HELPING HANDS



Benzodiazepines might be a 'hidden element' of the US' overdose epidemic

By Jen Christensen, CNN (excerpts)

Doctors have been increasingly prescribing <u>benzodiazepines</u>, also known as "benzos," in recent years. Looking at data from 2014 to 2016, new research found this class of central nervous system depressants was prescribed at about 65.9 million office-based doctor visits. That's a rate of 27 annual visits per 100 adults.

It's not just opioids: What doctors want you to know about benzos

Benzodiazepines such as alprazolam, diazepam and lorazepam can be helpful when taken on a **short-term** basis. Doctors often prescribe them to relieve acute anxiety, agitation or to help someone sleep. Taken over the long term, they can become addictive. In older adults, the drugs have been shown to increase the risk of falls, cloud judgment and impair memory. There is an increased risk of

hospitalization and death for people who take benzos, particularly if they are taken with an opioid.

Women sought these prescriptions more than men and the number of visits increased with age. Nearly half of benzo prescription visits were to a primary care provider.

What stood out to Dr. Joanna Starrels was the number of elderly patients who were prescribed these drugs.

"The most alarming finding in this study are the numbers about the elderly. This is the population that faces the most danger from the drugs," said Starrels, an associate professor in the department of medicine at Albert Einstein College of Medicine. "The elderly face an elevated risk of falls, confusion, cognitive impairment, in addition to overdose. These risks increase even more when elderly patients are co-prescribed benzodiazepines with opioids. This is the reason why societies like the <u>American Geriatrics Society</u> caution against them."

Some analysts believe that while the over-prescription of opioids has gotten a lot of attention, the prescription of benzodiazepines has been overlooked and needs <u>more attention</u>, and more needs to be done to raise awareness among doctors about the potential problems associated with prescribing these drugs.

Keith Humphreys, a psychologist at <u>Stanford University</u>, <u>has studied</u> the over-prescription of benzodiazepines. He called them "the "Rodney Dangerfield" of drugs -- benzodiazepines don't get the attention they deserve.

"Maybe it's because a lot of people who are addicted to benzodiazepines are older, fewer are violent and it's not an addiction that will get noticed as much as people who are addicted to alcohol or meth or heroin, that have all kinds of impact on people around them, or maybe people think that since they come from a doctor they can't be all that bad," said Humphreys, who is not affiliated with the new study.

But, benzodiazepines can be harmful, because doctors aren't as aware of the effects of this drug classification. About **30%** of what is labeled opioid overdose is actually opioid-benzodiazepine overdose, per National Institute on Drug abuse data.



Humphreys, who also works at the Veterans Health Administration, said the system the agency uses helps prevent over-prescriptions of the drugs.

If a Florida patient trips and falls in California, for example, a VA doctor can check the system to see if the patient is already getting a prescription for opioids, and if they are, they won't also prescribe them benzodiazepines, Humphreys said. He said doctors outside the VA may not realize that another physician has put a patient on a benzodiazepine or an opioid.

"They could be prescribing these in good faith and don't realize the overlapping prescriptions," Humphreys said.

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Seeking Treatment for Benzodiazepine Addiction

DO NOT ATTEMPT to quit taking Benzodiazepine's without the aid of a Doctor or appropriate medical professional. Withdrawal from benzodiazepines can have serious side effects such as **seizures**, **insomnia**, **tremors**, and **hallucinations**, and can even be **fatal**. In rare instances, seizures have even been reported with less than 15 days of benzodiazepine use at a therapeutic dose (meaning not using more than prescribed).

Benzodiazepine substance abuse treatment typically starts in inpatient or outpatient

detox and continues with some form of therapy or support. Your EAP representative listed below can help make the best choice for your situation.

- Detox centers are medically supervised facilities. A person in detox for benzodiazepine withdrawal may be given certain medications to ease the process and minimize unpleasant symptoms or other medical complications. Medical staff are on hand to safely supervise the person through withdrawal.
- Residential or inpatient rehab often offers detox in addition to ongoing addiction treatment..
- Partial hospitalization programs generally meet 5 days per week for about 6 hours per day.
- Intensive outpatient treatment usually meets two or more days per week for about 3 hours per day.
- **Traditional outpatient** treatment may consist of weekly individual or group psychotherapy geared toward substance abuse recovery.
- Self-help or community support groups are other people recovering from similar addictions. They usually do not include professional staffing. But they can be invaluable in maintaining long-term recovery.



The heart and soul of the District 141 Employee Assistance Program is the local lodge EAP peer coordinator. These dedicated men and women volunteer their personal time to assist other union members and their families who are experiencing personal difficulties. EAP peer coordinators do not make clinical diagnoses or clinical evaluations, however, they are trained to make a basic assessment of your situation and refer you to an appropriate resource for a more detailed evaluation. EAP peer coordinators will follow up to ensure you have been able to access services that addressed the difficulty you were experiencing.

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