

Can Careful Usage of Benzodiazepines Prevent Suicide Incident?

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Opinion

Benzodiazepines (BZO) are frequently used as anxiolytics and hypnotics in daily clinical treatment. Surgeons as well as psychiatrists observe that long term usage of BZO disturbs activity of daily life (ADL) and causes unexpectedly critical side effects. Clinicians are likely to prescribe BZO more frequently for patients with chronic pain, motor deficits caused by unknown Pathophysiology, or some neuropsychiatric illnesses such as depression and schizophrenia, than for patients without these health problems. However, it has been shown that long term administration of BZO do not improve clinical course of schizophrenia. Etizolam is a preferable BZO among Japanese orthopedist, for its muscle relaxant effect to stiffness of shoulder, cervical spondylosis and cervical disc herniation, and its hypnotic effect, as well as for its anxiolytic effect. Whereas side effects, muscle weakness, daytime sleepiness, loss of attention, unstable gait, gait disturbance, cognitive impairment, and dependence may reduce patients' ADL.

Psychiatrists working in general hospitals with emergency centers encounter severe cases related to BZO side effects. BZO side effects are enhanced in elderlies and patients with epilepsy, especially in cases with BZO poly pharmacy. The author sometimes experiences cases with suicidal attempt, who suffered from chronic

pain, motor disturbance (ex. gait disturbance), muscle weakness, and in elderly cases, cognitive impairment, to whom long term BZO poly pharmacy had been continued. Most of the cases also showed depressed state. Considering the side effects of BZO, the author used to reduce BZO, and to try to discontinue them. In most cases, motor disturbance, muscle weakness, and cognitive impairment recovered after BZO washout. Pain control and treatment of depression by using antidepressants or of dementia by anti-dementia agents made rehabilitation easier, and made it possible to improve ADL, leading to shorten the duration of admission.

In a case of forced double suicide attempt of mother and son, the mother (60's) who had 2 anti-epileptic agents from her childhood and 3 BZO for more than 10 years, had orthopedic pain of lower extremities. This increased her psychosocial problems. After the psychiatric liaison consultation from the emergency center in our hospital, BZO was discontinued and replaced to low dosage of risperidone. The mother patient's muscle weakness, gait disturbance, cognitive impairment and depression were greatly improved within 3 weeks, and her suicidal idea disappeared. Clinicians' efforts in BZO discontinuation and/or BZO consumption decrease may promote prevention of suicide incidence.



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