



- Anxiety may be mistaken for the condition for which the drug was initially prescribed. Gradual withdrawal should help to minimise symptoms.
- Agoraphobia ranges from being unable to go out on your own, to simply not wanting to go out despite being able to do so with effort. Usually, as withdrawal continues, agoraphobic feelings are reduced.
- Aches and pains are very common during withdrawal from benzodiazepines and “Z” drugs. Doctors can prescribe painkillers to reduce these effects.
- Sleeping problems are common during withdrawal, hence it is important to get some exercise as this helps encourage sleep. Try not to worry about lack of sleep - the more you worry about not getting sleep, the less sleep you are likely to get.
- Stomach and bowel problems, such as diarrhoea and irritable bowel syndrome are very common during withdrawal and can be very distressing. Your doctor may be able to recommend a diet and indigestion remedies that may improve these symptoms which usually disappear after withdrawal is complete.
- Hot flushes and shivering: The feeling of burning and extreme heat (sweating) is also common. In contrast, others suddenly feel cold.
- Sinus problems: Many people suffer from inflamed mucous membranes which causes severe sinus discomfort.
- Vivid dreams and nightmares may occur during withdrawal. This may be a good sign as before withdrawal most people do not dream (drug-induced sleep is ‘dead’ sleep). As withdrawal continues, dreaming returns and although they may sometimes be disturbing, it is a sign that your sleep is returning to normal and that your body is re-adjusting successfully.

Remember that the symptoms are not the disease - they show that you are progressing. With time they should all pass. You should not give up.

Good luck!

## List of Benzodiazepine and “Z” Drugs

### Benzodiazepines used to help sleep

Flunitrazepam (Rohypnol®) - Unavailable in the Irish Market since March 2013  
Flurazepam (Dalmane®)  
Lormetazepam (Noctamid®)  
Nitrazepam (Mogadon®)  
Temazepam (e.g. Nortem®)

### “Z” drugs used to help sleep

Zaleplon (Sonata®)  
Zolpidem (e.g. Stilnoct®)  
Zopiclone (e.g. Zimovane®)  
Benzodiazepines used for severe anxiety  
Alprazolam (e.g. Xanax®)  
Bromazepam (Lexotan®)  
Chlordiazepoxide (e.g. Librium®)  
Clobazam (Frisium®)  
Clonazepam (Rivotril®)  
Diazepam (e.g. Valium®)  
Lorazepam (Ativan®)

### St Patrick's Mental Health Services

James's Street, Dublin 8, Ireland.  
t: +353 1 249 3200. f: +353 1 679 8865.  
e: info@stpatmail.com  
www.stpatricks.ie

# Coming off Benzodiazepines or ‘Z’ drugs

An information guide on  
withdrawing from Benzodiazepines  
or ‘Z’ drug use





This short guide will be of interest and relevant to anyone who is currently being prescribed benzodiazepines or “Z” drugs and who would like further information and guidance on withdrawing from the use of these drugs.

Before deciding to withdraw from using benzodiazepines or “Z” drugs it is very important that you discuss this with your doctor, nurse or pharmacist.

This booklet has been reproduced courtesy of the Welsh Medicines Partnership Educational Pack ‘Material to support appropriate prescribing of hypnotics and anxiolytics across Wales’.

## What are Benzodiazepines / “Z” Drugs?

Benzodiazepines are a group of drugs which have been available since the early 1960’s, and are used as sleeping tablets or to help with severe anxiety. “Z” drugs such as zolpidem, zopiclone and zaleplon are also used as sleeping tablets.

Benzodiazepines and “Z” drugs are only available on prescription. They can only be legally supplied at a pharmacy. It is illegal to supply these drugs in any other circumstances, including giving them away.

Benzodiazepines and “Z” drugs should only be taken for a short period of time (maximum of two to four weeks) to help cope with a crisis, or if taken for sleeplessness they should not be taken for more than one night in three (short-term use only).

Benzodiazepines and “Z” drugs treat the symptoms of a condition and not the causes. However, their effectiveness is limited to about four weeks. You may feel you need to keep taking them despite any beneficial effect. If used continuously (more than six weeks), addiction may occur.

These tablets in combination with drinking or driving may be dangerous, as they are both nervous system depressants. Counselling and other non-drug treatments have proven to be more effective than drugs in many cases.

## What are the effects of taking Benzodiazepines?

Benzodiazepines act on the brain and may affect your memory and concentration. They may make you feel tired or drowsy. Long-term benzodiazepine or “Z” drug treatment is associated with a number of adverse effects and other complications.

### *Adverse effects (which may also occur with short-term use) include:*

- Drowsiness and falls
- Impairment in judgement and dexterity
- Increased risk of experiencing a road traffic accident
- Forgetfulness, confusion, irritability, aggression, and excitability.

### *Complications related to long-term use include:*

- Depression
- Reduction in coping skills
- Tolerance, dependence and addiction.

## How to stop taking Benzodiazepines or “Z” drugs?

If you have been taking benzodiazepines or “Z” drugs to help you cope with a personal crisis, it may be advisable to wait until things settle down before starting to reduce the dose. The following tips may help once you have decided to withdraw.

You should not attempt to withdraw from using Benzodiazepines / “Z” drugs all at once. The rate at which a person should reduce their intake varies. It is important however, that once you have decided to withdraw that you make this a slow gradual process, as this often gives a better chance of long-term success. It is important that you take it at your own pace - one that feels right for you.

Consult your doctor, nurse or pharmacist. They can give advice on the rate at which you should reduce the dose of the drug and help you to consider other ways of dealing with your worries/sleeping problems (e.g. anxiety management groups / counselling).

Depending on which drug you are taking it may be easier to withdraw if you change to diazepam. Diazepam is available in 2, 5 and 10 mg tablets which make it easier to cut your dose down more slowly. Discuss the possibility of change with your doctor.

Don’t go back! When people begin to reduce their dose, they often become able to deal with normal day-to-day events and may feel much better. However, it is also usual to have a bad patch at some time during withdrawal.

If this happens, stick with the current dose until you feel ready to reduce again; this may take several weeks, but try not to increase the dose. Plan your withdrawal. Most people have found that about one to two weeks between reductions works for them but everyone finds their own level.

Keeping a written record such as a diary can help as it records your progress and achievements. This in itself will give you more confidence and encouragement to carry on.

## Coping with withdrawal symptoms

Not everyone experiences the same symptoms when withdrawing from benzodiazepines or “Z” drugs. Some may not experience any symptoms whereas some will suffer more than others:

- Panic attacks are very common symptoms of withdrawal and understanding the cause is important. Panic attacks are usually brought on by the effects of adrenaline and rapid, shallow breathing or hyper-ventilation that results in palpitations, sweating, unsteady legs and trembling. Establishing control over breathing will help remove the feeling of fright.