

BENZOS

**INFORMATION GUIDE ON USE,
EFFECTS, SAFETY AND HELP**

V1.0 11/20



CREW

INTRODUCTION

Benzodiazepines (benzos) are a group of depressant drugs. They are also known as tranquillisers and can have sedative and calming effects. Some benzodiazepines, such as diazepam (Valium), are prescribed to treat anxiety, insomnia, seizures (fits) and other health conditions.

In recent years, the non-medicinal benzodiazepine market has expanded rapidly. The European Drug Report 2020 states that the European Monitoring Centre for Drugs and Drug Addiction is “currently monitoring 30 new benzodiazepines – 21 of which were first detected in Europe since 2015”. The use of many benzodiazepines, including etizolam, alprazolam, flualprazolam, diclazepam, phenazepam and flubromazolam, has been reported in the UK.

Some of these tablets enter the supply chain through the diversion of pharmaceuticals (medicines), but the majority are counterfeit tablets (made to look like pharmaceutical products) or street benzos (loose pills sold in bags or wraps). As many of these drugs are relatively new, the effects, duration and toxicity may not be fully known but there has been a marked increase in benzodiazepine-related harm and death in Scotland and **great care should be taken**.

All drug use has risks. This booklet is for information only and does not constitute or replace medical advice. If you have medical concerns about your drug use, please speak to a medical professional.



GETTING HIGH?

Before taking any drug...

- Spend at least two hours researching the drug you are planning to take. These sites contain more information about the risks and effects of different drugs:

crew.scot

drugsand.me

psychonautwiki.org

erowid.org

tripsit.me

benzo.org.uk

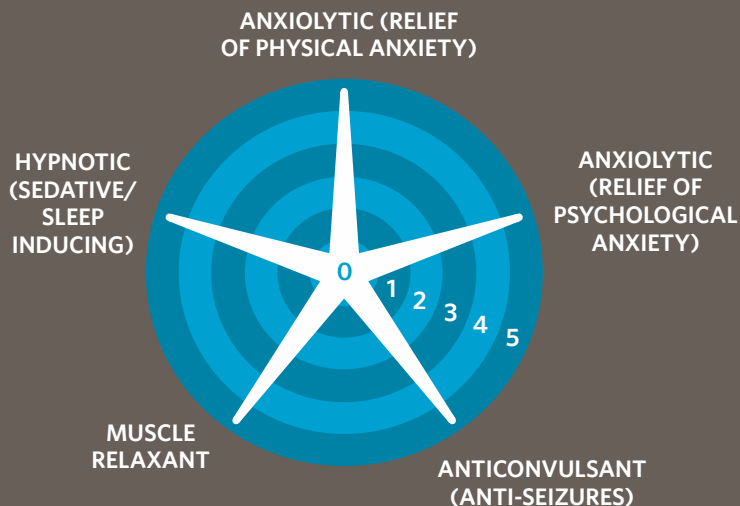
- **Test the drug.** If you do not have access to a drug checking service, reagent testing kits are available online and can give a greater understanding of what the drug contains, but they may not be suitable for identifying newer compounds or adulterants (unexpected ingredients) and can tell you nothing about purity or strength. **Reagent tests are not suitable for identifying the presence of many new benzodiazepines.**
- Research methods for identifying adulterants. Some adulterants (such as fentanyl) can be tested for using a test strip.



- Avoid mixing different drugs, including alcohol and certain medicines. Mixing benzodiazepines with other depressants (including other benzodiazepines) can slow breathing to life threatening levels.
- Benzodiazepines and other depressants affect your memory and can make it difficult to keep track of the time. Before you take a benzo, take any medicines you need (after researching any interactions between your medicine and the drug), make a note of when you dose and set reminders to eat and drink.
- If you are splitting pills, use a pill cutter (these are available from pharmacies). Be aware that if you crush, chew or split a pill, the effects may come on more quickly and intensely.
- If taking powder, use scales to measure the dose. Start with a small dose and go slow! Remember that the more of a drug you take, the riskier it is and the more likely you are to experience negative effects.
- Stay with people you trust, in a safe environment and be aware of dangers, such as water (e.g. rivers, lakes) and sharp or hot objects. Benzodiazepines can make balance and coordination more difficult.
- Drugs may cause you to behave out of character. They also lower inhibitions and increase the likelihood of taking risks related to money, sex and other behaviours. Before you take a benzo, set some boundaries and try to stick to them.
- Have a plan for getting home so you do not have to walk long distances with a tired body and brain.

EFFECTS

The overall effect depends on the setting, the person and the drug. Although benzos work in a similar way, each benzo has its unique dose, duration and effects - some have a stronger sedative effect and others have a stronger relaxant effect. The effects can be split into 5 broad categories.



