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## Improving Prescribing Practices of Benzodiazepines (BZDs) & Z-drugs within the Outpatient Setting

### Problem Statement

- There are **no existing guides or prescribing limits** in TTSH. Most patients are not given Patient Information Leaflet.
- In a cohort study, a third of working-aged persons and more than half of older persons **developed long-term use** of BZDs after initiation.
- Extended use of BZDs and Z-drugs lead to **difficulty in future dose reduction**, increased risk of dependence and long-term **side effects**.

Reference: Taipale, H., Särkilä, H., Tanskanen, A *et al.* (2020). Incidence of and Characteristics Associated With Long-term Benzodiazepine Use in Finland. *JAMA Network Open*. 2020;3(10):e2019029.

### Project Aim

**Improve safe prescription<sup>^</sup>** of Benzodiazepines (BZDs) and/or Z-drugs amongst psychiatry outpatient First Visits (FVs) from baseline of 36% to 80%\* over 6 months

<sup>^</sup> counsel (patient or NOK) on reviewing necessity of Benzodiazepines / Z-drugs OR future dose reduction

\* independent specialist review of first visit data suggests that after considering the severity of the clinical condition of patients seen, it was still fair to discuss reviewing necessity and future dose reduction for an average of 84% of the patients at the first visit.

### Lessons Learnt

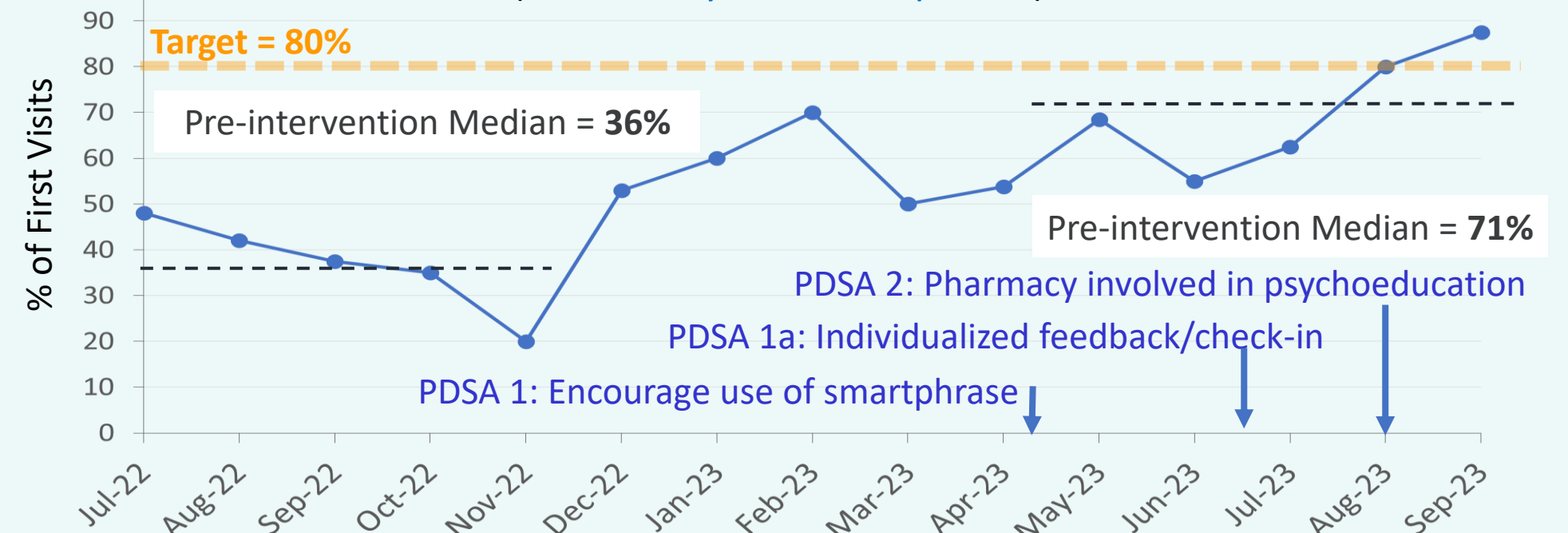
- The **importance of both process and clinical outcomes**, being clear about the measurable and thinking about clinically meaningful data.
- Benefits of being exacting or **taking time** to go through the entire CPIP process
- Engaging stakeholders**, shaping the narrative based on who you are engaging.
- The importance of using data to **regularly provide feedback** and ensure that stakeholders remain engaged
- Always **going back to the core reason** of why we are doing this project - patient safety, safe prescribing, protecting our clinical practice.

### Potential Solutions

Root Cause	Intervention	Implementation Date
Many components of FV to document Forget Epic shortcuts	<b>PDSA 1:</b> Introduction of department smart-phrase (indication, specific components, use PRN, dose review, side effects) <b>while allowing clinician autonomy</b>	1 May 2023
<b>Smart Phrase ".tpsybzd"</b> Indication of Benzodiazepine explained Reiterated to use Benzodiazepine as required PRN and we will review doses at next visit Patient counselled on side effects of Benzodiazepine		
Patient Information Leaflet not given to patient	<b>PDSA 2:</b> Pharmacists to be involved in psychoeducation of side effects for patients newly started on Benzodiazepines / Z-drugs	1 Aug 2023

### Outcomes & Impacts

% of FV Prescribed BZD/Z-drugs with a Documented Safe Prescription Discussion (Period: July 2022 to Sep 2023)



- GOOD (PROCESS) OUTCOME:** Improved safe prescription of BZDs and/or Z-drugs amongst psychiatry outpatient FVs from 36% to 71%
- CLINICAL OUTCOMES:** Clinicians prescribing less at FV, more likely to reduce or stop at six months.
- BALANCE MEASURE:** 7 out of 8 patients surveyed appeared to be using the medication appropriately
- VALUE:** Absolute cost of benzodiazepines is low (est. \$212 per annum), however, the full economic cost to healthcare is much higher (e.g. cost of clinic visits, falls risk, cognitive impairment).