Benzodiazepines (BZD) and the 'Z drugs' (Zopiclone / Zolpidem)

Benzodiazepine overdose produces CNS depression. Lone OD usually only need supportive care.

Toxicity / Risk Assessment

Lone benzodiazepine OD in an otherwise well patient is normally well tolerated, and only requires supportive care.

A ceiling CNS effect is reached, even with increasing doses.

More significant toxicity is likely with CNS depressant co-ingestants, co-existing cardio-respiratory illness.

Greater CNS depression and need for intubation, however, is observed following alprazolam OD.

Clinical features:

- CNS depression: drowsiness, ataxia, slurred speech, coma
- Systemic effects large OD: ↓Temp, ↓HR, ↓BP
- Lone OD – significant coma unlikely
- Paradoxical excitation possible in children

Management

Supportive care is mainstay of management

Protect airway. Intubation may be required. *(More likely with alprazolam or co-ingestion of other CNS depressants)*

Decontamination: Activated charcoal is not indicated because possible early CNS depression

Flumazenil is an effective benzodiazepine antagonist, but is **NOT** routinely indicated because of adverse effects such as precipitation of withdrawal , seizure or unmasking of arrhythmias

Possible indications: *(see Flumazenil guideline)*

- Non-benzodiazepine dependent patients with lone benzodiazepine OD with airway compromise
- Paediatric population with airway compromise and no co-ingestion
- Iatrogenic/post procedural sedation where over-sedation produces respiratory compromise
- Elderly / nursing home patient with airway compromise where intubation is deemed inappropriate

Disposition

- Severe clinical effects normally resolve in 12-24 hours
- If significant ataxia or drowsiness occur, observe in hospital until improvement occurs
- Discharge pending mental health assessment if normal conscious state and no ataxia at 4 hours post ingestion
- Following long acting BZD OD patients should be advised of prolonged effects on motor co-ordination
- Advise patient not to drive for at least 72 hours post exposure