

Table 3: Approaches to the Management of Opioid-Induced Somnolence and Cognitive Impairment

Consider primary treatment of contributing factors <ul style="list-style-type: none">• Dose reduction or elimination of nonessential centrally-acting drugs• Correction of metabolic disturbances• Sleep hygiene principles
If analgesia is satisfactory, reduce the opioid dose by 25%-50% and monitor pain and side effects
Consider pharmacologic treatment: <ul style="list-style-type: none">• Psychostimulants (e.g., methylphenidate, modafinil, dextroamphetamine, amphetamine)• Activating antidepressant (bupropion)