KEY

- 0 = inactive
- 1 = weak
- 2 = weak/moderate
- 3 = moderate
- 4 = strong
- 5 = very strong



DIAZEPAM 10 MILLIGRAMS



ALPRAZOLAM 0,5 MILLIGRAMS

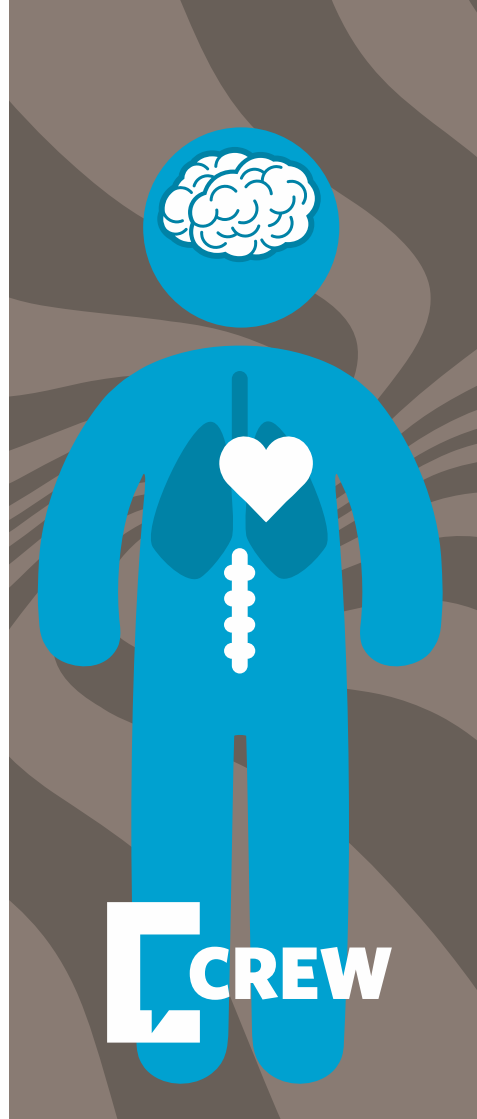


TEMAZEPAM 10 MILLIGRAMS

Benzodiazepines can cause drowsiness and long periods of sleep. They are central nervous system depressants and can slow down your heart rate and breathing. People may experience a 'floating' sensation and feel warm, calm, relaxed and tired.

Benzodiazepines can temporarily reduce feelings of anxiety; however, some people may experience an increase in anxiety, particularly at higher doses. High and/or frequent doses also increase the risk of seizures or 'fitting', aggression and emotional turbulence.

Other effects can include lack of coordination, dizziness, slowed or slurred speech, reduced mental alertness, short-term memory loss and blackouts (not being able to remember things that happened when you were under the influence). They can also impair judgement of danger which can result in risky behaviour.



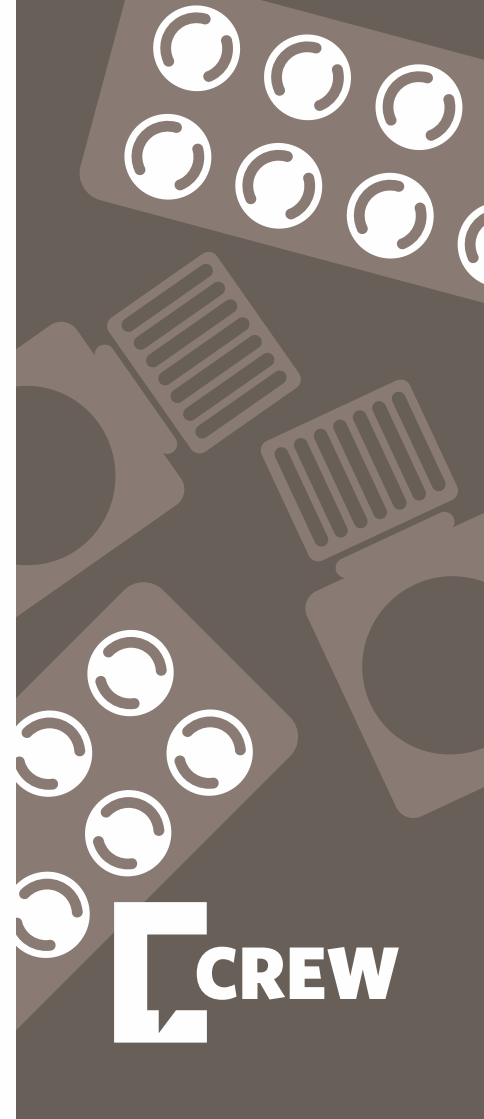
APPEARANCE

Benzodiazepines are commonly found as blue, white or yellow round pills. There are three broad types of benzodiazepine. They can also be pressed into ovals, diamonds or other multi-sided shapes. Occasionally they are sold as a powder, or as a gel capsule filled with powder. They can also be dissolved and infused onto substances such as paper (blotters) and gelatine (gel tabs).

1. PHARMACEUTICAL

Pharmaceutical benzodiazepines are medicines that will appear in blister packs or medication bottles alongside instructions about dose and side effects. These drugs are manufactured under controlled conditions, which assures that the dose and compound listed on the packaging is accurate. Pharmaceutical benzodiazepines may be referred to by their chemical name or their brand name, for example diazepam is prescribed under the brand name Valium.

