Do you know the risks of your prescription?

July 11th is World Benzodiazepine Awareness Day
@worldbenzoday

HAVE YOU OR SOMEONE YOU LOVE BEEN PRESCRIBED A BENZODIAZEPINE OR Z-DRUG?

What is a benzodiazepine? They are tranquilizers such as **Ativan (lorazepam), Xanax (alprazolam), Klonopin (clonazepam), Valium (diazepam)**, and others.
The Z-drugs, with similar effects to benzodiazepines, include **Ambien/Ambien CR (zolpidem), Lunesta (eszopiclone), Sonata (zaleplon)**, and **Imovane/Zimovane (zopiclone)**.

WHAT'S THE ISSUE? Since the 1960s, doctors have been routinely prescribing benzodiazepines and Z-drugs for anxiety, stress, sleep, and other problems. Over time it has become clear that these drugs are not as safe as they were marketed to be, yet they continue to be overprescribed, often without informed consent about the risks and dangers of taking them long term. Available estimates are disparate, due to lack of much-needed research, indicating that anywhere between 20-90% of people prescribed a benzodiazepine long-term will experience a withdrawal syndrome. How long does a patient have to take a prescribed benzodiazepine before they are at risk for physical dependence and withdrawal? This cannot be predicted, as it varies from person to person, however, FDA information for Ativan states withdrawal symptoms can be experienced by some after as little as one week of use. Currently, there are no tests to determine prior to prescribing which patients will experience physical dependence and withdrawal and which will not, so guidelines recommend that benzodiazepines and Z-drugs should only be taken in the lowest possible dose, very intermittently or, if use is successive, for 2-4 weeks or less, including the tapering off time.

WHAT DO I NEED TO KNOW?

- Physical dependence is a physical problem resulting from continued exposure to a drug. even when taken as prescribed. It is different from addiction/abuse. Anyone taking a prescribed benzodiazepine or Z-drug is at risk for physical dependence and withdrawal. You do not have to abuse them to experience problems; **most people harmed take them exactly as prescribed**.
- Long-term use (past 2-4 weeks) can actually worsen existing or cause new-onset anxiety, depression, panic, agoraphobia, etc.
- People who are already physically dependent on long-term benzodiazepines and/or Z-drugs should **NOT** be forced off of their prescription against their will or faster than they feel they can discontinue; those who are often do badly.
- **It is dangerous to abruptly stop ("cold-turkey") or over-rapidly reduce these drugs** (may cause seizures, psychosis, suicide, or death in some cases; also may increase risk for protracted withdrawal); they must be slowly tapered at a rate/speed decided upon as tolerable by the patient.
- Beware that medical professionals may be ill-informed about BZ physical dependence, slow tapering protocols, and withdrawal, but their cooperation may be necessary. Please show them *The Ashton Manual* after reading it yourself (benzo.org.uk/manual)

HOW TO LEARN MORE? Pull off a tab below and visit our website at **w-bad.org** for more information and guidance.

www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org	www.w-bad.org