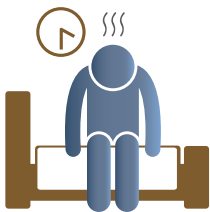


# The Possible Risks of Benzodiazepines

There are more effective and less harmful treatments available for sleep problems, nightmares, PTSD, pain, and anxiety.



Feeling tired or drowsy



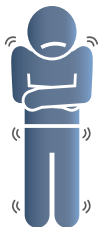
Memory and thinking problems



Depression, mood changes, irritability, anger



PTSD symptoms may get worse



- Becoming physically dependent
- Withdrawal symptoms



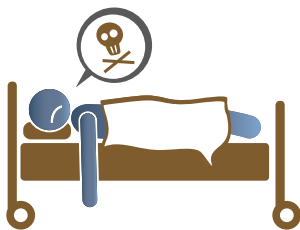
- COPD and sleep apnea may get worse
- Pneumonia



- Car accidents
- Arrest for driving while impaired



- Unsteady walking
- Increased risk of falls, broken bones, or concussion

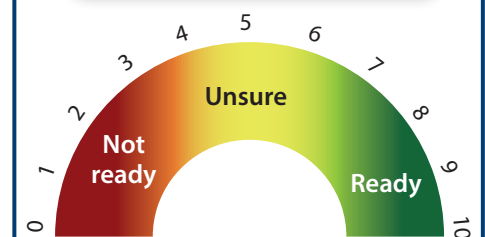


Overdose—especially when combined with alcohol, strong pain medications (opioids), street drugs



- Birth defects
- Baby may need emergency care because of withdrawal symptoms

How ready are you to make a **CHANGE** ?



Readiness scale

The overdose deaths of Heath Ledger, Amy Winehouse, Michael Jackson, and Elvis Presley involved benzodiazepines.

# Discussing benzodiazepine discontinuation



## 1 Assess patient's willingness to discontinue or reduce the dose.

Action	Provider response
Express concern	"I would like to take a minute to discuss my concerns about (benzodiazepine name)."
Provide education on potential risks	"Because of your [age or other risk factors], I am concerned that the use of (benzodiazepine name) may put you at increased risk for [relevant repercussion]."
Assess patient's readiness to begin taper process	<p>"What do you see as the possible benefits of stopping or reducing the dose? What concerns do you have about stopping? What can we do together to help address these concerns?"</p> <p>If patient indicates no desire to change, provide information handout.</p> <p>"What would be a reason you might consider changing from (benzodiazepine name) to (name of recommended alternative)?"</p>
Negotiate plan	<p>"What changes are you willing to make to meet this goal?"</p> <p>"Would you be willing to talk to one of my colleagues to learn about options to support your changes?"</p>

## 2 Agree on timing and discuss symptoms that can occur with benzodiazepine taper.



### Inform patients:

- Symptoms of withdrawal are only temporary.
- Slowly tapering can decrease withdrawal symptoms.
- If distressing symptoms are experienced, the taper can be adjusted.

## 3 Provide written instructions for a structured medication taper. Be prepared to slow the taper if the patient reports significant withdrawal symptoms.

### SHORTER TAPER

- Gradually reduce total dose by 50% over the first 4 weeks (e.g., 10–15% decrease weekly)
- Maintain on that dose (50% original dose) 1–2 months, then
- Reduce dose by 25% every 2 weeks

### LONGER TAPER

- 10–25% every 2–4 weeks

### Tips for tapering

- Begin the taper with the benzodiazepine prescribed.
- If a patient is unable to tolerate tapering a shorter-acting medication, switch to a long-acting option (e.g., diazepam for younger adults, lorazepam for adults age 65 and over).
- A slower or longer taper schedule is recommended in most cases.
- The rate of benzodiazepine taper should ultimately be determined by the patient's symptoms.



For a taper calculator and other resources, go to <https://dvagov.sharepoint.com/sites/vhaacademicdetailing>

**REFERENCES:** 1. Taylor D, Paton C, Kapur S. *The Maudsley Prescribing Guidelines in Psychiatry 12th Edition*. West Sussex: Wiley Blackwell; 2015. 2. Veterans Health Administration, Department of Defense. *VA/DoD Practice Guideline for the Management of Substance Use Disorders (SUD)*. Version 4.0–2021. 3. Vicens C, et al. Comparative efficacy of two interventions to discontinue long-term benzodiazepine use: cluster randomized controlled trial in primary care. *Br J Psychiatry*. 2014;204(6):471–479. 4. Vikander B, et al. Benzodiazepine tapering: A prospective study. *Nord J Psychiatry*. 2010 Aug;64(4):273–82. 5. Ogbonna C, Lembke A. Tapering patients off of benzodiazepines. *Am Fam Physician*. 2017 Nov 1;96(9):606–610. 6. Roy-Byrne PP, Hommer D. Benzodiazepine withdrawal: overview and implications for the treatment of anxiety. *Am J Med*. 1988;84(6):1041–1052. 7. Perry PJ, Alexander B, Liskow B, et al. *Psychotropic Drug Handbook, Eighth Edition*. Philadelphia, PA: Lippincott Williams & Wilkins; 2006. 8. Ashton CH. Benzodiazepines: how they work and how to withdraw. Newcastle University. <https://benzo.org.uk/manual>. Published 2002. Accessed March 15, 2021.

See *Re-evaluating The Use of Benzodiazepines Clinician's Guide and Quick Reference Guide for additional details on risks and taper samples*.

This reference guide was created to be used as a tool for VA providers and is available from the Academic Detailing SharePoint. These are general recommendations only; specific clinical decisions should be made by the treating provider based on an individual patient's clinical condition.