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The Truth About Benzodiazepines

Benzodiazepines (Benzo's) are a category of medications commonly known as "antianxiety drugs" because of their ability to rapidly reduce an individual's anxiety level, both perceived and physiologic. In addition to their antianxiety properties, some also have anti-seizure, pre-anesthetic, sleep inducing and anti-muscle spasm properties.

There are a number of different Benzo's. They have more in common than differences, but their differences are important with regard to the proper application of one versus the other for an individual.

Several commonalities between all Benzo's is that they are all central nervous system CNS depressants and thus tend to slow down many natural body functions, especially ones ability to breath normally. While this respiratory suppression is not an issue with most people if the medicines are taken properly, but can be very problematic, if not lethal, if taken in large quantities, with alcohol, opiates or in combination.

The key ways these medications are different are:

1. **Strength**

   Strength is not measured by mg., but by a Benzo's impact on individuals when taken at therapeutic doses. Xanax, Klonopin and Ativan are essentially equal mg per mg with regard to their antianxiety power, while Valium is about 1/5 as powerful by milligram. Also strength is dependent on the desired affect, with some Benzo's being more powerful in one area than another.

2. **Duration**

   Duration can vary from minutes to hours depending on the benzo. It is important to understand the duration so that additional doses are not taken

while previous doses are still active. It is also important to understand duration of action if one needs to maintain a constant presence of the medication.

For instance, Xanax lasts only 4 hours and seems good if the problem is short lasting, whereas longer acting Benzo's would be better for longer duration problems. Clonazepam last 8-10 hours and thus is better for long term problems like when used to block severe anxiety or panic and taken in 8 hour intervals so that there is 24 hour protection. It is also better for sleep because it lasts through the night rather than Xanax which will wake people up after 4 hours when it crashes. Ativan last 6 hours and thus is good for daytime use.

3. **Presence of active metabolites (broken down into medications with similar properties of the original medication**)
   Most people think that the duration of action and half-life are important factors in determining how long a medicine lasts, but these relate only to the original compound and not its metabolic byproducts. Xanax, Klonopin and Ativan are common in that all three have no active metabolites and thus are easier manage.

   Therefore, it is important to determine if the original compound has any active metabolites (breakdown products that retain activities of the original compound.) When this is the case, the overall impact of the medication lasts much longer, causing longer duration of action and typically more side-effects.

4. **Side-effects**
   Side-effects are not really side-effects, but rather undesired affects that can plague anyone and should not be confused with interactions that can be dangerous, like Benzo's and alcohol and opiates. While the Benzo's have many commonalities, they all have different side-effects which must be factored into their overall impact. The main side-effects are:

   - **Clouded Thinking and Prominent Body "Feel"**

Benzo's range from significant clouding of thinking and a prominent body "feel" to absolutely no clouding and no awareness of a body "feel". Xanax has substantial mental clouding and profound body "feel", which many people misread as evidence that the medicine is working, when in fact it is purely a negative side-effect of no positive value. Many opiate and former opiate users like this feeling because it reminds them of an opiate high.

Ativan is at the other end of this spectrum with no clouding of thinking and absolutely no body "feel". Ironically it is actually stronger than Xanax from, an anti-anxiety standpoint, although most Xanax users consider it ineffective.

A little known side-effect of Xanax is the opposite of common belief with regard to its ability to suppress panic attacks. Because almost everyone develops full tolerance to Xanax within 2 months, it has no real positive impact on panic attacks, but people believe it does because they feel the sudden onset of the sedating side-effect which they, mistake as the medication reducing panic. What is unbelievable to most Xanax users is that it actually triggers panic attacks when the medicine precipitously crashes at the end of 4 hours, triggering an animal level anxiety signal that something is wrong and needs attention. Therefore, despite its feelings of sedation, Xanax is terrible for sleep because it will wake you up at 4 hours when it crashes.

5. **Addictive and Abuse Potential**

Addictive and abuse potential are similar with addictive potential more serious because it is harder to control and thus typically leads to higher levels of abuse and greater difficulty to cease. It is a safe rule to assume that the faster the onset of a medicine, the greater the abuse potential. Therefore, amongst Benzo's, Xanax is far and away the most addictive. However, because most Xanax users are using to control panic, they misread their addiction to Xanax as efficacy.

It is also safe to assume that the faster a medication clears from the body, the

more uncomfortable it feels, which further reinforces taking another dose. If medicine declines very fast, as is the case with Xanax, it will trigger a reflex anxiety signal telling he body that something is wrong, that many people read as the onset of a panic attack. With Xanax, the anxiety response from the rapid decline of the medication leads many people to believe that this is proof of how effective Xanax is at stopping panic, when it fact it shows that Xanax actually causes panic!!!

6. **Tolerance**

   All Benzo's produce tolerance at some point, making them ineffective for long term use and promoting dose increase in an attempt to resume an effective clinical impact. Xanax creates the fastest tolerance at 2 months, with Klonopin the slowest at two years. Valium is a mix with rapid tolerance to its anti-anxiety component, but no tolerance to its anti-muscle spasm component.

7. **Difficulties Discontinuing**

   All Benzo's have some degree of problems discontinuation, if they have been taken daily in multiple doses for more than several weeks. If taken for extended periods like months or years in maximum daily doses, it can take months and sometimes years to discontinue without problems. Xanax is the most difficult to discontinue and the most dangerous, with about 2/3 of long-term users experiencing seizures on the 3rd – 4th day post rapid cessation. Using a proper gradual taper under medical supervision can usually minimize the danger.

8. **Pregancy**

   Benzo's should be avoided during pregnancy as should all unnecessary medications. However, a long-term Benzo user should not suddenly discontinue Benzo's upon finding that they are pregnant, but rather be tapered in a medically responsible manner.

   Benzo's, especially Klonopin and Ativan can be used at prescribed dose, especially under 3 mg/day if required without high risk of negative fetal/infant impact. However, low dose Ativan is much better than a highly nervous

mother because anxiety causes cortisol release, which is much more harmful for a fetus than the Benzo.