

Zaleplon

Sonata • a short-acting medicine for trouble falling asleep

Works quickly to help you fall asleep. Its short action does not remove the risks of memory gaps or next-day impairment.

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

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

SHORT-TERM SLEEP AID

CAPSULES: 5, 10 mg • SCHEDULE IV

PAM means positive allosteric modulator: it strengthens GABA's calming action. Short-acting does not mean risk-free.

What it is used for

Treats short-term difficulty falling asleep in adults.

It has not reliably improved repeated awakenings or total sleep time. Tell your team if staying asleep is your main problem.

How it works

Helps GABA, a calming brain messenger, work more strongly at GABA-A receptors.

It acts briefly, but it is not completely gone after an hour or two. You can still have memory gaps, falls or morning impairment.

What to expect over time

AT BEDTIME

It acts quickly. Take it only when ready to get into bed.

NEXT MORNING

Check alertness and balance before driving or other risky tasks.

WITHIN 7–10 DAYS

Call if sleep is worse or not improving; the cause may need reassessment.

Taking your medication

Take exactly the prescribed dose, right before bed or after difficulty falling asleep in bed. Allow a full 7–8 hours for sleep. Do not take a second dose that night.

Do not take it with or right after a meal; food can delay its effect. Do not take extra because it seems slow to work.

Do not drink alcohol on a night you take it. Do not combine it with another sleeping pill. Check other sedating medicines with your prescriber.

When to get help

Stop and call right away: sleepwalking, sleep-driving, eating or other activity while not fully awake, even once. Do not restart it.

Call 911: slow or difficult breathing, inability to wake, collapse, throat swelling or immediate self-harm danger.

Too much medicine? Call Poison Control at 1-800-222-1222 immediately. Report new confusion, unusual behavior or worsening mood promptly.

Early side effects

Drowsiness, headache, dizziness, lightheadedness, tingling or poor coordination may occur. Memory gaps can happen after a dose. Go straight to bed and report troublesome symptoms.

Other effects to discuss

Sleep can briefly worsen when stopping. Dependence and misuse are possible, especially with regular or higher-dose use. Tell your team if you need more for the same effect or find it difficult to cut back.

What to keep track of

Ask someone close to you to mention nighttime events you may not remember. Do not drive or do dangerous work until fully awake and unimpaired. Going straight to bed and avoiding alcohol do not completely prevent unsafe sleep behaviors.

Before you start

Tell your team if you have ever had sleepwalking or another activity you could not remember after zaleplon, zolpidem or eszopiclone. Also mention sleep apnea, breathing trouble, liver/kidney disease, falls, depression, suicidal thoughts, alcohol or drug problems, pregnancy or breastfeeding. This medicine is not for children.

Medicines & interactions

Alcohol and other sedatives

Alcohol, anxiety medicines, other sleeping pills and sedating allergy products can add dangerous impairment. Do not combine without review.

Opioids and gabapentin/pregabalin

Combinations may slow breathing or cause severe sedation. A different drug mechanism does not make the combination automatically safe.

Cimetidine (Tagamet)

This heartburn medicine raises zaleplon levels. Your prescriber may need a lower starting dose.

Other medicines and supplements

Rifampin and some seizure medicines may reduce benefit; other drugs may increase it. Check herbal sleep aids, melatonin and every new product.

Everyday tips

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

Keep a consistent wake-up time and sleep routine.

Plan enough sleep; do not rely on a four-hour window.

Keep follow-ups and review how long treatment is needed.

Your questions, answered

What if I miss a dose?

There is no daytime catch-up dose. Skip it if a full 7–8 hours of sleep is no longer possible. Do not take two doses in the same night.

Can I just stop it?

After brief occasional use, a taper is usually unnecessary. After regular use, ask for an individualized stopping plan. Severe shakiness, confusion or a seizure needs urgent help. Unsafe sleep behavior means stop immediately and call.

Will it change how I act?

It can cause confusion, unusual behavior, memory problems or worsening mood. Report these rather than assuming they are harmless. Short action does not guarantee that you will feel normal the next day.

What about pregnancy or breastfeeding?

The US label does not recommend use during pregnancy or nursing. Contact your prescriber to discuss another plan; small amounts in milk do not prove it is safe for a baby.

Storage & safety

Store at room temperature, protected from light, in a secure place away from children and pets. Never share it. Ask your pharmacist about safe take-back of unused capsules.

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://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=53103d2f-4453-49a8-9e36-888d919879f6>
 2. <https://psycho.farm/guides/zaleplon>
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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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