

Reasons for non-prescribed benzodiazepine use among a sample of people who regularly use ecstasy and/or other illicit stimulants in Australia

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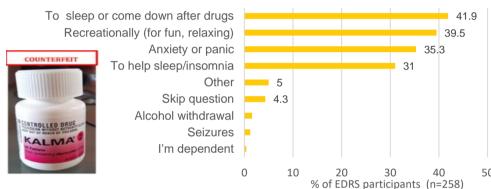
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Benzodiazepines are a group of central nervous system depressants, which induce sedation and sleep, and serve numerous medical functions. This class of drugs are also increasingly used illicitly, as evident in both Australian population based data (1) and sentinel samples of people who regularly use illicit stimulants (2). This trend is concerning because deaths involving benzodiazepines have increased in Australia in recent years and benzodiazepines are consistently identified as the second most common drug type involved in drug-induced deaths (3). Additionally, in the US, benzodiazepines were identified as a class of drugs that increased the odds of death in a sample of almost 1000 adverse MDMA events (4). The concurrent use of stimulants and benzodiazepines is risky because they send mixed messages to the body, increasing the risk of complications like cardiac arrest and overdose (5). Moreover, risk associated with illicit use of benzodiazepines is compounded by the proliferation of counterfeit products containing riskier compounds, such as more potent analogues (6). Overall, given indications of increasing use and harms, there is a need for a greater understanding of factors motivating use. While it is widely known that people who use stimulants sometimes use benzodiazepines to help counter adverse drug effects, such as 'comedowns' and insomnia, there is little published literature which explicitly explores motives for use among Australians who use ecstasy and related stimulants.

What our work found

Among a sentinel sample of people who regularly use ecstasy and other illicit stimulants in Australia (n=774; recruited from capital cities as part of the 2021 Ecstasy and Related Drugs Reporting System (EDRS) interviews), 35% reported recent 6 month) use prescribed benzodiazepines. These participants were asked a series of questions from a special module on benzodiazepines, which included reasons for recent (past 6 month) use (Figure 1).

Figure. 1 Reasons for benzodiazepine use among participants reporting recent non-prescribed use, National EDRS, 2021.



Note. X axis reduced to 50% to improve visibility. Data labels have been removed where n≤5.

Implications

While countering adverse effects of drug use was a commonly reported reason for illicit benzodiazepine use in this sample, more than half reported other motives. For example, some reported using for the perceived pleasurable effects (i.e. recreationally) and some were using for anxiety/panic not necessarily related to substance use. The latter raises questions about whether some participants were potentially 'self-medicating' underlying mental health problems. Given the risks associated with this class of drugs, the findings suggest there may be a need for targeted education/early intervention among young people who use stimulants to raise awareness of the risks and alternative methods for managing anxiety and sleep (e.g., grounding techniques and meditation). To help inform any future harm reduction efforts, further investigation is needed to explore potential correlates of benzodiazepine use, awareness of acute and longer term risks (e.g., dependence), how benzodiazepines are being sourced (given the ongoing risk posed by counterfeit products) and what is being sourced/sold (e.g., traditional benzodiazepines or analogues). Questions related to these topics were included in the 2021 EDRS special module and will be investigated in a larger paper drawing on this data (in preparation in 2022).

References

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