

**Psychoactive drugs assessed using  
the Leeds Sleep Evaluation Questionnaire**

**Benzodiazepine derivative**

Alprazolam	0.25mg, 0.5mg, 1mg, 1.5mg
Chlordiazepoxide	10mg, 20mg.
Clobazam	10mg, 20mg, 30mg, 40mg
Flunitrazepam	1mg
Flurazepam	15mg 30mg (See Ref 10)
Lorazepam	1mg, 2mg
Lormetazepam	1mg, 1.5mg, 2mg
Lorprazolam	1mg
Midazolam	5mg, 10mg, 15mg, 20mg
Nitrazepam	2.5mg, 5mg, 10mg.
Temazepam	10mg, 15mg, 20mg, 30mg, 40mg, 60mg, 0.4mg/Kg
Triazolam	0.125mg, 0,25mg, 0.5mg.

**Sedative hypnotics (non-benzodiazepine)**

Alpidem	25mg, 50mg, 100mg
Amylobarbitone	100mg
Dichloralphenazone	325mg, 650mg, 1300mg
Dipotassium chlorazepate	15mg
Pregabalin	450mg (see ref 1)
Zolpidem	5mg, 10mg
Zolpidem MR	12.5mg (see Ref 10)
Gabaoxadol	5mg, 15mg (see ref 8)
Zopiclone	3.75 (see Ref 11) 7.5mg

**Antidepressant**

Amitriptyline	50mg, 75mg
Befloxatone	5mg
Citalopram	20mg, 40mg, 60mg
Desipramine	100mg (see Ref 4)
Dothiepin	75mg (see Ref 5), 150mg
Duloxetine	80mg, 120mg (see Ref 4)
Fengabine	600mg, 1200mg
Fluoextine	20mg
Fluvoxamine	100mg, 300mg
Imipramine	75mg
Litoxetine	7.5mg, 15mg, 30mg, 75mg
Moclobemide	200mg, 400mg
Mianserin	20mg
Mirtazepine	15mg, 30mg, 60mg (See Ref 2).
Milnaciprane	12.5 mg, 25mg, 50mg, 100mg
Nomifensine	75mg, 150mg
Paroxetine	20mg, 30mg

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Sertraline	50mg, 100mg, 150mg
Trazadone	50mg, 100mg (see Ref 9)
Venlafaxine	75mg (seeRef 5)

### **CNS stimulant**

Amphetamine	10mg
Caffeine	37.5mg, 75mg, 150mg 4mg/Kg, 8mg/Kg
Dexamphetamine	5mg
Methylphenidate	5mg, 20mg (ref 3)
Pseudoephedrine	60mg, 120mg, 240mg.
Nicotine	2mg, 4mg

### **Antihistamine**

Chlorpheniramine	12mg
Clemastine	2mg
Ebastine	10mg, 20mg 30mg (See Ref 12)
Ketotifen	2mg
Mebhydrolin	150mg
Promethazine	25mg
Triprolidine	2.5mg, 10mg (see Ref 12)

### **Others**

Chlormezanone	200mg, 400mg
Fenfluramine	30mg, 60mg (ref 7)
3-indole pyruvic acid	100mg, 200mg, 300mg
Melatonin	2mg (ref 6)
Pravastatin	40mg.
Simvastatin	40mg
Suriclone	0.1mg, 0.2mg, 0.3mg, 0.4mg

This table is based on the detailed summary tables from Parrott and Hindmarch (1980), Zisapel and Laudon (2003). The doses given are either single (nocte) doses, or total daily doses. Many of these drugs have also been investigated following chronic dosing regimens. Please see these two review papers for further details of those studies. Full details of each primary reference source for every drug are also described in those tables. Several new compounds have been tested since 2003; the references for these are as follows:

Ref 1. (Hindmarch, Dawson and Stanley, 2005)

Ref 2. Versiani, Moreno et al, (2005)

Ref 3. Lee Kim et al (2005)

Ref 4. Chalon, Pereira, et al, (2005)

Ref 5. Trick, Stanley et al, (2004)

Ref 6. Leger, Laudon et al, (2004).

Ref 7: Parrott, Rogers, Brownlie (1980).

Ref.8: Deacon et al (2007)

Ref. 9 Paterson et al (2007)

Ref. 10 Blin et al (2006)

Ref 11 Allain et al (2003)

Ref 12 Hindmarch and Shamsi (2001)

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