

# Orexin Antagonists

Daridorexant (Quiviviq), lumborexant (Dayvigo), and suvorexant (Belsomra) are medications for insomnia that works by reducing orexin, a neurotransmitter that keeps people awake.

## How should I take it?

These should be taken within 30 minutes of bedtime (it peaks after 0.5-2 hours). You do not have to take it every night; it is best taken as-needed. To avoid falls, you should get into bed and remain in bed after taking it. It's best to take on an empty stomach as food delays its onset by 1.5 hours.

How long the effects of these medicines last will depend on the person. When first starting the medicine, make sure you have enough time to get at least 7 hours of sleep.

## Side effects

Like all sleep medicines, suvorexant may impair concentration or driving in the morning. You should monitor how it effects you when first starting it. Sleep-walking behaviors are also possible. Rarely, people may see or hear things (as if dreaming while awake) after taking it. These effects may be worse if the dose is raised.

Sleep medicines can suppress breathing and should be used with caution if you suffer from sleep apnea or a lung disease. Other drugs which can impair breathing, such as alcohol, opioids or other sedatives (e.g. as benzodiazepines) can worsen these effects.

## Abuse and Dependence

These medications are controlled substances (schedule IV), but likely have low abuse potential as studies found that people with addiction had little or no preference for it. So far, no withdrawal problems have been found

when suvorexant is stopped after prolonged use, but more time is necessary to fully research and uncover potential dependence problems.

## Drug Interactions

Diltiazem and other drugs which effect the CYP3A enzyme in the liver can increase suvorexant levels. You can check for full drug interactions at this website (please talk with us about the information you find):

[reference.medscape.com/drug-interactionchecker](http://reference.medscape.com/drug-interactionchecker)

## How to store and dispose of medication

### Key Points

1. Stay in bed after taking these sleep medicines and expect to have time for at least 7 hours of sleep when first starting it.
2. Avoid food within 30 minutes of taking it.
3. Coupons are at [www.quiviviq.com](http://www.quiviviq.com), [www.belsomra.com](http://www.belsomra.com) and [www.dayvigo.com](http://www.dayvigo.com)
4. If your insurer requires authorization, contact us at [auth@moodtreatmentcenter.com](mailto:auth@moodtreatmentcenter.com).

- Keep out of the reach of children.
- Store away from heat, direct light and damp places.
- To safely dispose of unwanted pills: Do not pour in the toilet or sink (it will enter the water supply). To prevent children or pets from eating it, mix unwanted pills in a bag with water and inedible trash (such as coffee grounds) and throw in the garbage.

## Cost and insurance coverage

Suvorexant is not available in generic form and may require prior authorization in order for your insurer to pay for it. Please check with your pharmacist to see if prior authorization is required as this may take time for us to arrange with your insurer. Contact our receptionist (use

the link at moodtreatmentcenter.com) to alert us that you'll need authorization.

There may be coupons at:  
www.quviviq.com, www.belsomra.com and  
www.dayvigo.com.

—Chris Aiken, MD, updated 7/14/2022

**Quick facts**

Brand	Quviviq, Dayvigo, Belsomra
Dose range	25-50mg at night for Quviviq 5-20mg at night for Belsomra 5-10mg at night for Dayvigo
Release date	8/3/2014 for Belsomra 12/31/2019 for Dayvigo 1/10/2022 for Quviviq
FDA-approval	Insomnia



## FREE TRIAL OFFER

**Eligible patients may receive a free 10-tablet trial supply of BELSOMRA**

**Not valid for 5 mg strength.**

**This voucher is not insurance.**

BELSOMRA is a prescription medication. Only your health care provider can decide whether BELSOMRA is right for you.

RxBIN: **610524**

RxPCN: **1016**

RxGRP: **40027003**

ISSUER: **(80840)**

ID: **505689554**

Expiration Date: **03/31/2016**

### How this voucher works:

- This voucher is valid for 1 free 10-tablet trial supply per valid strength of BELSOMRA before the expiration date. Not valid for 5 mg strength.
- To receive your free 10-tablet trial supply of BELSOMRA, take this voucher with your valid signed prescription to any participating eligible retail pharmacy (certain restrictions apply).
- There is no requirement to purchase any product or service to receive your free 10-tablet trial supply of BELSOMRA.
- Restrictions apply. **Please see Terms and Conditions.**

