

Treatment of Anxiety

- 1st line: non-pharmacological interventions e.g. *The Good Relaxation Guide* & online cognitive behavioural therapy (CBT) resources (see below).
- Benzodiazepines are only indicated for the **short-term relief** of anxiety that is **severe, disabling** or causing **extreme distress**.
- Prescribe for the **shortest possible duration** to a maximum period of **2 - 4 weeks**.
- 1st line pharmacological treatment of generalised anxiety disorder (GAD): SSRI (or SNRI). Refer to individual SmPCs for licensed indications and dosing.
- Benzodiazepines should **not** be considered for GAD except as a short-term measure during crises.

Treatment of Insomnia

- 1st line: non-pharmacological interventions e.g. *The Good Sleep Guide*.
- Underlying cause of insomnia should be identified & treated before prescribing a BZRA.
- BZRA are only indicated when insomnia is **severe, disabling** or causing **extreme distress**.
- Prescribe for the **shortest possible duration**, for a period of a **few days to 2 weeks**.



Z-drugs

- Avoid long-acting benzodiazepines (e.g. flurazepam & nitrazepam) due to next day residual effects.
- Lack of evidence that z-drugs (zolpidem & zopiclone) offer clinically significant differences over shorter acting benzodiazepine hypnotics.
- Zolpidem (short half-life) should only be prescribed for **sleep onset insomnia**.
- Zopiclone (longer half-life) may be prescribed for continuous sleep disturbances however it may have noticeable hangover effects.

BZRA Safety Concerns

Side-effects of BZRA

- Forgetfulness, confusion
- Irritability
- Aggression & paradoxical disinhibition
- Impairment of judgement & dexterity
- Psychomotor impairment & increased risk of motor vehicle accidents & falls

Side-effects can largely be prevented by prescribing **LOW DOSES** & courses of **SHORT DURATION**



Caution in **OLDER PEOPLE** as side-effects are likely to be enhanced e.g. sedation, memory impairment. **REVIEW REGULARLY.**

Associated problems

- Misuse
- Diversion
- Driving impairment
- Morbidity & mortality related to overdose
- Dependence
- Tolerance
- Withdrawal

Dependence is a significant risk with BZRA use for > 1 month.

Tolerance to benzodiazepine hypnotic effects develops rapidly (within days/weeks of regular use) while tolerance to the anxiolytic effects develops more slowly (over months).

Withdrawal syndrome may develop at any time up to 3 weeks after stopping a long-acting benzodiazepine but may occur within a day in the case of short-acting agents.

BZRA Prescribing Tips

Prescribing BZRA for the 1st time

- ✓ Consider **other strategies**: relaxation techniques, exercise, *The Good Sleep Guide*
- ✓ **Delay 1st prescription** or **limit number of days**
- ✓ Initiate with the **lowest** recommended dose (& adjust according to response)
- ✓ Prescribe for the **shortest** possible duration
- ✓ Use **phased dispensing** where appropriate
- ✓ **Record** all details of prescription & **duration** of treatment

Prescribing BZRA for dependent patients

- ✓ Issue **small quantities** at a time
- ✓ **Review** regularly, usually monthly
- ✓ Ensure all patients are made aware of the **risks of long-term use** & document
- ✓ Encourage all patients with dependency to **withdraw** & offer detoxification programmes at regular intervals

Information on **deprescribing BZRA** is available in MMP guidance



Counsel patients that their ability to drive safely may be reduced by BZRA. Refer patients to the Road Safety Authority leaflet 'Medicines and driving'.

Useful Non-pharmacological Resources

Non-pharmacological supports should be used before & in addition to BZRA prescribing.

The Good Sleep Guide & *The Good Relaxation Guide* are available: www.hse.ie/yourmedicines

Online CBT Resources

Aware: Life skills www.aware.ie/education/life-skills-online-programme/ (free of charge)

Mood Gym Programme www.moodgym.com.au/

Wellbeing <http://wellbeing-glasgow.org.uk> (free of charge)

Living Life to the Full www.lttf.com/ (free of charge)

Self help Booklets available at <http://web.ntw.nhs.uk/selfhelp/> (free of charge)

References: •BNF August 2020. •SmPCs: individual BZRA. •Department of Health. Benzodiazepines: Good Practice Guidelines for Clinicians (2002). •All Wales Medicines Strategy Group. Educational Pack: Material to Support Appropriate Prescribing of Hypnotics and Anxiolytics across Wales (2016). •NICE Guidance CG113: Generalised Anxiety Disorder and Panic Disorder in Adults: management (2019). •NICE TA77: Guidance on the use of zaleplon, zolpidem and zopiclone for the short-term management of insomnia (2004).

Abbreviations: BZRA: Benzodiazepines and z-drugs CBT: Cognitive behavioural therapy GAD: Generalised anxiety disorder SmPC: Summary of Product Characteristics SNRI: Serotonin noradrenaline reuptake inhibitor SSRI: Selective serotonin reuptake inhibitor