

THE DEVELOPMENT AND EVALUATION OF A STRUCTURED BENZODIAZEPINE REDUCTION PROGRAM IN AN OPIOID TREATMENT POPULATION

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Introduction / Issues: Benzodiazepine (BZD) misuse and dependence is a significant concern in up to a third of Opioid Treatment Program (OTP) clients. Limited research support benzodiazepine withdrawal in an OTP setting. Importantly, there is no established evaluation framework to measure the progress of patients undergoing benzodiazepine reductions. Previous evaluations rely on abstinence as the main outcome.

Method / Approach: To develop and pilot an evaluation framework for assessing treatment approaches for BZD dependence in OTP settings. Two parallel processes were followed – one to develop a structured treatment program for BZD dependent clients; and the second to develop an evaluation framework for assessing outcomes associated with the clinical interventions. Following a literature review and consultation with service providers, a clinical intervention and an evaluation framework was developed and piloted with at two OTP clinics in South East Sydney LHD.

Key Findings: The reduction program was developed to include individual treatment agreements, stabilization on a long-acting BZD, supervised once-daily dosing, and a 12-24 week reduction regimen, combined with case management and counselling and liaison with external health care providers. The evaluation framework included pre-post assessment BZD use and related harms, BZD withdrawal, general health and psychosocial functioning, sleep, other substance use, process issues (such as attendance for dosing, intoxicated presentations), and client perspectives on the treatment program. The clinical interventions and evaluation framework will be presented, and key lessons will be discussed.

Discussions and Conclusions: This pilot study will inform future intervention studies clinical practice for benzodiazepine reduction.

Implications for Practice or Policy: Future BZD Treatment Programs require clear eligibility and participation criteria, BZD treatment agreements, and structured multidisciplinary (medical, nursing, AH, psychiatric) assessment, care coordination and monitoring. The inclusion of clinically tailored psychosocial interventions (e.g. relaxation training) is important for the success of the program.

Implications for Translational Research: BZD use in OTP clients is recognized as a significant concern, yet there is no consensus on approaches nor how clinical programs should be evaluated. This project provides the basis for future controlled trials in this area.

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