Traditionally, illicit benzodiazepines were diverted from the pharmaceutical market (i.e. medicines stolen from the place of manufacture or passed from someone who has a prescription for it).



- Be aware that sharing a prescription with someone else is considered supply of a Class C drug under the Misuse of Drugs Act (1971).
- For most conditions, benzodiazepines should only be prescribed for short term use (less than 4 weeks). Even if you are taking medicines as prescribed, you may experience negative side effects. If you are experiencing side effects, or wish to make any changes to your treatment, please speak to your prescriber.
- If you stop taking them suddenly you may experience benzodiazepine withdrawal syndrome (page 25).

2. FAKE

Fake benzos are counterfeit drugs that are made to look like genuine medicines. In Scotland, many fake benzos are designed to look like diazepam (Valium), alprazolam (Xanax) or temazepam (Restoril).

Legitimate looking packaging (including boxes, information sheets and blister packs) is not confirmation of the contents and they can contain no active ingredients, or different active ingredients and concentrations than stated.

Fake pills can sometimes look to be of poorer quality than genuine pharmaceuticals but it's not always easy or possible to tell.

Signs of fake medicines can include unsealed boxes, spelling mistakes and missing licensing/pharmacy information, as well as physical defects such as pills that are uncoated, poorly pressed, discoloured, chipped, broken, powdery or crumbly.

3. STREET

In recent years, a number of new psychoactive substances (NPS) that are benzodiazepines have emerged. These are drugs that have been newly developed or developed years ago but have recently resurfaced. Some are prescribed as medicines in other countries but are not licensed for use in the UK. In Scotland, many street benzos contain an NPS benzodiazepine, like etizolam, rather than historically familiar drugs like diazepam.

They are generally pressed into pills and sold loose in bags. They may be mis-sold as diazepam but they are often referred to using generic, interchangeable terms such as vallies, blues and street benzos. Some people may refer to the benzos by using the information stamped on the pills, examples include 'Roche 10', 'MSJ', 'T20', 'WW' and 'D10'.

- Unlike pharmaceuticals they are often manufactured in unhygienic environments with little quality control or assurance. This makes variation between pills more likely and it is common for fake/street benzos to vary widely in ingredients and strength.
- The active ingredient can be spread unevenly throughout a batch of pills. This means some pills contain no psychoactive substance whereas others, that look the same and are from the same batch, contain much more than expected. Dose low and go slow.
- If you are taking any benzo you are not prescribed, start with a small test dose - even if they look genuine or like ones you have had before.

- Many of these drugs stay in your body for long periods of time and are active at lower doses than traditional benzodiazepines (meaning you need less of the drug to feel the effects). This increases the risk of overdose.
- Be aware that pills may contain a mixture of more than one benzo. In many countries, benzos have also been found to contain other drugs such as opioids (including fentanyl), antihistamines or other sedatives.

To stay informed about the drugs that are in circulation:

- Visit WEDINOS wedinos.org for drug testing results.
- Follow The Loop wearetheloop.org for drug alerts, information and testing data.
- Download the TripApp application tripapp.org for drug alerts and results from international drug checking organisations.

Remember - even if your pill looks the same as one that is reported to only contain the expected benzodiazepine, that does not confirm the contents of your pill.



DOSING

Variation in the contents of fake and street benzos makes accurate dosing difficult. Each different type of benzo also has a different potency (the amount required to produce an effect) so the dose for an average person will depend on several factors, including the type of benzodiazepine (page 12).

Some benzodiazepines can stay in your body for a few days, sometimes weeks, after use so the drug may be active long after the effects have worn off. The half-life of a drug is the time taken for your body to metabolise (breakdown and remove) half of the drug. For example, the half-life of diazepam is at least 20 hours*. This means if you take a 10 milligram (mg) diazepam pill, you will have at least half of it (5mg) in your body 20 hours later. If you were to take another 10mg diazepam pill 20 hours after the first, then you will have at least 15mg (5mg from day 1 + 10mg from day 2) in your body, not 10.

If benzodiazepines are taken regularly, they will accumulate and you may have more in your body than expected, which increases the risk of overdose. Regular dosing will also increase your tolerance to the drug (page 24).

*<https://wiki.tripsit.me/wiki/benzodiazepines>



COMPARISON OF BENZODIAZEPINES

CHEMICAL NAME (brand name)	HALF-LIFE	DOSE EQUIV. OF 10mg DIAZEPAM (oral)	CLASS
Alprazolam (Xanax)	6-12 hours	0.5mg	Anxiolytic
Diazepam (Valium)	20-100 hours	10mg	Anxiolytic
Diclazepam (Ro5-3448)	~42 hours	1mg	Anxiolytic
Etizolam (Etizola)	4-12 hours	1mg	Anxiolytic
Flubromazolam	Long	0.25mg	Hypnotic
Phenzepam	60 hours	~1mg	Hypnotic
Pyrazolam	Short	0.83mg	Anxiolytic
Temazepam (Restoril)	8-22 hours	20mg	Hypnotic

ROUTES OF ADMINISTRATION

Route of administration is the way that you take the drug.

