

Introduction:

Insomnia is the most prevalent medical pathology in adulthood and is currently considered a public health problem, being necessary to study precisely its diagnostic-therapeutic approach

Materials and methods:

Retrospective observational study about insomnia patients diagnosed and treated by primary care in our area (Department of Health of Sagunt, Valencia, Spain), between 2008 and 2018 (more than 100000 patients, collected random and anonymously from our two largest regional healthcare network databases), in order to analyse big data about epidemiology, and comorbidity, as well as which are the primary care strategies for chronic insomnia diagnosis, management and treatment.

Results:

Comparative between our data and another similar samples published^A show higher prevalence and incidence, increased comorbidity and number of consultations and much more psychoactive drugs overprescription.

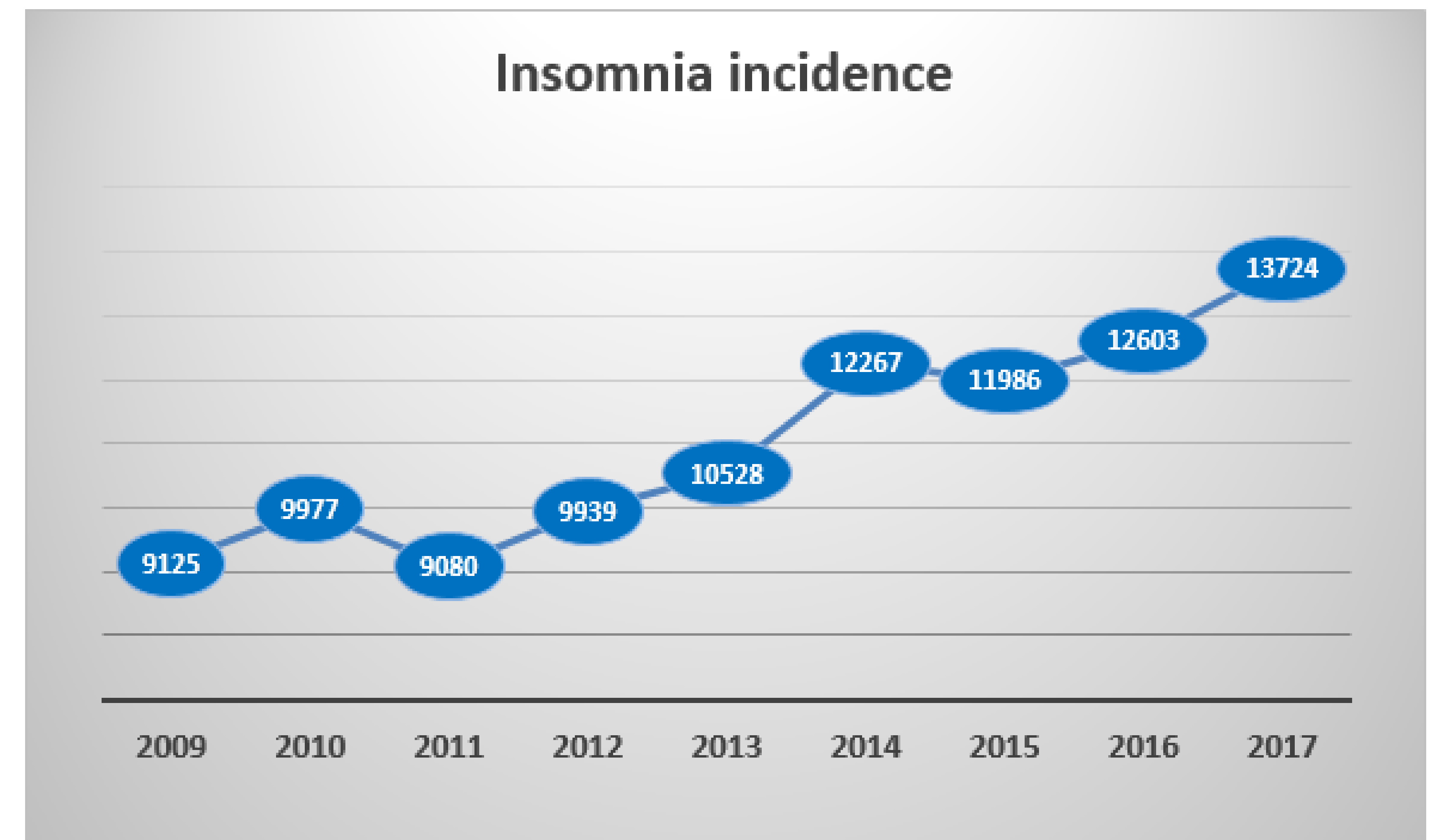
We underline specially lorazepam, first of our insomnia used pills (T1), which represents the 32% of all the prescribed psychoactive drugs (T2), progressive increase on insomnia incidence, during the last 9 years, until around 10%. now (F1) and the most frequent comorbidity before and after insomnia diagnostic, related to sleep disorders, that is sleep pattern impairment (before) and Willis-Ekbom syndrome (after).

