

Research Project

Withdrawal from benzodiazepine or Z-drug dependence

Project funded by own resources

Project title Withdrawal from benzodiazepine or Z-drug dependence

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Organisation / Research unit

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Status Completed

Benzodiazepines (BZD) are psychoactive drugs prescribed as anxiolytics, sedatives, hypnotics, anticonvulsants, and/or skeletal muscle relaxants since the 1960/70s. Due to this wide range of indications and their low toxicity compared to other drugs, BZD became one of the most commonly used and misused drug class worldwide. BZD are potentially addictive. A very common form of BZD dependence is iatrogenic i.e. patients have been prescribed BZD to treat underlying conditions and then progress to a long-term use (>4-8 weeks) with optional dose increase. In 2014, the Swiss Federal Office of Public Health published recommendations for a restricted prescription and dispense of BZD in daily practice. The overall objective of BZD withdrawal aims at total abstinence, as discontinuation mostly improves psychomotor and neurocognitive functioning, particularly in the elderly. Outpatient withdrawal has proven feasible. Except for a slow dose reduction, recommendations are vague and the optimal rate of tapering is unclear. The success of pharmacological interventions for BZD dependence management is poor to moderate. Nevertheless, the outcome of successful BZD withdrawal is gratifying, both in terms of improved functioning and economic benefits. The aims of the project is to develop a new model of BZD withdrawal with multiprofessional collaboration (physician, community pharmacist, psychotherapist), a novel technolgy (electronic monitoring of polypharmacy) and patient empowerment; to assess its success in practice and its impact on health care utilization and lost productivity.

Keywords withdrawal, benzodiazepine, Z-drug dependence **Financed by**University funds
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