Before you take any drug:

- Wash your hands for at least 20 seconds with soap and water before handling or preparing drugs.
- Wipe down the baggies or other packaging.
- Clean all surfaces and equipment regularly.
- Avoid sharing drugs from the same baggie or packet.

The most common route of administration for benzodiazepines is swallowing. They can also be absorbed in the mouth by placing them underneath the tongue (sublingual administration) or between the gums and cheek (buccal administration). They are less commonly snorted.

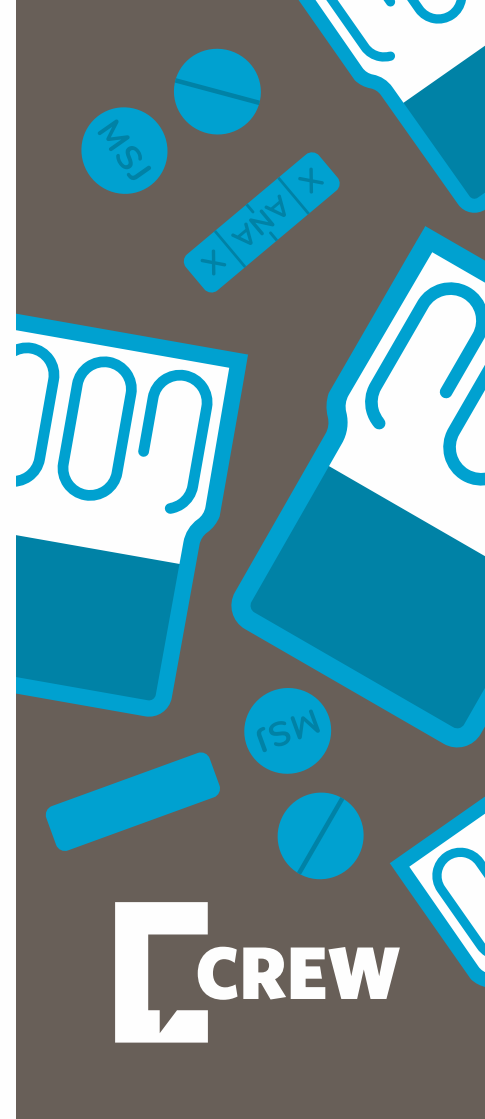
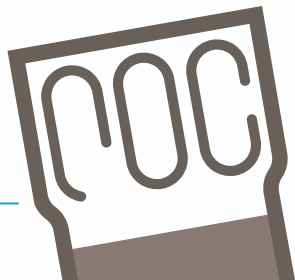
Whilst some pharmaceutical benzodiazepines are designed to be injected, injecting crushed benzodiazepine tablets risks damaging veins or the injecting site. It can cause life-threatening infections and abscesses and increases the likelihood of overdose and is therefore strongly discouraged.

Regardless of your route of administration, it is important to research your desired method extensively before consuming any drug and take regular breaks from drug use to give your body time to heal and readjust.



SWALLOWING?

- 1** Dose low. One pill may contain more than one dose and even if the pill looks the same and was part of the same batch, the amount of the drug between pills can vary. If you are not 100% sure of the ingredients, start with half a pill.
- 2** Some pills can be hard to break. For best effect use a pill cutter and break your pills up well in advance of when you plan to take them (while you are still sober if possible).
- 3** Wait at least two hours before re-dosing. Some pills will take a while to break down and therefore longer for you to feel the effects.
- 4** Swallow them with water or an isotonic drink. Be aware that if you crush, chew or split a pill, or consume pills that are uncoated (no shiny, film or sugar coating), the effects may come on more quickly and intensely. Pills with a strong colour (usually blue or yellow) can stain the tongue, teeth and lips for several hours after use.



SNORTING?

Snorting is a less common way to take benzo-diazepines. It is not recommended as benzodiazepine tablets contain colouring, bulking agents and binding agents (ingredients added to help form the pill) and over time these ingredients can degrade the septum (the cartilage separating the nostrils). Snorting crushed pills can also lead to a reduced sense of smell, nosebleeds, pain when swallowing, a runny/blocked nose and recurring nose, sinus or throat infections.

- 1** If snorting benzodiazepine powder, be aware that many benzodiazepines are active in very small doses (for example, one gram of etizolam powder can produce 1000 doses). Extensively research the substance and always start with a tiny dose for that specific drug.
- 2** Grind it down as fine as possible and divide into small lines. Ensure the surface is clean – unclean surfaces such as toilets, phones and keys can spread disease. Use an alcohol wipe if possible.
- 3** Avoid using bank notes as a tool to snort benzos, as they aren't disposable and can cut the inside of your nose - post-its or paper straws are a good alternative to notes.
- 4** Sharing snorting tubes can spread infections and blood borne viruses (e.g. hepatitis C, HIV) – only use your own equipment. Get tested regularly for BBVs.
- 5** Position the tube as high up the nostril as possible and alternate nostrils for each dose.
- 6** The effects come on more quickly when snorted than when swallowed. If the effects come on too intense, stay calm, move somewhere quiet and cool and sip water.
- 7** Rinse your nose out with clean water at the end of a session, to prevent the powder causing further damage to the inside of your nose.
- 8** Apply a thin layer of vitamin E oil to the inside of the nose after rinsing.

