

**Research Project** 

Prize Reinforcement Contingency Management for Cocaine Dependence: a 24-week randomized controlled trial

## Third-party funded project

**Project title** Prize Reinforcement Contingency Management for Cocaine Dependence: a 24-week randomized controlled trial

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## Organisation / Research unit

Bereich Psychiatrie (Klinik) / Erwachsenenpsychiatrie (Lang)

Department

Project start 01.04.2008

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## Status Completed

Summary Benzodiazepines are often prescribed in medical practice. Main indications are insomnia, anxiety, tension, and epileptic seizures. Petitjean and colleagues assessed the prevalence of benzodiazepine use in the Swiss adult population as well as benzodiazepine prescription patterns of physicians in domiciliary practice. Results from this recently published study (2007) demonstrated, that more than half (56%) of all patients with benzodiazepine prescriptions had repeated prescriptions within a six-month period and in lower than the recommended doses. The main objective of the present study is to analyze benzodiazepine prescriptions and aside this, other medications (s. a. antidepressants, antirheumatics, antihypertensives). The aim is to obtain more information about benzodiazepine prescription patterns in primary care practice. By analyzing concomitant medical prescriptions aside prescribed benzodiazepines, prescription patterns could give us information about the amount of somatic and psychiatric morbidities in long-term and ultra-long-term benzodiazepine users. The working hypothesis of the present study is to assess morbidity aside benzodiazepine prescriptions. Thus, to find out whether there is a relation between morbidity and long-term benzodiazepine prescription. In a retrospective, population-based survey, we will analyze complete pharmacy records over a six month period in three parts of Switzerland (German, French and Italian part). key words: Prescription data, prescribing patterns, long-term prescribing of benzodiazepines, psychotropic drugs, benzodiazepine use, benzodiazepine abuse, benzodiazepine dependence, domiciliary practice, comorbidity, morbidity, concomitant prescription

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