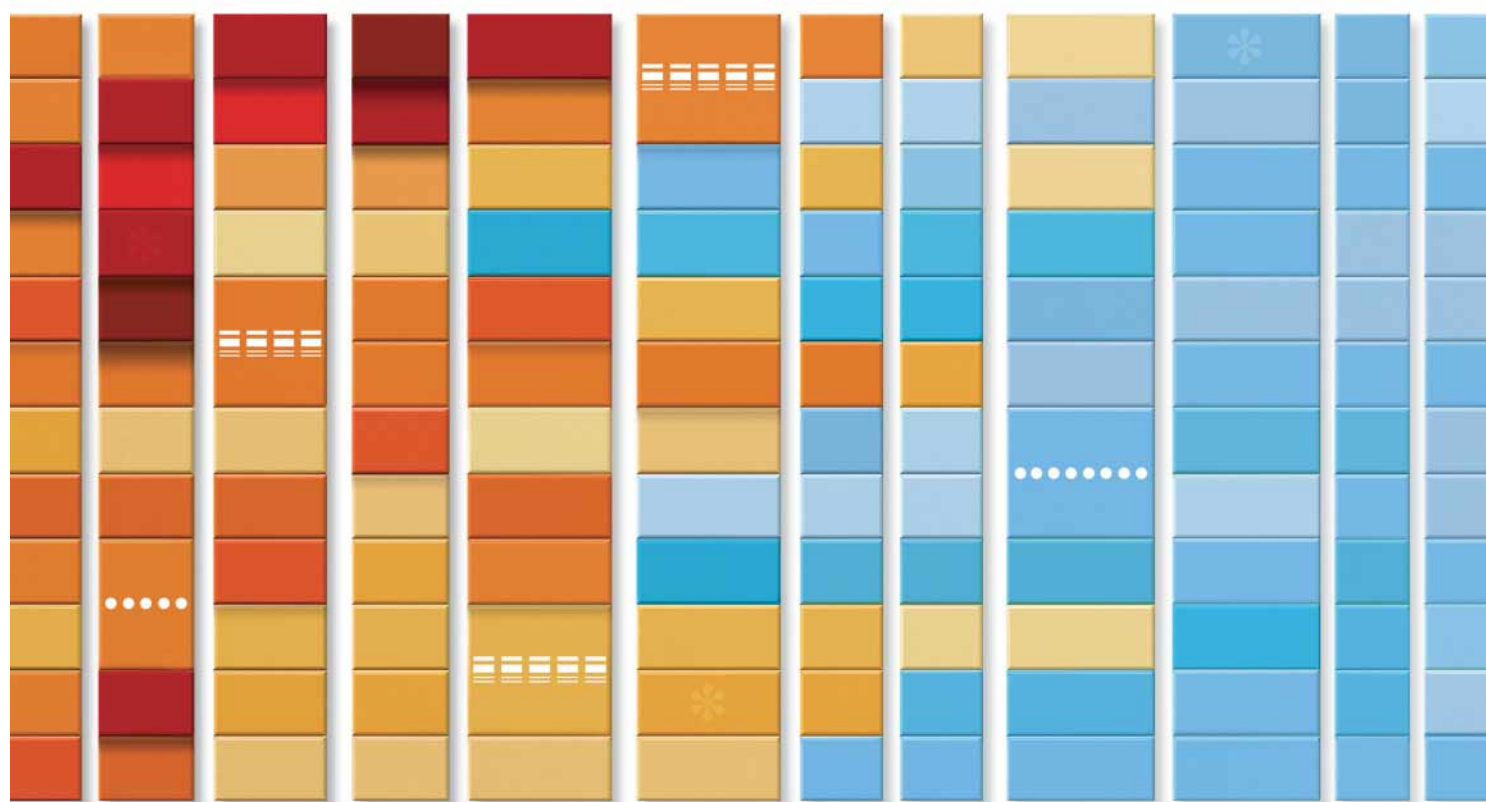
During a 2-year follow-up study, interviewers administered four cognitive tests to more than 11,000 women aged 70-81 years, said Meir Stampfer, M.D., of Brigham and Women's Hospital, Boston, and colleagues. They found that moderate drinkers (about one drink/day) had a 20% lower risk of cognitive decline than either nondrinkers or those who drank two or more drinks/day. Both wine and beer were associated with the protective effect (*N. Engl. J. Med.* 2005;3:245-53).

Moderate alcohol intake elevates the HDL level and reduces that of fibrinogen and other thrombotic factors. "Thus, moderate intake of alcohol may help preserve brain vasculature, may prevent subclinical strokes, and could thus result in better cognitive function," the authors said.

But more studies are needed before doctors advise elderly women to start hitting the bottle, Denis Evans, M.D., of Rush University, Chicago, said in an accompanying editorial: "Persons seeking to maximize cognition in old age must keep in mind both the uncertainty of the current results and the knowledge that alcohol consumption can be a double-edged sword, with the dangers of overindulgence being all too familiar."

—Michele G. Sullivan

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