Should I stop my benzodiazepine or “benzo”?

Who is this handout for?
This handout is for anyone who has been on a benzodiazepine (often called “benzo”) for longer than one month and is interested in stopping the medicine safely.

What are benzodiazepines?
Benzodiazepines (ben-zoh-die-az-uh-peens) are medications that are used for a variety of conditions, including sleep, lowering anxiety symptoms, and reducing muscle spasms. Common benzodiazepines include:

- Alprazolam (Xanax)
- Chlordiazepoxide (Librium)
- Clonazepam (Klonopin)
- Diazepam (Valium)
- Estazolam (ProSom)
- Flurazepam (Dalmane)
- Lorazepam (Ativan)
- Oxazepam (Serax)
- Quazepam (Doral)
- Temazepam (Restoril)
- Triazolam (Halcion)

Why stop?
Benzodiazepines have serious risks that are worth thinking about. Some of these risks include:

- Becoming tolerant or dependent
- Being at risk for having your medication stolen
- Car accidents
- Increased risk of falling
- Memory problems
- Development of dementia

What is withdrawal?
People who regularly take benzodiazepines are at risk for experiencing withdrawal symptoms when they try to stop. These symptoms may include sweating, rapid heartbeats, insomnia or sleep problems, anxiety, nausea, vomiting, and even seizures. People who are at most risk of these symptoms are those who are on high doses or those who have regularly used benzodiazepines for over one year. However withdrawal symptoms may occur with as little as 6-8 weeks of use.

Should **YOU** stop?
If you have been on a benzodiazepine for a long time, you may be nervous about stopping it. The choice to stop a benzodiazepine needs to be made by understanding the risks and benefits for **YOU**. Why were you prescribed a benzodiazepine? Is your condition under control? What other options are available? These are the types of questions to be asking. Talk to your healthcare provider before making your decision.

**Step 1. Don’t stop yet!**
The good news is that most patients who want to stop their benzodiazepine are able to do so. However stopping quickly or “cold turkey” can lead to uncomfortable side effects or withdrawal. Stopping slowly will give you the best chance of success while keeping withdrawal symptoms to a minimum.

**Step 2. Get ready to stop**
How slowly you stop depends on how long you have been taking a benzodiazepine and on how much you take. Think about why you were started on a benzodiazepine in the first place. If it was for anxiety, you may have more symptoms. If it was for sleep, you may initially have more trouble with sleep. Talk with your provider about a plan for managing these symptoms should they occur while you are trying to stop the benzodiazepine. If you are on more than one benzodiazepine, work with your provider to first become stable on only one benzodiazepine.
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Books for Managing Anxiety
- The Anxiety and Phobia Workbook by Edmund J. Bourne

Online resource for Managing Insomnia
- American Academy of Sleep Medicine (www.sleepeducation.com) is a professional organization with good information about types of sleep problems and their treatments.

Step 3. Participate in Cognitive Behavioral Therapy (CBT)
Cognitive Behavioral Therapy (CBT) teaches people life skills that have been shown to be helpful for many conditions. Some examples where CBT has proven helpful include sleep problems, depression, anxiety, and low back pain. CBT can be done with an individual therapist, in a group, or using self-help books.

CBT is considered a brief therapy and often lasts several weeks to a few months. The skills you learn in CBT will last long after you stop taking your benzodiazepine. **Remember pills don’t replace skills!**

CBT resources online
- University of Massachusetts: www.umassmed.edu/cfm/

CBT resources in Vermont
- Exquisite Mind: www.exquisitemind.com
- Vermont Center for Cognitive Behavior Therapy – (802) 651-8999

CBT Books
- The Feeling Good Handbook by David Burns. This is a classic text that addresses conditions such as anxiety, stress, depression, and difficulty in relationships.
- Peace Is Every Step: The Path of Mindfulness in Everyday Life by Thich Nhat Hanh, Arnold Kotler & H. H. the Dalai Lama

Step 4. Stop slowly over 2-6 months (or even longer)
There is no one best way to taper a benzodiazepine, however all of the plans for tapering agree that tapering should be done slowly over a period of months. It is also probably better to use your medicine on a schedule while trying to stop, rather than on an as-needed basis. Make a plan with your healthcare provider that is specific for you and know what to do if your symptoms worsen or if you experience withdrawal symptoms. This may mean you are stopping too fast. Use a calendar or a pill box to help you remember what to do.

If you are on more than one benzodiazepine, it may be best to work with your healthcare provider to first become stable on just one benzodiazepine. Then you can set up a tapering plan from there.

Option 1: Lower your dose of benzodiazepine by about 25% of your current dose every 2 weeks until you at the lowest dose you can tolerate or are completely off the benzodiazepine.

Option 2: Lower your dose of benzodiazepine by about 10% of your current dose every week until you are at the lowest dose you can tolerate or are completely off the benzodiazepine. This plan may work better for you if you were on a benzodiazepine for anxiety or panic disorder.

References

Note: The Vermont Academic Detailing Program does not have any financial interests in any of the resources recommended in this handout.