

Information About Benzodiazepines

What are benzodiazepines?

Benzodiazepines are psycho tropic drugs - drugs that affect the mind and are mood altering. They are commonly known as minor tranquillisers and are prescribed mainly for anxiety and sleeping problems. In the past benzodiazepines were thought to be harmless and non-addictive. However, many studies have reported that they are actually drugs of dependence and potentially lethal when taken in overdose quantities.

Benzodiazepines available in Australia

A large number of benzodiazepines are available on prescription in Australia. The most common ones are Valium, Serepax, Temazepam, Rohypnol and Xanax. Others are listed in the following table.

Generic Name	Brand Name
Alprazolam	Xanax Kalma Ralozam
Bromazepam	Lexotan
Clobazam	Frisium
Clonazepam	Rivotril
Diazepam	Valium Ducene Antenex
Flunitrazepam	Hypnodorm Rohypnol
Lorazepam	Ativan

Generic Name	Brand Name
Nitrazepam	Mogadon Alodorm
Oxazepam	Serepax Murelax Alepam
Temazepam	Euhypnos Nocturne Nomapam Normison Temaze Temtabs
Triazolam	Halcion

How do benzodiazepines work?

Benzodiazepines are:

- absorbed in the stomach and small intestine, and metabolised by the liver (when taken orally)
- highly fat soluble and accumulate in fatty tissue
- excreted through sweating, saliva, urine, faeces and breast milk.



The unwanted effects

Even though benzodiazepines relieve the symptoms of anxiety and insomnia in the short-term, they do not cure the problem and have a number of unwanted effects. They are strong drugs which in many instances produce either dramatic or long-term side effects which may render the individual incapable of functioning at a normal level.

The unwanted side effects include things such as:

- drug dependency
- impaired memory and concentration
- emotional 'anaesthesia' (being unable to respond normally and feeling isolated or 'cut off' from people and feelings)
- depression
- loss of balance
- impaired motor coordination
- mood swings
- irritability and outbursts of rage.

Benzodiazepines, pregnancy and the newborn child

Benzodiazepines freely cross the placenta and appear in the foetus. Although studies regarding foetal development risk are inconclusive, it is known that when moderate to large amounts of benzodiazepines are taken continuously during most of the pregnancy, withdrawal symptoms can be experienced by the baby. These withdrawal symptoms consist of respiratory distress, irritability, disturbed sleep patterns, sweating, feeding difficulties and fever.

High benzodiazepine use during the later stages of pregnancy can lead to floppy infant syndrome. A newborn child with floppy infant syndrome has poor muscle tone and sucking response. Continuous benzodiazepine use during pregnancy and administration of high doses during delivery should be avoided.

Pregnant women using benzodiazepines should withdraw slowly in consultation with expert, specialised medical assistance. Contact TRANX or the Chemical Dependency Unit of the Royal Women's Hospital for specialist advice on pregnancy, birth and benzodiazepine withdrawal.



Combining benzodiazepines with other drugs

Alcohol

Using benzodiazepines and alcohol together can be dangerous. This is because alcohol:

- heightens the effects of benzodiazepines
- can cause amnesia if combined with benzodiazepines
- when combined with benzodiazepines, decreases the protective upper airway reflexes, which increases the risk of inhaling vomit.

Methadone

An estimated 30 percent of methadone users use benzodiazepines. Many people on methadone programs are using benzodiazepines long-term (which may have been prescribed or obtained without prescription) to alleviate symptoms of discomfort or heighten the effect of methadone. It is common for methadone users to be dependent on benzodiazepines.

The combination of using benzodiazepines and methadone increases the effects of the drugs and is dangerous because of the risk of overdose.

Other drugs

Benzodiazepines are sometimes prescribed for psychiatric disorders in conjunction with an antipsychotic drug, in order to enhance the effect of the antipsychotic.

The effect of benzodiazepines may be increased when combined with:

- antipsychotic drugs
- antidepressant drugs
- analgesics (pain relievers) containing Codeine
- anticonvulsants
- antihistamines
- oral contraception.

The effect of benzodiazepines is decreased when combined with appetite suppressers and asthma drugs because of the stimulant effect of these drugs.

Be alert!

Benzodiazepines are very addictive. At least half of the people regularly taking low doses of benzodiazepines on a long-term basis will develop a physical tolerance to the drug and become dependent.

As the lack of recognition of this dependency is common, it often goes undetected or is misdiagnosed. Be alert for dependency, even though it may not be initially identified as a problem.



Dependency

Drug dependence usually has physical and psychological elements. People who are dependent on benzodiazepines will:

- crave for the drug
- feel unable to cope without the drug
- find it extremely difficult to stop taking the drug
- find that the drug no longer has the same effect and will increase the dose or drink alcohol to achieve the same effect
- need the drug to function normally
- have withdrawal symptoms if the drug is not cut down or stopped.

What causes dependency?

Benzodiazepine dependence and tolerance can occur very quickly and can be caused by:

- any drug in the benzodiazepine group
- continuous use (as little as two weeks)
- low doses taken continuously
- intermittent but regular use (every three to four days).

Some people taking benzodiazepines don't realise that they are dependent until they stop a dose or try to cut down and experience withdrawal symptoms.

Not everyone who takes benzodiazepines on a daily and long-term basis, will become physically dependent. People who don't become dependent won't have withdrawal symptoms when reducing or stopping their benzodiazepine use. Dependence cannot occur if benzodiazepines are taken infrequently (less than once or twice per month).

Information

People often express a strong need for detailed information about withdrawal. Providing information usually allows people to make informed decisions about pill reductions. In particular, make sure you provide an overview of recovery possibilities - this does not mean providing a program and insisting adherence to it, it means encouraging the person undergoing withdrawal to take control of decision making.

Alcohol

People reducing their benzodiazepine intake should be encouraged to totally abstain from alcohol. The key concerns for people drinking alcohol whilst taking benzodiazepines are:

- the combined effect when alcohol and benzodiazepines are used together increases the sedative effect on the person
- the fact that it has been reported by people that drinking alcohol during benzodiazepine withdrawal worsens the withdrawal symptoms
- the danger of the alcohol intake increasing as benzodiazepine intake decreases.

If a person is unable to abstain from alcohol and appears to be dependent on alcohol, you may need to refer him or her to an alcohol and drug counselling agency.



Exercise

Gentle exercise, such as walking or swimming, should be undertaken daily when someone is reducing his or her benzodiazepine intake. Encouraging a person suffering from agoraphobia (a common withdrawal symptom) to get out for a walk will help prevent a fear of leaving the house developing. People who are usually very active and use sport as their preferred method of relaxation need to be aware that muscle spasms are common during withdrawal and that they mat feel exceptionally sore or tired after their usual sporting activity.

Finding the balance is important for each individual. Exercise has been shown to lift depression and induces a relaxed state of body and mind. This can be useful for people who find it difficult to use other types of relaxation techniques. Exercise helps to increase the circulation which assists in the elimination of the drug from the body.

Diary

A diary can be a useful tool for understanding the withdrawal process. Keeping a diary of progress gives people a sense of a goal to reach. It is also a useful vehicle for expressing and working through emotional issues. Because short-term memory loss is a common problem in withdrawal, many people find a diary useful to help remember what medication they take, symptom changes and other important things.

Massage

Massage is beneficial for people going through the withdrawal process because it relaxes the muscles which, during withdrawal, become very tense and sometimes spasm. Massage also improves the circulation which assists in eliminating the drug from the body. Additionally, massage is a useful relaxation technique. Counsellors should be able to offer to massage the head, neck and hands of people attending the centre for benzodiazepine withdrawal support.