MIXING

Polydrug use means taking more than one drug at a time (including alcohol and medicines). Taking different drugs at the same time increases the risk of each drug.

Mixing drugs can cause unexpected and unpredictable results and is a major risk factor in drug-related deaths in Scotland. In 2018, there were 11 deaths where a benzodiazepine was the only drug implicated (1% of 792 benzo-related deaths), therefore in 99% of *benzo-related deaths, the benzo was implicated alongside another drug.*



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Try to stick to one drug at a time but if you do mix drugs, do your research, ensure you are somewhere safe, take way less of both substances than you would if you were only taking one and look out for the signs of an overdose (page 29).

Mixing benzos with uppers (such as cocaine, caffeine and amphetamine as well as 'smart' or 'study' drugs like modafinil or Adderall) is risky and increases the strain on the heart and body and can cause feelings of anxiety. Mixing can also reduce some of the desired effects of both drugs, whilst increasing toxicity. Ketamine is a dissociative drug with depressant effects. Mixing benzos with ketamine is risky as it may lead to blackouts and unconsciousness.

Drugs that have a psychedelic effect (such as magic mushrooms and LSD) can lead to overwhelming or difficult experiences. If someone is having a difficult experience, avoid giving them benzodiazepines to stop the trip, as they may not be able to accurately explain to you the other drugs that they have taken that day and therefore adding another drug to the mix may be dangerous. Instead try to stay calm, reassure the person and help them to move somewhere quiet and comfortable. Get help if you need it. If in doubt, call 999 for an ambulance.



MIXING DOWNERS



Downers include opioids (like heroin) and depressants (such as benzos and alcohol). These types of drugs depress the central nervous system which means they slow down heart rate and breathing. **Mixing benzodiazepines with other downers, including other benzodiazepines, is extremely dangerous and increases the risk of respiratory depression and death.**

ALCOHOL

Alcohol can make people feel more relaxed, outgoing and confident. Other effects can include loss of memory as well as feeling drowsy, confused and nauseous. It also reduces your inhibitions and affects judgement.

GHB/GBL

GHB and GBL are similar, with GBL converting to GHB shortly after it enters your body. In small doses GHB and GBL can give a mild high and cause feelings of relaxation, euphoria and sensuality. Other effects can include a loss of inhibitions, increased sex drive as well as cravings to re-dose, unconsciousness, agitation and confusion. High doses can lead to memory loss and coma-like sleep.



GABAPENTINOIDS

Gabapentinoids, such as gabapentin and pregabalin, can be prescribed for epilepsy and nerve pain. People taking them can experience feelings of relaxation, calmness and euphoria. Other effects include confusion, drowsiness and loss of memory. In high doses there is a risk of physical injury, caused by a lack of coordination when taking gabapentinoids. Part of their continued appeal is their ability to enhance and increase the effect of opioids, therefore people need to take less of any opioid drugs to achieve the intended effect.

OPIOIDS

Opioids are pain-killing drugs such as heroin and morphine. People taking them may feel safe, relaxed and warm. Other effects include nausea, vomiting, constipation, dizziness and pin-point pupils.

Opioids include opiate replacement therapies (ORT), such as methadone and buprenorphine (Subutex), which are lab-made opioids usually prescribed to replace the use of drugs such as heroin.

Opioids also include painkillers such as tramadol and codeine. Codeine is one of two drugs found in co-codamol and it is also found in lean, a drink made from cough syrup that contains codeine and promethazine (antihistamine).

Z-DRUGS

Z-drugs are a class of drugs that include substances such as zolpidem and zopiclone. They are similar to benzodiazepines (in that they also act on the GABA-A receptors) and they are generally prescribed to aid sleep and treat insomnia.



THE LAW

The Misuse of Drugs Regulations (2001) control the administration, prescribing, dispensing, record keeping and disposal of licensed medicinal benzodiazepines.

In the UK, many 'non-medicinal' benzodiazepines are controlled by the Misuse of Drugs Act (1971) as Class C drugs. It is illegal to possess, supply, possess with intent to supply, manufacture and/or import Class C benzodiazepines.



