

# Benzodiazepines

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Benzodiazepine withdrawal is about establishing the need for pharmaceutical detoxification and stabilizing the pharmaceutical use and the patient's condition. Detoxification begins by the stabilization of the medication. The medicine is taken at regular intervals, not based on psychological or physical need. Regular intake helps to reduce the variability of symptoms to the minimum.

The use of medicines and their relation to symptoms are recorded. In addition, the benzodiazepine level of the urine and the serum must be determined in order to find out the starting level of the medication. Every patient is also either assigned a support person or directed to a support group. The details of the detoxification process are planned with the staff, that is, the doctor, the support person or the leader of the support group.

During withdrawal an individual plan is followed. Alcohol consumption must remain at a safe level. If the patient has been using other unnecessary medicines like pain killers or psychopharmaceutical medicines, the use of benzodiazepines will be reduced only after the other medicines have been cut down one at the time. If several benzodiazepines have been used, those that disappear from the system quickly are cut down first.

The dosage is reduced slowly while the patient is monitored closely. The dosage of diazepam, for example, can be reduced by two and half, even five milligrams in a space of one or two weeks. Once the dosage has been reduced, it will not be increased. If the withdrawal symptoms become stronger, the dosage will be held constant for a while.

Meetings with the support group or the support person and/or check-ups at the doctor's take place once a week or once a fortnight. The patient can also contact the doctor who is on call.

Alcohol consumption and the benzodiazepine level of the urine and the serum continue to be monitored, and symptoms and dosages recorded. It is possible that the patient needs to take sick leave or even be admitted to a hospital for a period of institutional care.

The patient must actively maintain the results achieved by detoxification, and he will be monitored for at least a year after he has stopped using benzodiazepines regularly. The benzodiazepine level of the urine is measured in order to verify that the patient is not abusing medicines. Support groups and conversations are important after the medicines have been given up. Patients are informed and educated in order to prevent them from giving in to the temptation of abusing medicines again, and they are taught how to deal with possible new mental problems.

Psychotherapy is used to overcome other mental health problems where necessary, but it is usually started only after the patient has been off medicines for six months. The need for other medical treatment, such as antidepressants, is evaluated separately.

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