Besides, there is too much variability in diagnostic, assesment^B, procedures and treatment criteria: there are more registered psychoactive treatments than consultations (54,2% of cases), 32% of patients don't receive a treatment after first consultation with insomnia or they received treatment without a registered treatments than consultations (F2) and 39% receive a psychoactive drug without therapeutic indication (F3)

Conclusions

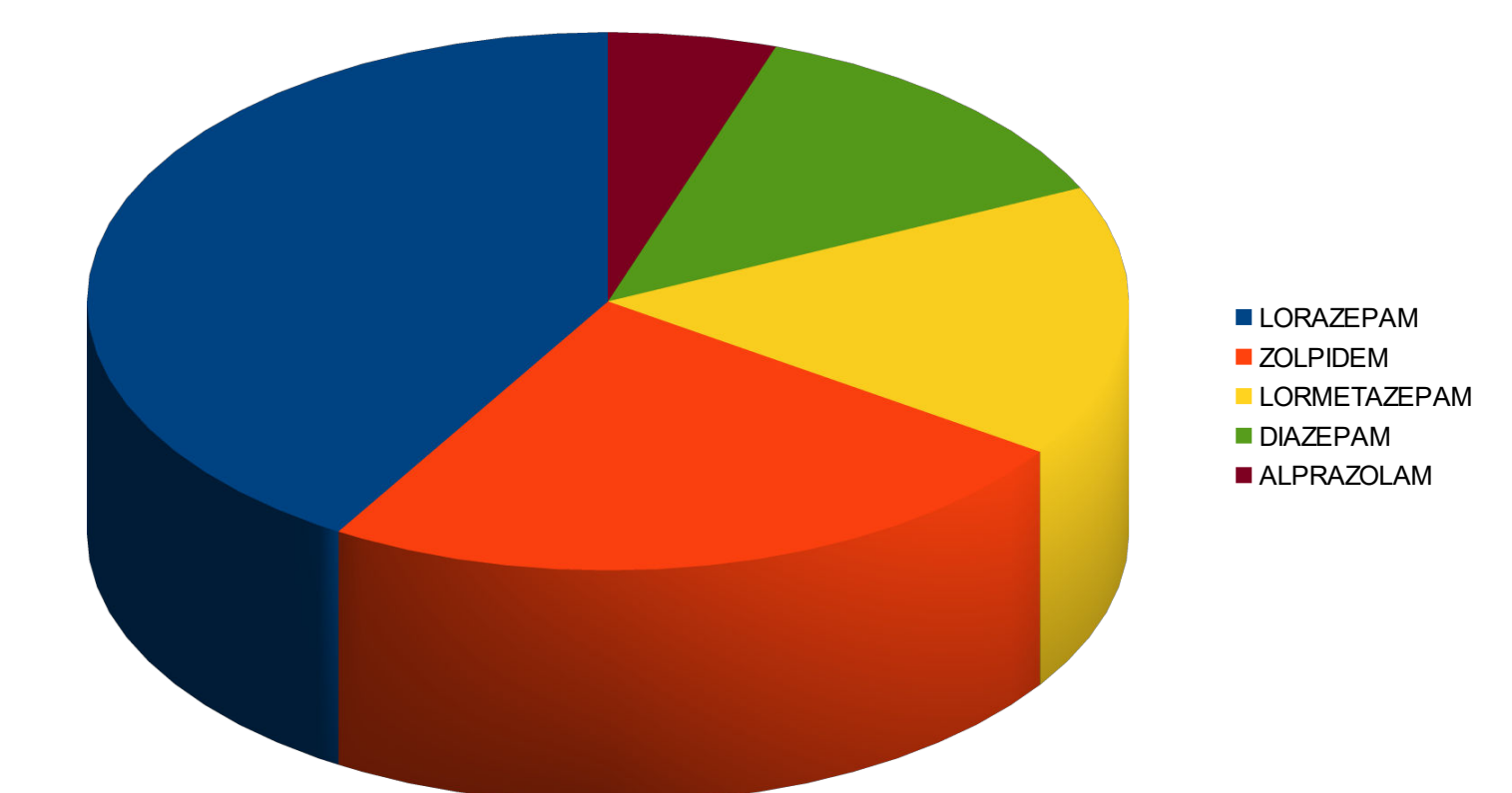
According to our results, in our sample, chronic insomnia is the most important treated health problem and there are too many failures, pitfalls and obstacles in his primary care management so it is urgent to solve the significant lack of resources and effectiveness in primary care chronic insomnia management in our environment, as soon as possible

Number of cases of insomnia per year between 2009-2017 (F1)