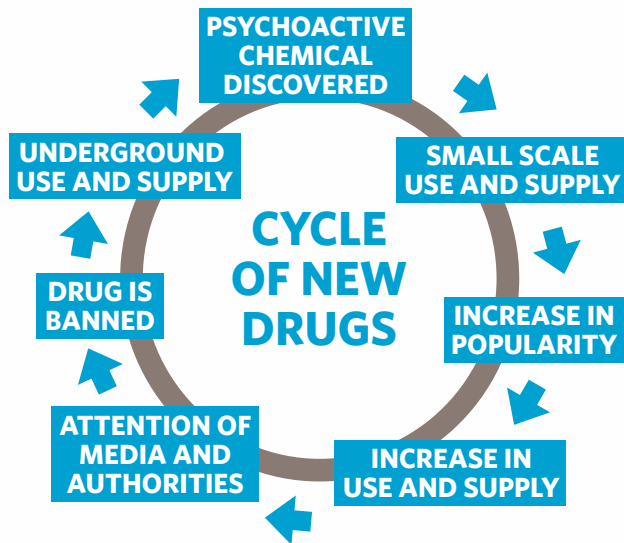
Penalties for possession are up to 2 years in prison and/or an unlimited fine and penalties for supply (including giving it to your mates for free) are up to 14 years in prison and/or an unlimited fine.

The penalties will depend on factors such as previous convictions, the severity of the offence and the type of drug.

Having a criminal record for drug-related offences can cause significant consequences including:

- Stigma (societal disapproval)
- Loss of employment/education
- Reduced career opportunities
- Higher insurance premiums
- Limited travel opportunities

Many newer benzodiazepines are not controlled by the Misuse of Drugs Act. Their supply is controlled by the Psychoactive Substances Act (2016), which bans the sale of substances capable of producing a psychoactive effect. Possession is not an offence (unless in a custodial institution such as a prison).



As use and popularity of these new psychoactive substances increases, it is likely that they will be added as Class C drugs to the Misuse of Drugs Act, although national control measures are rarely effective at reducing demand or supply. For example, in 2015 the possession and supply of etizolam was not controlled and it was implicated in 43 deaths in Scotland.

In May 2016, etizolam was controlled by the Psychoactive Substances Act and it was implicated in 223 deaths. In May 2017, etizolam was added to the Misuse of Drugs Act as a Class C drug and it was implicated in 299 deaths. This rose to 548 deaths in 2018.

As of November 2020, etizolam and flualprazolam are internationally controlled as schedule IV drugs under the Convention on Psychotropic Substances (1971). This means manufacturers will need to apply for a license to make it. Even if this did reduce the quantity of etizolam being manufactured it does not reduce the demand for benzodiazepines and therefore manufacturers will move to the next, new, uncontrolled benzodiazepine and the cycle will continue.

For more information on benzodiazepines and the law, visit: [release.org.uk](https://www.release.org.uk)

BENZOS AND DRIVING

Drugs can impair the ability to drive. Only drive if you are sober, feel well and aren't sleep deprived. You should not drive, cycle or operate any kind of vehicle while taking benzos. You might feel more sober and capable than you are.

In Scotland, it is a crime to drive with a specified controlled drug in the body, in excess of a specified limit. The law applies to controlled drugs such as cocaine, cannabis, MDMA, ketamine, LSD and heroin, as well as prescription drugs, such as diazepam and methadone. You will need to be able to show a prescription for benzodiazepines.

Police can make a requirement for a roadside drug test if they suspect drug use (e.g. smell cannabis), you commit a moving traffic offence (e.g. speeding or driving with a faulty light) or after any accident, regardless of fault. If a driver tests positive at the roadside using saliva from a mouth swab, they will be arrested and taken to a nearby police station for a confirmatory blood test. You can be arrested for refusing to take a roadside drug test.



The presence of benzodiazepines above a certain level can lead to a conviction for drug-driving. For diazepam, this limit is set at 55 micrograms/L.

If you're convicted of drug driving, you'll get:

- a minimum 1-year driving ban
- between 3 and 11 penalty points
- a fine of up to £5,000 and/or up to 6 months in prison
- a criminal record

The length of time a substance can be detected for varies and can depend on the dose, purity and personal factors. Benzodiazepines can be detected in the blood for several days (sometimes weeks) after use and long after the effects have worn off.



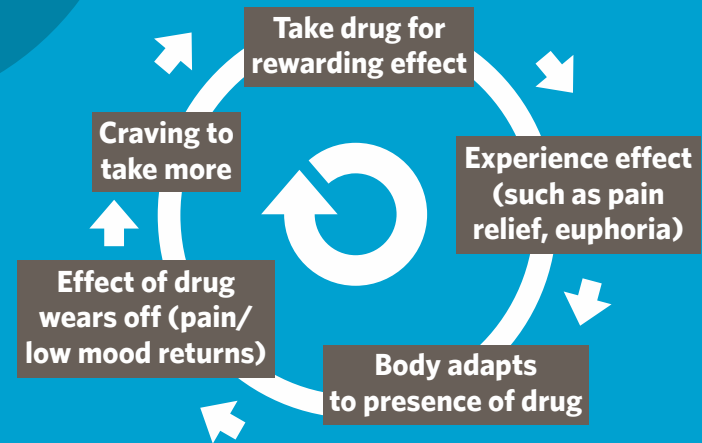
DEPENDENCE

Tolerance to benzodiazepines develops quickly. Tolerance to a drug means that a higher dose of the drug is needed to achieve the desired effect, which increases the risk of overdose and dependency.

