



UW PACC

Psychiatry and Addictions Case Conference

UW Medicine | Psychiatry and Behavioral Sciences

HOW DO I HELP PEOPLE TAPER OFF BENZODIAZEPINES?

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OBJECTIVES

- Understand epidemiology of benzodiazepine prescribing and use
- Discuss how to identify & engage patients in benzodiazepine taper
- Discuss common challenges during taper

WHO'S TAKING RX BENZODIAZEPINES?

- 5% of general population gets prescribed
- Women > men
- Highest rate of prescription (11.9%) among 80 yo women
- **Duration:** Long-term prescription (120+ days of Rx) increases with age – 1/3 of older adults
- **Onset:** 75% of prescriptions are short-acting benzos

WE ALREADY KNOW ABOUT THE RISKS OF LONG TERM BENZODIAZEPINE USE...

- Sedation
- Accidents and injuries
- Cognitive decline
- Use disorder
- Overdose risk
- But how do we have the conversation with a patient?

CASE 1

- 52 yo F comes to your office for an intake. She states she's been prescribed alprazolam 1mg TID prn for anxiety by another provider. She can't reach the provider anymore and wants you to write her a script so she does not go into withdrawal. She states this is the only thing that's worked after trying multiple meds over the years.

**WHAT LEADS YOU TO CONSIDER/BRING
UP BENZO TAPER IN A PATIENT?
RED FLAGS/CUES THAT YOU'VE SEEN?**

HOW TO ENGAGE PATIENTS?

**WHAT MAKES YOU HESITANT TO DISCUSS
TAPERING?
IS THERE EVER A TIME TO NOT DO THE
TAPER?**

CASE 2

- 25 yo M comes to your office asking for your help coming off of a “research chemical called clonazepam” he’s been buying off the streets. He’s been using for the past 2 years, currently 8mg/day. Has been inpatient twice and not interested in that option. He denies any other substances.

GENERAL GUIDELINES IN TAPER

- Gradual dose reduction in 10-25% increments
- Taper length:
 - No consensus on how fast – every 2 weeks vs up to every 3 month
 - Depends on how long the person has been using benzos: 15-30% develop withdrawal symptoms after only 4-6 weeks of use
- Reduce in smaller increments when nearing the end
- Consolidate to 1 benzo
- Choose long-acting
- Schedule doses instead of using prn's
- **What to watch out for during taper?**

**OTHER THAN REDUCING BENZOS, HOW
ELSE CAN THE PATIENTS BE SUPPORTED?
ANY OTHER MEDICATIONS OR THERAPY?**

TAKEAWAYS

SUMMARY

- Start having conversations with your patients on long-term benzodiazepines now... ideally, before red flags.
- Patient buy-in important.
- Consolidate to a single long-acting benzo, 15-20% reduction over a few weeks based on duration of usage prior.
- Watch out for withdrawal symptoms during taper.

THANK YOU!
QUESTIONS? COMMENTS?