**Zopiclone suggested tapering regime**

Zopiclone is a hypnotic licenced in the UK for insomnia (short-term use) at a maximal dose in adults of 7.5mg at bedtime for no more than 4 weeks. In the elderly, it is licenced for a lower dose of 3.75mg at bedtime for no more than 4 weeks, increased if necessary to 7.5mg at bedtime.

Zopiclone increases the activity of gamma-aminobutyric acid (GABA), an inhibitory neurotransmitter. GABA is therefore essentially a natural sedative; Zopiclone enhances this effect. GABA also suppresses excitatory neurotransmitters including dopamine, serotonin, noradrenaline and acetylcholine. Zopiclone acts on a different site at the GABA (macromolecular receptor complex) to those of benzodiazepines including different conformational changes in the receptor complex acting as an agonist. Consequently, use of Zopiclone has wide reaching effects, leading to a wide array of withdrawal symptoms on stopping (both physical and psychological), especially when taken beyond 4 weeks.

Where Zopiclone has been used off licence for more than 4 weeks there should be a tapering of the dose to reduce the risk of withdrawal effects. This may take weeks or months.

Withdrawal syndrome has been reported upon discontinuation of zopiclone.

Withdrawal symptoms vary and may include rebound insomnia, muscle pain, anxiety, tremor, sweating, agitation, confusion, headache, palpitations, tachycardia, delirium, nightmares, hallucinations, panic attacks, muscle aches/cramps, gastrointestinal disturbances, and irritability.

In severe cases the following symptoms may occur: derealisation, depersonalisation, hyperacusis, numbness and tingling of the extremities, hypersensitivity to light, noise and physical contact, hallucinations. In very rare cases, seizures may occur.

Particular care should be exercised when considering reducing Zopiclone in patients with a low seizure threshold. In such circumstances:

* always discuss with specialist teams prior to any reduction
* reduction regimes will usually need to occur over longer periods
* reduction regimes will usually be specific to each patient

Dose changes should be individualised to the person.  There are no recommendations as to the speed of reduction.  A suggested regime for a patient who is already taking zopiclone 15mg daily (off licence) is included below. If the patient is taking a lower dose than 15mg once daily then start the process further down the table and follow the suggested tapering guidance.

Before starting:

* Where possible, ensure any reduction is discussed and agreed with the patient.
* Agree the speed of dose reduction with the patient. Some patients may want to reduce quickly with a view to stopping over one month, but this is too fast for most patients.
* Typically, one change per week is recommended. Faster than this could lead to physical withdrawal symptoms. Some patients will need space to acclimatise to the new dose so the dose changes may be every one to two weeks. Inform the patient that reduction can be slowed but not reversed.
* Zopiclone tablets are available as 3.75mg and 7.5mg tablets.

The reduction withdrawal schedule is flexible and should be individualised to each patient, some patients may need only 1-2 weeks per change, but others may need longer.

|  |  |  |  |
| --- | --- | --- | --- |
| **Starting total dose of 15mg Zopiclone at night**  **Reduce no faster than 1 change per week**  **Start lower down the table if a patient is taking a lower dose than 15mg at night.** | | | |
| **Stage** | **Dose (at night)** | **Number of tablets per day** | **Number of tablets per week** |
| Change 1  (1-2 weeks) | 11.25mg | 3 x 3.75mg tablets | 21 |
| Change 2  (1-2 weeks) | 7.5mg | 2 x 3.75mg tablets | 14 |
| Change 3  (1-2 weeks) | 3.75mg | 1x 3.75mg tablet | 7 |
| Change 4  (1-2 weeks) | 3.75mg on alternate nights | 1 x 3.75mg tablet | 4/ 3 |
| Change 5 | Stop. | - | - |

**References**

[Material to support appropriate prescribing of hypnotics and anxiolytics across Wales - All Wales Medicines Strategy Group (nhs.wales)](https://awmsg.nhs.wales/medicines-appraisals-and-guidance/medicines-optimisation/prescribing-guidance/material-to-support-appropriate-prescribing-of-hypnotics-and-anxiolytics-across-wales/)

[Zopiclone 3.75 mg Tablets - Summary of Product Characteristics (SmPC) - (emc) (medicines.org.uk)](https://www.medicines.org.uk/emc/product/11210)

[Scenario: Benzodiazepine and z-drug withdrawal | Management | Benzodiazepine and z-drug withdrawal | CKS | NICE](https://cks.nice.org.uk/topics/benzodiazepine-z-drug-withdrawal/management/benzodiazepine-z-drug-withdrawal/)

[benzo.org.uk : Benzodiazepines: How They Work & How to Withdraw, Prof C H Ashton DM, FRCP, 2002](https://www.benzo.org.uk/manual/index.htm)

[benzo.org.uk : Benzodiazepines: How They Work & How to Withdraw, Prof C H Ashton DM, FRCP, 2002](https://www.benzo.org.uk/manual/bzsched.htm#s12)

Practice headed paper

**Patient reduction card record**

This surgery has agreed with you the following reduction regimen of your medication:

Name of patient……………………………………………………………………….

Name of usual doctor............................................................................................

Date of first appointment ......../………/………. (DD/MM/YYYY)

Agreement to be kept by the patient (copy in the notes)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Week | Date | Drug | Strength | Dose | Number of tablets daily | Number of weeks at this dose | Total number of tablets prescribed |
| 1 |  | Zopiclone |  |  |  |  |  |
| 2 |  | Zopiclone |  |  |  |  |  |
| 3 |  | Zopiclone |  |  |  |  |  |
| 4 |  | Zopiclone |  |  |  |  |  |
| 5 |  | Zopiclone |  |  |  |  |  |
| 6 |  | Zopiclone |  |  |  |  |  |
| 7 |  | Zopiclone |  |  |  |  |  |
| 8 |  | Zopiclone |  |  |  |  |  |
| 9 |  | Zopiclone |  |  |  |  |  |
| 10 |  | Zopiclone |  |  |  |  |  |
| 11 |  | Zopiclone |  |  |  |  |  |
| 12 |  | Zopiclone |  |  |  |  |  |