



# Resource impact summary report

Resource impact

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NICE has recommended Sleepio as a cost saving option for treating insomnia and insomnia symptoms in primary care for people who would otherwise be offered sleep hygiene or sleeping pills.

For people who may be at higher risk of other sleep disorder conditions, such as in pregnancy, or in people with comorbidities, a medical assessment should be done before referral to Sleepio.

More research or data collection is recommended on Sleepio for people who are eligible for face-to-face cognitive behavioural therapy for insomnia (CBT-I) in primary care. This is because there is limited clinical evidence to show how effective Sleepio is compared with face-to-face CBT-I.

Based on a licence fee per year of £45 per user, the health economic assessment shows Sleepio as a cost saving option compared with usual treatment in primary care (sleep hygiene and sleeping pills). This is based on an analysis of primary care resource use data before and after Sleepio was introduced ([Sampson et al. 2021](#)). However, there are uncertainties in the cost modelling because of the limited data available.

The economic evidence shows cash releasing savings result from the reduced use of sleeping pills and other medications such as benzodiazepines and amitriptyline that can be inappropriately used to treat insomnia or insomnia symptoms. Capacity releasing savings result from a reduced number of follow up equivalent appointment slots with GPs and other primary care healthcare professionals.

The company offers primary care training on prescribing Sleepio, technical training and set up.

Due to the variability of current and future use of the treatment options and the uncertainty of potential reductions in healthcare resource interventions a local [resource impact template](#) has been developed to allow users to estimate potential costs and benefits at a local level. The resource impact considers both the cash and non-cash impact of implementing the guidance given that not all the potential savings will be cash releasing.

Services for people with insomnia are commissioned by integrated care systems. Providers of Sleepio are expected to be within primary care.