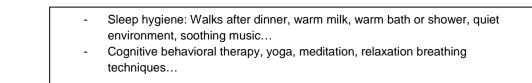# BENZODIAZEPINES GUIDELINES

Benzodiazepines (BZ) are very effective for **insomnia and anxiety disorders**. However, the use of BZ should be cautious because of their high risk of abuse, dependence, severe withdrawal symptoms, and cognitive impairment. In general, BZ should be considered last after other non-BZ treatment measures have failed. Moderately short-acting BZ are preferred than ultra short-acting and long-acting BZ. The duration time to use BZ for symptomatic treatment of insomnia and anxiety disorders should be limited to 3-4 weeks. However some patients with chronic symptoms of anxiety disorders may need long-term treatment BZ to have productive and comfortable lives.

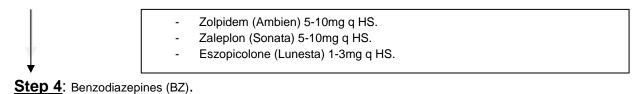Proposed steps to consider before treatment with Benzodiazepines:

Step 1: No medications

- Sleep hygiene: Walks after dinner, warm milk, warm bath or shower, quiet environment, soothing music…
- Cognitive behavioral therapy, yoga, meditation, relaxation breathing techniques…

Step 2: With no known abuse potential

Insomnia:

- Trazodone usually 25-50mg q HS, but up to 100-200mg
- Hydroxyzine or Diphenhydramine usually 25-50mg q HS, but up to 100-150mg
- TCA such as Amitriptyline or Doxepin 10-50mg q HS
- Melatonin 0.3 – 5mg q HS, Ramelteon 8mg q HS, esp for elderly

Anxiety Disorders or MDD+Anxiety sx should consider monotherapy or combination of

- SSRIs, SNRIs, Buspirone, Beta-blockers, Mirtazapine, Trazodone, Bupropion. TCAs.

Step 3: Non-benzodiazepines

- Zolpidem (Ambien) 5-10mg q HS.
- Zaleplon (Sonata) 5-10mg q HS.
- Eszopicolone (Lunesta) 1-3mg q HS.

Step 4: Benzodiazepines (BZ).

- Moderately short acting BZ should be considered to minimize accumulation and sedation. Recommend to use less than 3-4 weeks.
- Temazepam (Restoril) 7.5-15mg q HS for insomnia only.
- Lorazepam (Ativan) 0.5-2mg q day for insomnia and anxiety
- Clonazepam (Klonopin) 0.5mg-2mg q d for insomnia and anxiety.

- Ultra-short acting BZ such as Triazolam (Halcion) should be avoided because of side effects of memory impairment, withdrawal psychosis, and confusion.
- Long-acting BZ such as Diazepam (Valium), Flurazepam (Dalman) should be used cautiously because of cumulative effects that may cause drowsiness, risks of fall, and cognitive impairment especially in elderly patients.
- Alprazolam (Xanax) has high abuse risk.

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