

# Benzodiazepines & Addiction

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# Objectives

- 1. Discuss Benzodiazepine usage in the US
- 2. Discuss Benzodiazepines & Addiction Causes
- 3. Where do we go from here?

- Benzodiazepines are depressants that produce sedation and hypnosis, relieve anxiety and muscle spasms, and reduce seizures.
- The most common benzodiazepines are the prescription drugs Valium®, Xanax®, Halcion®, Ativan®, and Klonopin®. Shorter-acting benzodiazepines used to manage insomnia include estazolam (ProSom®), flurazepam (Dalmane®), temazepam (Restoril®), and triazolam (Halcion®). Midazolam (Versed®), a short-acting benzodiazepine, is utilized for sedation, anxiety, and amnesia in critical care settings and prior to anesthesia.

<https://www.dea.gov/factsheets/benzodiazepines>

- Benzodiazepines are prescribed to over 5% of the U.S.
- Benzodiazepine prevalence among adults  $\geq 65$  is highest at 8.6%
- The lack of information about misuse among older adults is particularly striking because they are prescribed benzodiazepines at the highest rates, are most at-risk of related adverse events, and are using alcohol and other substances more than prior cohorts
- Benzodiazepine use in the U.S. is higher than previously reported and misuse accounted for nearly 20% of use overall. Use among adults 50-64 has now exceeded use by those  $\geq 65$ . Clinicians should monitor patients also prescribed stimulants or opioids for benzodiazepine misuse. Improved access to behavioral interventions for sleep or anxiety may reduce some misuse

- The National Survey of Drug Use and Health (NSDUH) collected information on past-year (2017) use (i.e., taken as prescribed) and misuse. Respondents were asked about the specific manner of misuse: without a prescription; in greater amounts or more often than prescribed; longer than prescribed; or any other use other than as prescribed. Next, they were asked about reasons for misuse: “to relax”, “to experiment”, “to get high”, “for sleep”, “for emotions”, “to counter the effect of another drug”, because they were “hooked”, or another reason. Finally, respondents were asked about the source of medication for misuse (e.g., their clinician or a friend or relative).

- **How are they abused?**

- Abuse is frequently associated with adolescents and young adults who take the drug orally or crush it up and snort it to get high. Abuse is particularly high among heroin and cocaine users. Additionally, opioid users often co-abuse benzodiazepines to enhance euphoria.

- **What is their effect on the body?**

- Benzodiazepines slow down the central nervous system and may cause sleepiness and relaxed mood. Benzodiazepines are associated with amnesia, hostility, irritability, and vivid or disturbing dreams.

- **What are their overdose effects?**

- Extreme drowsiness, confusion, impaired coordination, decreased reflexes, respiratory depression, coma, and possible death. Overdose effects of concomitant use of benzodiazepines and opioids include:  
Profound sedation, respiratory depression, coma, and death.

# Where Do We Go from Here?

- Despite risks of abuse and diversion, BZDs are a safe and efficacious class of medications and continue to have a place in therapy. Lawmakers and health care professionals will be tasked with reducing abuse while maintaining accessibility for appropriate patients. Reductions in inappropriate prescribing rather than all prescribing should be emphasized and encouraged. Education is vital. Health care professionals must be knowledgeable about abuse patterns and diversion trends. It is imperative that prescribers and pharmacists educate patients not only on the risks to themselves, but also the risks to others, to reduce medication sharing. It is critical to identify BZD abuse risk factors prior to prescribing, use safer alternatives, and make appropriate interventions to combat ongoing abuse. Increases of substance abuse treatment programs as well as funding for these programs in the future will be an essential component in battling the growing problem.

# References

- <https://www.webmd.com/mental-health/addiction/benzodiazepine-abuse>
- <https://www.dea.gov/factsheets/benzodiazepines>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC6007645/>
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