

# THE BackPages

## Viewpoint

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### **PRESCRIPTION BENZODIAZEPINES AND Z DRUGS — THE HIDDEN STORY**

It has long been known that long-term use of prescription benzodiazepines can have a detrimental effect on patients' health.<sup>1</sup> What is still unknown is the actual number of patients who are prescribed repeat prescriptions for longer than the recommended usage time of 2–4 weeks.<sup>2</sup> Surveys of general practices show that on average there are over 180 long-term prescribed users per general practice.<sup>3</sup> Up to 1 million people in the UK could be affected. It is important with the setting up of the new strategic health authorities, and the associated 152 primary care trusts, that these numbers be clarified. The first port of call for patients who tended to be prescribed benzodiazepines is cognitive behavioural therapy, psychology, and so on, but with waiting lists for psychological therapies in most areas either exceeding 9 months, or non-existent, due to the lack of therapists, there is an urgent need for 10 000 extra therapists, 5000 of whom should be clinical psychologists, and 5000 psychological therapists.<sup>4</sup>

Patients who have become dependent are offered little guidance or help in considering withdrawal or reduction from benzodiazepines. In fact, sometimes they receive less help than 'street users'.<sup>5</sup>

Doctors see very few people who wish to withdraw from prescription benzodiazepines. In some cases where help is offered by doctors it is not taken up by the patients. Equally, few patients are given enough information on the long-term effects that this type of medication can have on their health, not enabling them to make an educated decision as to its continued use. This becomes a vicious circle, whereby doctors with very little experience in handling withdrawal, are failing to undertake this type of work.

Having worked through the the various stages of getting help for patients dependent on prescription benzodiazepines, experiencing first-hand the problems trying to obtain relevant information, and witnessing the lack of support from within the health service, I am surprised that the experience of carers, like myself, hasn't been taken on board. It is the carers who live with this problem on a daily basis and who see the effects it has not only on the patient, but also the family. Many doctors do not understand the scale and depth of problems that people with benzodiazepine dependency

experience. One must always bear in mind that this medication was given to help the patient, which it has done in many cases, but in many other cases it has made their quality of life worse. As the old adage goes 'Would you trust this man'?

Many patients believed they could trust their GP implicitly, but over-prescribing of benzodiazepines has undermined this trust. Doctors must hold their hands up and accept that they have contributed to this problem. Even younger GPs naively under-estimated the addictive potential of Z-drugs, as their predecessors did with benzodiazepines, and with barbiturates before that. Now is the time to stand shoulder-to-shoulder with users, carers, and voluntary groups, as this is too big a problem to be left to addiction and other specialist services. Benzodiazepine dependency began in primary care, and primary care is where solutions must be found.

If we accept that not all people on benzodiazepines become dependent, then it may well be possible that one-third of patients could be weaned off them with reasonable ease, and a minimum amount of help. This would reduce the numbers on repeat prescriptions by some 300 000. If we could then also reduce the overall total by another third, we would be left with only 300 000 people on long-term prescriptions. It may well be that a great deal of help will be needed for this latter group. There will be people unable to withdraw, and no one should be forced to, and there are likely to be a number who will need support throughout the rest of their lives. BCNC (Benzodiazepine Co-operation Not Confrontation), have set up a website at [www.bcnc.org.uk](http://www.bcnc.org.uk) aimed at trying to work with doctors to solve this problem. It has an article by a carer, rich in personal experience.

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