

Triazolam

Halcion

Short-term sleep help that needs a full night, careful medicine checks and a clear stopping plan.

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

Avoid grapefruit and alcohol. Do not add a dose during the night or another sleep medicine on your own.

What it is used for

Triazolam treats short-term insomnia in adults. It may help you fall asleep, but its brief action may not cover early-morning waking.

A course is usually 7-10 days. If sleep is not improving, or gets worse, contact your team rather than extending treatment yourself.

How it works

It strengthens GABA, a calming signal in the brain. The same action can slow memory, balance and reactions as well as make you sleepy.

With repeated use, your body may adapt and the sleep benefit may fade. Physical dependence is possible even with prescribed doses.

What to expect over time

FIRST NIGHT

Sleepiness often begins within an hour.

WITHIN 7-10 DAYS

Review sleep, morning function and side effects.

BETWEEN DOSES

Report new daytime anxiety or early waking.

Taking your medication

Take only your prescribed dose right before bed, with 7-8 hours available. Do not take it with or soon after a meal; ask about timing if unsure.

Go straight to bed. Do not drive or do dangerous tasks afterward. A full night does not guarantee that driving is safe the next morning.

Do not increase the dose, add nights or stop regular use suddenly. Call before running out; ask for a written stopping plan if needed.

When to get help

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

Call immediately: sleep-driving or other activity you cannot remember. Before another dose, get a safe plan that also addresses withdrawal risk.

Get urgent help: hallucinations, severe confusion, dangerous agitation or suicidal thoughts. Call 911 for immediate danger.

Early side effects

Drowsiness, dizziness, headache, nausea, nervousness, tiredness and poor coordination can occur. Report falls or symptoms that interfere with daily life.

Other effects to discuss

You may forget events or act differently after a dose. Ask someone you trust to tell you about unusual behavior. Short-acting does not mean free of next-day effects.

What to keep track of

Keep a brief sleep and dose record, including early waking, daytime anxiety, memory and balance. There is no routine drug-level test, but your health or longer use may call for blood tests. Tell your team about any new medicine before taking it.

Before you start

Discuss breathing problems, sleep apnea, falls, seizures, 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. Make an infant-feeding plan before treatment; the label offers pumping and discarding milk during treatment and for 28 hours after the last dose. Do not suddenly stop regular use yourself.

Medicines & interactions

Some combinations must be avoided

Ketoconazole, itraconazole, nefazodone and ritonavir can dangerously raise triazolam levels. Have your pharmacist check the exact medicine before the next dose.

Opioids & other sedatives

Opioid pain/cough medicines, other sleep aids, PM remedies and other sedatives can slow breathing. Ask about naloxone if opioids are involved; do not stop methadone or buprenorphine yourself.

Alcohol, grapefruit & supplements

Avoid alcohol, grapefruit and grapefruit juice. Mention cannabis, CBD, herbal products and supplements; none should be assumed safe to combine.

Other medicines & changes

Antibiotics, antivirals, antidepressants and heartburn medicines such as cimetidine can matter. Check before starting or stopping a medicine; do not adjust triazolam yourself.

Everyday tips

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

Keep a regular wake time and a wind-down routine.

Keep the nighttime bathroom path clear; rise slowly.

Tell medical and dental teams you take triazolam.

Your questions, answered

What if I miss bedtime?

Take it only if ready for bed with a full 7-8 hours still available. Otherwise skip it; never double. If you take it regularly, ask for missed-dose advice because withdrawal is possible.

Can I use it for a flight?

Do not improvise a travel dose. Interrupted sleep, a short flight or needing to be active soon can increase memory and safety problems. Discuss another plan with your prescriber.

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 urges to take more without embarrassment.

What happens when I stop?

Sleep can worsen temporarily, but symptoms are not guaranteed to end after two nights. Regular use may need a gradual taper. Severe anxiety, shaking, confusion or seizures need urgent assessment. Do not make homemade dose mixtures.

Storage & safety

Keep tablets in the 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.

A final reminder

Follow your prescribed plan.

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.

Sources

1. <https://labeling.pfizer.com/ShowLabeling.aspx?format=PDF&id=586>
 2. <https://medlineplus.gov/druginfo/meds/a684004.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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