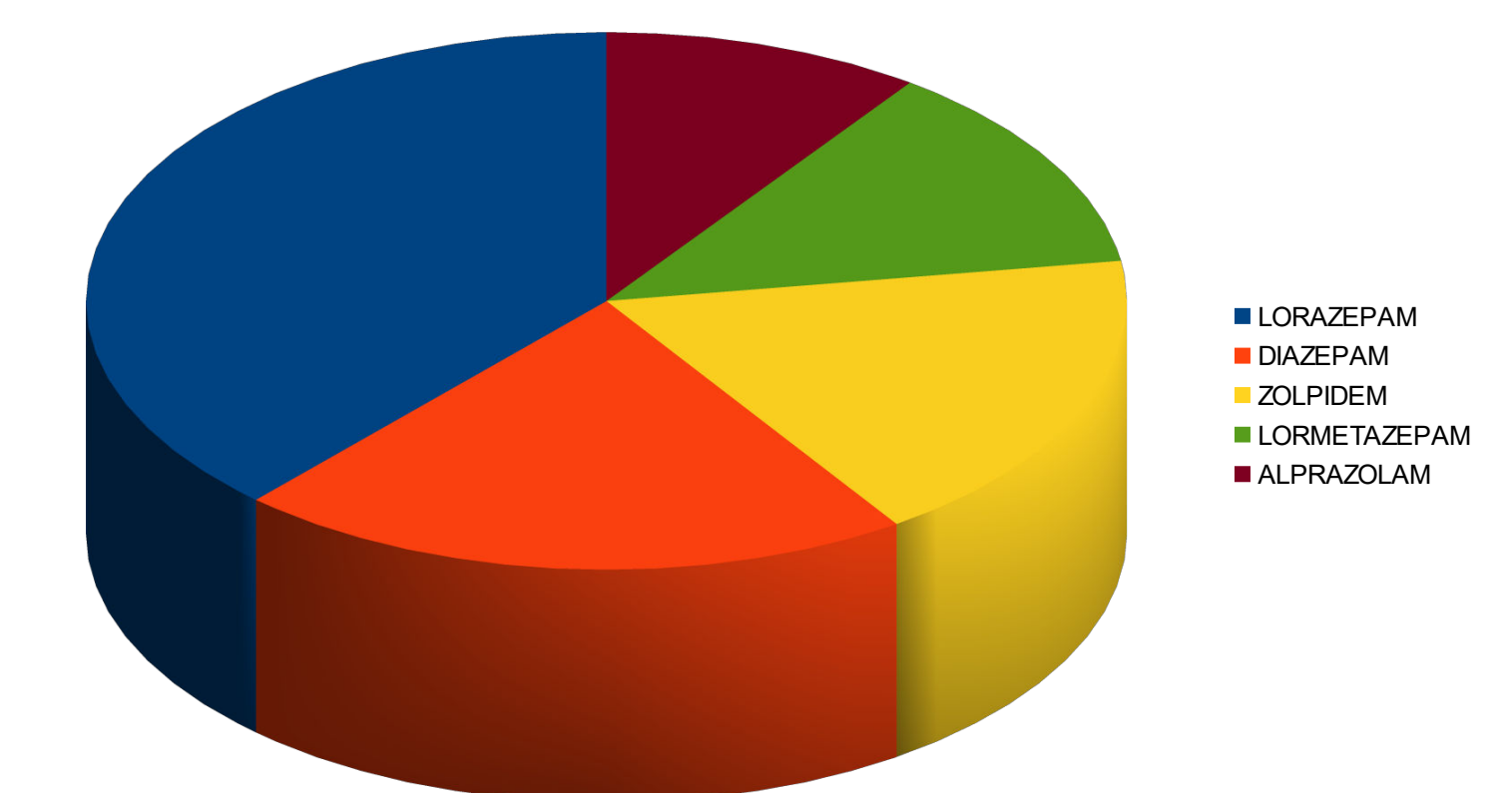


Drugs prescribed for insomnia (T1) & other health disorders (T2)

T1 Drugs	Patients	%
1 LORAZEPAM	4468	36,02
2 ZOLPIDEM	2617	21,10
3 LORMETAZEPAM	1769	14,26
4 DIAZEPAM	1388	11,19
5 ALPRAZOLAM	565	4,55
Total	12404	87,12



T2 Drugs	Patients	%
1 LORAZEPAM	4779	32,02
2 DIAZEPAM	2646	17,73
3 ZOLPIDEM	2246	15,05
4 LORMETAZEPAM	1587	10,63
5 ALPRAZOLAM	1239	8,30
Total	14923	83,74



Consultations vs treatments (F2) & Therapeutical indication (F3)

Without treatment	7082	32,18	Drugs for insomnia	13239	60,16
Consultations > Treatments	2997	13,61	Drugs for other pathology	8766	39,83
Consultations < Treatments	11926	54,19			

REFERENCES

- A. Guía de Práctica Clínica para el Manejo de Pacientes con Insomnio en Atención Primaria. Ministerio de Sanidad y Consumo
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 C. Principles and Practice of Sleep Medicine. Kryger et al. 6th edition . Elsevier, 2018