Drug dependence is also referred to as 'substance use disorder' or 'drug addiction'. Dependence on a drug means that someone needs the drug to function or to regulate their body and mind.

When the body adapts to the drug, tolerance increases and the effectiveness of the drug decreases. This can lead you to take increasingly larger quantities with each cycle.

Over time you will not experience the same level of rewarding effect that you did in the beginning, you feel worse when the effects wear off, the craving to take more is heightened, and if you do not take more you may experience withdrawal effects.



WITHDRAWAL

When someone stops taking benzos, or takes a reduced amount, they may experience benzodiazepine withdrawal syndrome.

Withdrawal symptoms can occur even after short periods of use, so to prevent symptoms avoid taking benzos for more than a couple of days in a row.

Symptoms can include physical effects such as dizziness, seizures (fits), sickness and diarrhoea, headaches, pain, sensitivity to light, nightmares and difficulty sleeping. Other symptoms can include hallucinations, delusions (very strong beliefs that other people do not share), anxiety and paranoia. The severity will vary depending on the type, frequency of use and quantity of the drug taken.

People will feel the urge to take more benzos to avoid the symptoms of withdrawal. It is dangerous to stop taking benzos suddenly, and the longer you have been taking them without a break, the greater the risks are around stopping.

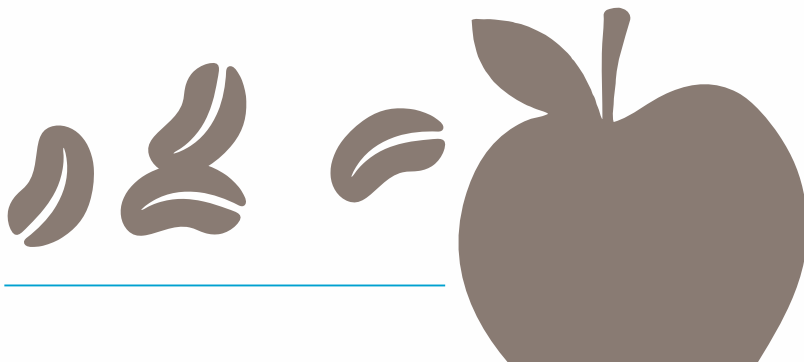
Sudden benzo withdrawal (or withdrawal from other depressant drugs like alcohol and GHB) is risky and can be life threatening. It is important to slowly and steadily reduce the quantity of benzos over time, rather than suddenly stopping. This is called tapering and your GP or local drug service can help with this.

The length of time it takes to taper will depend on the quantity and length of time the benzos were taken for. The Ashton Manual provides a detailed guide on low risk tapering from benzo use: benzo.org.uk/manual

A healthy diet, fresh air, light exercise and lots of rest can help the body to recover. Try to resist taking other drugs (including alcohol) to deal with the withdrawal symptoms. If the symptoms become too much seek medical help and in an emergency call 999.



Be aware that once you stop taking a drug your tolerance to it will reduce. If you choose to take it when your tolerance is reduced it will take a smaller amount to get the intended effect and you are at a greater risk of overdose.



MENTAL HEALTH

The risk of experiencing an issue with your mental health when taking drugs is increased if you are not sleeping well, eating well or are already diagnosed with or experiencing mental health difficulties. Taking drugs in high doses, frequently dosing or taking more than one drug at a time also increases the risk.

If you are taking medication for your mental health, avoid replacing this with benzos that are not prescribed to you. Some mental health medicines can cause significant withdrawal symptoms which can last several weeks and may be worse if stopped suddenly. Stopping your medication can also make it more difficult to manage your mental health.

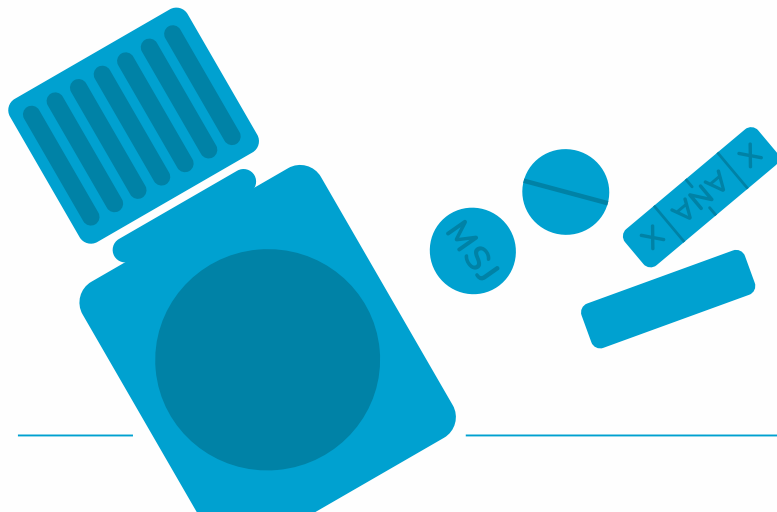
Some people may find that benzos help them to manage the symptoms of anxiety – particularly in social situations. In the short term, benzos may induce relaxation, calmness and euphoria but in the long term they can worsen mental health and exacerbate feelings of depression, anxiety and panic.



