Raising Awareness Regarding Appropriate Benzodiazepine Use

Consciencialização Para o Uso Apropriado de Benzodiazepinas

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Dear Editor,

Recently, Oliveira et al drew some conclusions about the use of benzodiazepines (BZDs) in opioid maintenance users in Portugal, thus raising again the discussion about misuse of BZDs. Although BZDs are approved for short-term treatment, its long-term use is common and recognized as a relevant public health problem. There are reports stating that the long-term consumption increased in recent decades especially in older age. In Europe, the level of consumption is high, and, Portugal has one of the highest levels of consumption of BZDs when compared with other European countries.

Long-term use of BZDs has been discouraged due to risks of addiction and its negative impact on multiple levels: i) increased risk of road-traffic accidents due to its influence on psychomotor abilities; ii) increased risk of falls and fractures and its association with cognitive deficits, dementia syndromes and delirium, in older patients; iii) its accessibility raises the risk of intoxications (sometimes voluntary) when BZDs are misused.

Even though guidelines recommended non-pharmacological interventions as first-line treatment for anxiety or sleep disorders, this is not always put into practice. This is due to lack of resources, especially in terms of psychological counselling and brief psycho-therapeutic interventions, and also a contemporary medicalization phenomenon of human suffering. The prescribing of BZDs may be perceived by medical doctors as a more accessible way to address these health conditions.

It is well known that the proper use of BZDs depends on the information prescribers provide to patients. Patient education combined with a tapering schedule lead to significant increase in discontinuation success.

It is important to implement prevention programs for appropriate BZD use and to motivate patients with chronic consumption to participate in BZD discontinuation. It is also necessary to develop guidelines to help general practitioners manage these situations and to identify and better treat depression and anxiety in the community.

AUTHORS CONTRIBUTION
Both authors contributed equally to the conception, design, draft and critical review of the manuscript.

COMPETING INTERESTS
The authors have declared that no competing interests exist.

REFERENCES