

Medications		Interactions		Complications (cont)			
Alprazolam		CNS Depressants (alcohol, barbiturates, opioids) can result in respiratory depression. Anticonvulsants and antihistamines can cause increased CNS depression	Client Education Avoid alcohol and other substances that cause CNS depression. Avoid activities that require alertness (driving)	Acute Toxicity. Oral Toxicity (Drowsiness, lethargy, confusion). IV Toxicity (can lead to respiratory depression, severe hypotension, or cardiac/respiratory arrest)	Watch for manifestations. Notify the provider if these occur. For oral toxicity, gastric lavage is used, followed by the administration of activated charcoal or saline cathartics. Administer flumazenil for benzodiazepine toxicity to counteract sedation and reverse adverse effects. Monitor vital signs, maintain patient airway, and provide fluids to maintain blood pressure. Have resuscitation equipment available.		
Diazepam							
Lorazepam							
Chloridazepoxide							
Oxazepam							
Clonazepam							
Purpose		Complications				Paradoxical Response	Watch for manifestations. Notify the provider if these occur.
Expected Pharmacological Action	Therapeutic Uses	Grapefruit Juice can reduce metabolism	Avoid the use of grapefruit juice				
Benzodiazepines enhance the inhibitory effects of gamma-aminobutyric acid (GAMA) in the CNS.	For generalized anxiety disorder (GAD) and panic disorder	High-Fat Means can reduce absorption	Do not take with fatty foods				
Relief from anxiety occurs rapidly following administration.	Trauma and stressor related disorders: acute stress disorders (ASD) and post-traumatic stress disorder (PTSD).	CNS Depression	Client Education				
Short-term use is recommended due to potential for dependency.	Hyperarousal manifestations of dissociative disorders	Sedation, lightheadedness, ataxia, decreased cognitive function	Observe for CNS depression. Notify provider if effects occur. Avoid activities that require alertness (driving). Avoid alcohol and other antianxiety medications due to potential depressant effects such as severe respiratory depression.				
Insomnia		Anterograde Amnesia					
Muscle Spasm		Difficulty recalling events that occur after dosing	Observe for manifestations. Notify the provider if effects occur				
Alcohol withdrawal (for prevention and treatment of acute manifestations)		Toxicity					
Induction of anesthesia							
Amnesic prior to surgery for procedures							
				Withdrawal Effects			
				Include anxiety, insomnia, diaphoresis, tremors, lightheadedness, delirium, hyperpigmentation, muscle twitching, and seizures	Withdrawal effects are not common with short term use. If taking benzodiazepines regularly and in high dose, taper the dose over several weeks		



Contraindications/ Precautions

Benzodiazepines are pregnancy risk category D medications that can cause fetal harm, and harm to infants due to transmission through human milk. These medications are avoided in clients who are pregnant or breastfeeding.

Benzodiazepines are classified under schedule IV of the controlled substance act.

Benzodiazepines are contraindicated in clients who have sleep apnea, respiratory depression, or glaucoma.

Use benzodiazepines cautiously in older adult clients and those who have liver disease or a history of substance use disorder.

Benzodiazepines are generally used short term due to the risk for dependence.

Nursing Administration

Administration	Client Education
Administer the medications with meals or snacks if gastrointestinal upset occurs.	Do not take benzodiazepines in larger amounts or more often than prescribed without consulting the provider.
Administer the medication at bedtime if possible due to sedation.	Dependency can develop during or after treatment. Notify the provider if indications of withdrawal occur. Store benzodiazepines in a secure place to prevent misuse by others.
Advise clients to swallow sustained-release tablets and avoid chewing or crushing the tablets	Swallow sustained-release tablets and do not crush or chew them.