If you are concerned about your mental health, looking to change your medication, or are experiencing challenges to keeping well, visit your GP or other medical provider.

If you have difficult thoughts or intentions, it's important to talk about it. Speak to someone you trust. You can contact:

The Samaritans on 116 123 or at [samaritans.org](https://www.samaritans.org)
or Breathing Space on 0800 83 85 84 or at [breathingspace.scot](https://www.breathingspace.scot)
or CALM on 0800 58 58 58 or at [thecalmzone.net](https://www.thecalmzone.net)



IN AN EMERGENCY

Signs of a depressant overdose...

- Confusion
- Unconsciousness – won't wake with a shout or a shake
- Severe nausea and vomiting
- Fitting
- Difficulty breathing
- Snoring/raspy breathing
- Blue/pale tingeing of knees, hands and lips
- Slow or erratic pulse (heartbeat)
- Pale, cold and clammy skin



CREW

DO!

- Keep calm
- Get help
- Call 999 (or 112)
- Give as much information as possible including location, age, gender, what has happened and be honest about what they have taken
- Stay with the casualty
- If they are distressed, sit them somewhere calm and give reassurance
- If they are fitting, keep the area safe and move anything that could hurt them
- If they are overheating, take them somewhere cooler, loosen tight clothing, cool them using fans or wet towels and give them small sips of water
- If they are unconscious, put in the recovery position (or on their side) and monitor breathing

- If they stop breathing, call 999 and start chest compressions. The call handler will provide guidance and support on what to do
- If you have someone there to help, ask them to get an automated external defibrillator
- Carry a resuscitation face mask/shield. If you are unable or unwilling to give rescue breaths, give chest compressions only
- If you think opioids may be involved (e.g. they have taken heroin or are on a methadone prescription) administer naloxone

DON'T!

- Leave them alone
- Inflict excessive pain to wake them
- Give any other drug
- Encourage them to vomit
- Give them anything to eat or drink (apart from small sips of water)
- Put them in a bath/shower
- Walk them about or attempt to restrain them

EAT WELL

Short-term use of benzodiazepines may lead to weight loss and a decrease in appetite. Longer-term use may result in increased appetite and weight gain. These side effects will depend on a variety of factors including other medication or other drugs that you may be taking.

When you are taking drugs on a regular basis it can make it easy to skip meals or miss out on healthy meals. Eat a healthy meal at least one hour before taking drugs, to reduce the risk of nausea.

When the effects wear off people may find themselves bingeing on high-fat, low-nutrient foods. Poor nutrition can lower your immune system leaving you more prone to coughs and colds.

Try planning and preparing a week of meals in advance - this will make you less likely to skip meals.

Carry healthy snacks with you - nuts, seeds and bananas are a great source of quick vitamins and essential nutrients. Make sure you are aiming for a good mix of calcium, protein, iron and healthy fats. Try to pack lots of vitamins into your diet and take vitamin supplements if needed.

If you are tempted to take drugs to avoid weight gain, then consult your GP or nutritionist. For support on eating disorders, visit

beateatingdisorders.org.uk

If you are diabetic, it is important to check your blood sugar is at a safe level before, during and after taking drugs. Read our Drugs and Diabetes resource for more info:

crew.scot/drugs-and-diabetes



SLEEP MANAGEMENT

Regular drug use can make it difficult to fall asleep and stay asleep. It also reduces sleep quality and you may find that you do not dream as frequently while taking benzos or you may experience vivid dreams that are unsettling.

It can be tempting to take benzos and other depressants to help with sleep but while some may find this effective in the short term, it can lead to long-term issues with natural sleep management.

If you have been out, take an hour to wind down before going to bed. Mindfulness and breathing exercises can help you relax.

Avoid taking stimulants (including caffeinated drinks) in the few hours before bedtime.

Try to exercise each day. Even short periods of light exercise can improve sleep quality.

Maintain a regular sleep routine and stick to it.

Avoid eating, drinking alcohol and using electronic devices close to bedtime. Use an app or change the settings on your phone to reduce the blue light emitted from the screen.

Keep your bedroom cool and dark when you are trying to sleep. Make your bed comfortable.

Keep your sheets clean and use a good pillow.

Try to sleep on your side if you have been taking benzos. This will help to keep your airway clear.

TRYING TO STOP

Keep an eye on how often you are taking benzos. If you are taking them more frequently than intended, it might be a good idea to lay off them for a while - if you have been taking benzos for a few days in a row you may have developed a tolerance and should be aware of sudden withdrawal.

Think about your use - what are the pros and cons? Write them down.

Set small, manageable and measurable goals, like increasing the length of time between each dose.

Only carry what you plan on taking. If you have a full packet of pills in your pocket it is easy to take more than you anticipated. