



## Economic and Social Council

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### Commission on Narcotic Drugs

Forty-fourth session

Vienna, 20-29 March 2001

Agenda item 7 (e)

**Implementation of the international drug control treaties: other matters arising from the international drug control treaties**

**Austria, Belgium, Czech Republic, Finland, France, Germany, Greece, Hungary, Italy, Netherlands, Portugal, Slovakia, Slovenia, Spain, Sweden, Switzerland, the former Yugoslav Republic of Macedonia, Turkey and United Kingdom of Great Britain and Northern Ireland: revised draft resolution**

#### **Contribution to the appropriate use of benzodiazepines**

*The Commission on Narcotic Drugs,*

*Having regard* to the need to give full effect to the Convention on Psychotropic Substances of 1971<sup>1</sup> and bearing in mind, in particular, the preamble to that Convention,

*Also having regard* to paragraphs 170, 171 and 172 of the report of the International Narcotics Control Board for 1999,<sup>2</sup>

*Further having regard* to paragraphs 12, 15, 175 and 176 of the report of the International Narcotics Control Board for 2000,<sup>3</sup>

*Noting with satisfaction* that on 29 and 30 January 2001, the Pompidou Group of the Council of Europe met with a group of experts to examine the issues related to the appropriate use of benzodiazepines,

#### I

##### THERAPEUTIC USEFULNESS AND APPROPRIATE USE OF BENZODIAZEPINES

1. *Recognizes* the usefulness and importance of benzodiazepines in therapy and believes that, notwithstanding the abuses and excesses resulting from

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<sup>1</sup> United Nations, *Treaty Series*, vol. 1019, No. 14956.

<sup>2</sup> United Nations publication, Sales No. E.00.XI.1.

<sup>3</sup> United Nations publication, Sales No. E.01.XI.1.

inappropriate use of benzodiazepines, the risk-benefit ratio remains favourable, justifying their retention in the therapeutic armoury;

2. *Notes* that the spirit of Council of Europe resolution AP (90) 3 of 18 October 1990 is still relevant. The prescription of benzodiazepines should have regard to the following matters:

- (a) The need for a medical investigation to justify their prescription;
- (b) The setting of precise indications and prescriptions for the shortest possible period of time;
- (c) The discontinuation of unnecessary treatments;
- (d) The use of the lowest possible doses;
- (e) The risk of accidents for drivers and machine operators;
- (f) The recommendation that alcohol or psychotropic medicaments that might interact with benzodiazepines should not be taken at the same time as benzodiazepines;

## II

### TRAINING FOR HEALTH PROFESSIONALS

*Emphasizes* the importance of initial and in-service training for relevant health professionals concerning the appropriate use of benzodiazepines. Such training should include diagnostic tools, methods for stopping treatment and information about alternative therapies or medicines;

## III

### INFORMATION FOR PATIENTS

*Recommends* that patients be closely involved in the conduct of their treatment. The relevant health professionals should impress upon their patients the importance of strictly complying with the prescribed dosage. Patients should be informed about the problems that can arise from the use and abuse of benzodiazepines;

## IV

### ROLE OF THE PHARMACEUTICAL INDUSTRY

*Wishes* to involve the pharmaceutical industry in efforts to ensure appropriate use of benzodiazepines, urging it, inter alia, to:

- (a) Provide studies on the potential for substance misuse and dependence when registering any medicines that might be put on the market;
- (b) Make available to the public smaller package sizes (for one- to two-week treatment) and appropriate pharmaceutical formulations with suitable doses for individual therapeutic use;
- (c) Comply with a code of ethics on the marketing of benzodiazepines for health professionals;

(d) Provide health professionals with proper information on the dependence liability of benzodiazepines, including how to implement and follow up therapeutical procedures, in particular with regard to therapeutic discontinuation protocols;

## V

## INDUSTRY COOPERATION WITH ANALYSIS LABORATORIES

*Urges* the pharmaceutical industry to cooperate with analysis laboratories in the analytical study of benzodiazepines by supplying reference substances and suitable analytical methods;

## VI

## RESEARCH

*Emphasizes* the importance of increased research, in particular, medical and sociological research in order to obtain a better knowledge of the epidemiology, identify the problems and find solutions related to the use, abuse and supply of, as well as dependence on, benzodiazepines;

## VII

## WITHDRAWAL

1. *Attaches* particular importance to the problem of withdrawal, a priority issue associated with the use of benzodiazepines. The following points should be considered:

(a) Any prescription should be part of a pre-established therapeutic programme, with a beginning and an end, for the prescription of the medication;

(b) Established protocols for organizing withdrawal should be used;

2. *Stresses* that the information concerning withdrawal should be practical, so as to encourage relevant health professionals and patients to complete the therapy or the treatment;

## VIII

## STATISTICS

*Draws the attention* of the authorities to the benefits of statistics and their analysis. A knowledge of changing trends and national and international comparisons are useful in drawing up strategies;

## IX

## MONITORING

*Requests* the competent authorities to develop tools with comparable methodology for monitoring any abuse or pharmacodependence liable to result from the use of medicines and, in particular, benzodiazepines;

X

INAPPROPRIATE BENZODIAZEPINE PRESCRIPTION AND DISPENSING

*Observes* that inappropriate benzodiazepine prescription and dispensing by health professionals can be a major factor in the misuse of those substances. Corrective measures or proceedings should be initiated, if necessary, by supervisory authorities, in cases of serious or repeated breaches;

XI

CRIME INVOLVING THE USE OF BENZODIAZEPINES

*Expresses* its concern about the use of benzodiazepines for criminal purposes without the victim's knowledge to facilitate sexual assault, robbery and other criminal offences. The use of safety features (colourings, flavourings or others) by the pharmaceutical industry in the manufacture of benzodiazepines is to be encouraged. If necessary, health professionals and the general public should be informed about such matters;

XII

CONTROL MEASURES

*Considers* that monitoring and control are important tools in the elimination of benzodiazepine misuse. Those substances the abuse of which leads to a serious public health problem should be subject to more stringent measures (involving prescription, dispensing, measures to combat illegal trafficking, withdrawal of medicines etc.) at the local and international level in order to prevent misuse and illegal trafficking;

XIII

NATIONAL HEALTH AUTHORITIES

*Emphasizes* the decisive role played by competent national authorities, which can involve medical prescriptions, dispensing, pharmaceutical presentation, control methods, statistical systems, monitoring, training and research on benzodiazepines. Such aspects will allow relevant national authorities to be fully informed about the abuse of benzodiazepines and to act accordingly, thus allowing countries to provide the International Narcotics Control Board with information that would enhance its knowledge of the situation.

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