Benzodiazepines

Patient Education Module

General:

Benzodiazepines are depressant drugs commonly prescribed to relieve anxiety and sleep problems. When benzodiazepines were first introduced, over fifty years ago, they were considered to be wonder drugs. At present, medical science has discovered that this is no longer the case. Recent studies have shown that benzodiazepines actually cause more harm than good and should not be used to treat anxiety or sleeping disorders. Benzodiazepines work by slowing down the activity of the central nervous system and the messages going between the brain and the body. Because of tolerance, benzodiazepines stop working once they have been used for a long period of time. In fact, the only thing that they do, after long-term use, is prevent benzodiazepine withdrawal. There is evidence that reduction or withdrawal from benzodiazepines can lead to a reduction in anxiety symptoms. Benzodiazepines are known by their generic (chemical) or brand name. In each case, the medication is exactly the same, usually made by different companies. Some common benzodiazepines include: Alprazolam, Chloridazepoxide, Clonazepam, Diazepam, Lorazepam, and Temazepam.

Effects of benzodiazepines:

The effects of benzodiazepines may be felt within an hour and can last from hours to several days depending on the type of benzodiazepine (short, intermediate or long acting). Some of the effects that may be experienced with low to moderate doses include: memory loss, difficulty thinking clearly, drowsiness, feeling tired or weak, headache, dry mouth, nausea, vomiting, confusion, depression, blurred vision, dizziness, change in balance, falling over, loss of appetite, diarrhea, and constipation.

Higher doses of benzodiazepines can result in over-sedation and may produce an effect similar to alcohol intoxication. Feelings of jitteriness, excitability, reduced alertness, and headache are often experienced as the effects of large doses wear off. A very high dose of benzodiazepines can cause: slow, shallow breathing, unconsciousness, coma, or death (more likely when taken with other depressants such as alcohol and/or opiates).

Some of the *long-term effects* of benzodiazepines include: memory loss, dementia, difficulty thinking clearly, anxiety, depression, lack of motivation, skin rashes, weakness, fatigue, drowsiness, weight gain, difficulty sleeping or disturbing dreams, irritability, paranoia, aggression. A recent study published in the British Medical Journal suggests that benzodiazepine use may promote the development of Alzheimer's disease.

Sleep architecture can be adversely affected by benzodiazepine dependence. Possible adverse effects on sleep include induction or worsening of sleep disordered breathing and loss of recuperative sleep. Consequently, lack of sleep will make anxiety worse. . A marked increased risk of cancer was found in the users of sleeping pills, mainly benzodiazepines. Due to these increasing physical and mental symptoms from long-term use of benzodiazepines, slowly withdrawing from benzodiazepines is recommended for many long-term users.

Taking benzodiazepines with other depressant drugs: The likelihood of an overdose is increased if benzodiazepines are taken with other depressant drugs such as alcohol, or opiates such as Vicodin (hydrocodone), Percocet (oxycodone), or heroin. It also increases the risk of breathing difficulties.

Possible Harmful Interaction

Grapefruit juice slows the body's normal breakdown of several drugs, including some benzodiazepines, allowing them to build up to potentially dangerous levels in the blood. A recent study indicates that this effect can last for 3 days or more following the last glass of juice. Because of this risk, if you take benzodiazepines, the safest approach is to avoid grapefruit juice altogether.

Driving: Driving ability may be affected by benzodiazepines. You may not notice that your driving is affected until you find yourself in a situation where you need to respond immediately and appropriately such as to avoid an accident.

Tolerance and dependence: Long-term use of benzodiazepines can be physically and psychologically addicting. Tolerance often develops after long-term use requiring larger doses to achieve the desired effect. Physical dependence occurs when a person's body adapts to a drug and becomes used to functioning when the drug is present.

People who are psychologically dependent on benzodiazepines crave the drug and feel as though they can't cope without benzodiazepines. People who take benzodiazepines believe that they must have these medications to control anxiety. In reality, the anxiety that people experience while taking benzodiazepines is, in fact, drug withdrawal that is caused by the benzodiazepines they are taking. Thus, long-term users of benzodiazepines become locked into a vicious cycle. The only way for people to break free from this vicious is for them to undergo a gradual, slow taper over a period of months.

How to Taper Your Benzodiazepine

1. Purchase a pill cutter from your pharmacy.
2. Cut one of your tablets into quarters.
3. Begin tapering your benzodiazepine by reducing your total daily dose by ¼ tablet. Example: If you are taking 3 [three] tablets a day, then begin by taking 1 whole tablet in the morning, take ¾ tablet in the middle of the day, and take 1 whole tablet in the evening.
4. Continue reducing your total daily dose by ¼ tablet each month until you are down to only 1 tablet per day. Once you have reached this point, your doctor will determine your next dose reduction.