**Practice policy – Hypnotics (benzodiazepines and Z-drugs)**

GPs in this practice will prescribe hypnotics and anxiolytics (benzodiazepines and Z-drugs) in line with national and locally developed guidelines.

**New patients**

* Non-pharmacological measures should be advised and tried first.
* Refer patients to the NHS Choices information on insomnia. <http://www.nhs.uk/Conditions/Insomnia/Pages/Prevention.aspx>
* Refer patients to the Royal College of Psychiatrists sleeping well leaflet [www.rcpsych.ac.uk/healthadvice/problemsdisorders/sleepingwell.aspx](http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/sleepingwell.aspx)
* Hypnotics will only be prescribed for severe insomnia that interferes with daily life. They will only be prescribed if the GP feels that the condition is severe, disabling and subjecting the patient to extreme distress and/or for those where other interventions have not been successful.
* Treatment will be initiated at the lowest dose.
* The indication for starting a hypnotic or anxiolytic will be documented.
* Other possible causes of sleep disturbance will be recorded (e.g. pain, dyspnoea, depression) and treated appropriately.
* Prescriptions will be added to acute medication records (not repeat medication records); if hypnotics need to be added to repeat records, check compliance and number of issues.
* Dosage will be clearly stated and ‘For occasional use when required for sleeplessness.’ will be added to directions.
* The risks of chronic usage will be explained to the patient.
* GPs will prescribe no more than 14 days (preferably 7 days) supply for new patients.
* A second prescription will not be issued without a follow-up visit to the GP.
* Benzodiazepines or Z-drugs should not be taken for more than 2-4 weeks (including tapering off).

**Repeat prescriptions**

* Patients will be informed of the risks of chronic hypnotic use and offered support to gradually reduce their usage. This will be documented in the notes.
* Patients who are unable or unwilling to reduce drug dosage via a managed withdrawal scheme (or who use more than one drug of abuse, or who are dependent on alcohol) may be referred to the substance misuse service in their area.
* Prescriptions for hypnotics and anxiolytics should not be routinely available on repeat prescriptions. However the practice accepts that there may be a small minority of people who need to be on a small maintenance dose of a benzodiazepine. Examples are people:
	+ With severe mental health problems under care of a psychiatrist;
	+ On benzodiazepines for treatment of epilepsy;
	+ Who are seriously ill or terminally ill.
* No more than 28 days supply will be prescribed at a time.
* Repeat dispensing prescriptions will not be issued for hypnotics.
* Clear dosage directions will be given and will include ‘when required for sleeplessness.’

The practice will undertake a regular review and audit of the prescribing practice of benzodiazepines and Z-drugs to ensure compliance with national and local guidelines.