

# Temazepam

Restoril

Short-term help for a rough stretch of sleep, with a clear review date and a plan for stopping safely.

From Jeffrey Panko, PMHNP-BC's education collection ·

Draft for review · Clinical content has not been revalidated for this website.

TAKE RIGHT BEFORE BED

ALLOW A FULL 7–8 HOURS FOR SLEEP

Use only your prescribed schedule. No extra night-time dose and no added sleep medicine without checking.

## What it is used for

Temazepam treats short-term insomnia: trouble falling asleep or staying asleep. A usual course is brief, often 7–10 days.

If sleep has not improved in that time, call your team. Pain, mood symptoms, sleep apnea or another problem may need its own treatment.

## How it works

It strengthens GABA, a calming brain signal. Sleepiness may start within an hour, but timing varies. It can also slow memory, balance and breathing.

With regular use, it may work less well and your body may adapt to it. Physical dependence can occur even when you follow the prescription.

## What to expect over time

### FIRST NIGHT

Go straight to bed. Watch for morning grogginess.

### WITHIN 7–10 DAYS

Review sleep, daytime function and side effects.

### WHEN STOPPING

Follow your plan; regular use may need a taper.

## Taking your medication

Take it right before getting into bed, only with 7–8 hours available before you must be active. Do not drive or do dangerous tasks after taking it.

Follow the dose and schedule on your prescription. Do not add nights, increase the dose or combine sleep medicines on your own.

Do not stop regular use suddenly. Call before running out and ask for a written taper if needed. Do not skip nights or make homemade mixtures as a taper.

## When to get help

Call 911: slow/stopped breathing, inability to wake, collapse, a seizure, or severe face/throat swelling with breathing trouble.

Call immediately: sleep-driving or other activity you do not remember. Before another dose, get a safe plan that addresses any withdrawal risk from regular use.

Get urgent help: confusion, hallucinations, dangerous agitation or suicidal thoughts; call 911 for immediate danger. Promptly report falls or worsening sedation.

## Early side effects

Morning grogginess, drowsiness, dizziness, headache, tiredness, nausea and trouble concentrating can occur. Some people become restless or irritable.

## Other effects to discuss

Memory problems, poor balance and falls can occur even when you feel less sleepy. A full night does not guarantee safe driving. Report persistent foggy behavior rather than accepting it as normal.

## What to keep track of

Keep a brief sleep and dose record. Track benefit, morning alertness, memory and balance; ask someone you trust about unusual nighttime behavior. There is no routine drug-level test, but your health or longer-term use may call for blood tests.

## Before you start

Discuss breathing problems or sleep apnea, falls, liver/kidney disease, depression, substance use and previous withdrawal. Tell your team about pregnancy or nursing. Late pregnancy exposure can cause newborn sedation or withdrawal. Temazepam enters breast milk and may affect infant alertness, feeding or weight gain. Arrange a treatment and feeding plan; do not suddenly stop regular use yourself.

## Medicines & interactions

### Opioids

Pain medicines and codeine-containing cough products can dangerously slow breathing. Ask about naloxone if opioids are involved; it does not reverse temazepam. Do not stop methadone or buprenorphine yourself.

### Alcohol & other sleep medicines

Avoid alcohol. Do not add another benzodiazepine, zolpidem or other sleep aid unless your prescriber has specifically planned the combination.

### OTC medicines & other sedatives

Nighttime cold products, PM remedies, diphenhydramine, muscle relaxants and gabapentin/pregabalin can increase impairment. Ask your pharmacist before combining them.

### Valproate, cannabis, CBD & changes

Mention these and all supplements. Check before starting or stopping anything; fewer liver-enzyme interactions does not mean no interactions. Do not adjust the dose yourself.

## Everyday tips

Ask about CBT-I, structured treatment for chronic insomnia.

Keep a steady wake time and a calm wind-down routine.

Get into bed after the dose; allow a full night for sleep.

Rise slowly at night and keep the bathroom path clear.

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## Your questions, answered

### What if I miss a dose?

Take it only when ready for bed with a full 7–8 hours still available. Otherwise skip it; never double. If you use it regularly, ask what to do about missed doses rather than assuming they cannot cause withdrawal.

### Will it change my personality?

It can affect memory, mood and behavior. Report fogginess, flatness, irritability or unusual actions. Do not assume every change is harmless or will disappear on its own.

### Is dependence the same as addiction?

No. Dependence means your body has adapted and may need a taper. Addiction involves a different pattern, such as loss of control or use despite harm. Discuss an urge to take more without embarrassment.

### Can I stop when I feel better?

After regular use, ask for a stopping plan first. Withdrawal can include severe anxiety, shaking, confusion or seizures. Sleep may worsen temporarily, but persistent symptoms need reassessment. A taper should be adjusted to you, not rushed.

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## Storage & safety

Keep capsules in their original closed container at room temperature, away from heat and moisture, secure from children, pets and others. Never share; use medicine take-back. For overdose call Poison Control, 1-800-222-1222; call 911 for severe symptoms.

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## A final reminder

Your prescribed plan takes priority.

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## About this information

For general information only; not a substitute for individualized medical advice. This sheet does not cover every risk or interaction. Ask your prescriber or pharmacist before changing how you take this medication.

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## Sources

1. <https://dailymed.nlm.nih.gov/dailymed/fda/fdaDrugXsl.cfm?setid=bc56f7fd-1aaf-48ff-8aa7-d467e59e1015&type=display>
  2. <https://medlineplus.gov/druginfo/meds/a684003.html>
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Educational inclusion does not mean this medication or its indications are treated at this practice. Review the guide for your exact product with your prescriber or pharmacist.

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