**Please note: The same free trial offer may be available in different forms. For example, you may receive the voucher from your doctor, or you may print it yourself from the product Web site. Regardless of how many vouchers you receive or print, you may only receive 1 free 10-tablet trial supply of BELSOMRA 1 time per valid strength before the expiration date printed on the voucher.**

### Prescriber:

To initiate a free 10-tablet trial supply for an appropriate patient, you should:

- **Read the Prescribing Information before prescribing BELSOMRA.** For copies of the Prescribing Information, call 800-672-6372, visit [belsomra.com](http://belsomra.com), or contact your Merck representative.
- Write a prescription for up to a 10-tablet trial supply of BELSOMRA. No substitutions are permitted. Not valid for 5 mg strength.
- Refills are not required and there are no requirements to purchase any product or service to use this voucher. If you want your patient to continue taking BELSOMRA beyond the free trial period, please write a separate prescription based on your recommended therapy.
- Give the valid signed prescription and this voucher to the patient along with the Medication Guide for BELSOMRA.
- Eligible patients can take this voucher and the signed prescription to any participating eligible retail pharmacy to receive their free 10-tablet trial supply.
- Restrictions apply. **Please see Terms and Conditions.**

### Pharmacist:

- Patient may only use voucher one time per valid strength. Not valid for 5 mg strength. Voucher may not be transferred to another patient.
- There is no requirement for patient to purchase any product or service and refills are not required.
- Please ensure that the medication and strength match the medication and strength on the prescription.
- **Submit claim to McKesson Corporation using BIN No. 610524. For pharmacy processing questions, please call the McKesson Help Desk at 800-657-7613 (8 AM-8 PM ET, Monday-Friday).**
- For any other prescriptions, please use the patient's primary method of payment and a new Rx number.

- By processing this voucher, you agree that no claim for payment or reimbursement may be submitted for the free trial supply to any patient or any third-party payer, including federal or state health care programs (Medicaid, Medicare [including true out-of-pocket expense (TrOOP)], Puerto Rico Government Health Insurance Plan ["Healthcare Reform"] or any other state or federal medical or pharmaceutical benefit or pharmaceutical assistance program), private insurers, and health or pharmacy benefit plans.
- Absent a change in Massachusetts law, effective July 1, 2015, you agree not to process this voucher for residents of Massachusetts.
- McKesson Corporation reserves the right to audit and review all records and documentation relating to the redemption of this voucher and the dispensing of product.
- By accepting this voucher, you agree to the terms hereof.

### Terms and Conditions:

- This voucher is valid for 1 free 10-tablet trial supply of BELSOMRA per valid strength.
- This voucher is not valid for the 5 mg strength of BELSOMRA.
- Limit 1 voucher per patient per valid strength for the duration of the program.
- Free trial offer is valid only for up to a 10-tablet trial supply per valid strength of BELSOMRA. No purchase is necessary. Refills are not required.
- This voucher is not transferable. No substitutions are permitted. This offer cannot be combined with any other free trial, coupon, discount, prescription savings card, or other offer.
- **This voucher is not insurance.**
- **Absent a change in Massachusetts law, effective July 1, 2015, this voucher will no longer be valid for residents of Massachusetts.**
- You must be 18 years of age or older to redeem this voucher. Patient, pharmacist, and prescriber agree not to seek reimbursement for all or any part of the benefit received by the recipient through this offer. The free trial supply cannot be used toward any out-of-pocket costs under any plan (such as true out-of-pocket expense [TrOOP]).
- This voucher can be used only by eligible residents of the United States or the Commonwealth of Puerto Rico at participating eligible retail pharmacies in the United States or the Commonwealth of Puerto Rico. Product must originate in the United States or the Commonwealth of Puerto Rico.
- This voucher is the property of Merck and must be turned in on request.
- **It is illegal to sell, purchase, trade, or counterfeit or offer to sell, purchase, trade, or counterfeit this voucher. Void if reproduced. Void where prohibited by law, taxed, or restricted.**
- Merck reserves the right to rescind, revoke, or amend this offer at any time without notice.
- Data related to your redemption of this voucher may be collected, analyzed, and shared with Merck, for market research and other purposes related to assessing voucher programs. Data shared with Merck will be aggregated and de-identified, meaning it will be combined with data related to other voucher redemptions and will not identify you.
- **Expiration Date: 03/31/2016.**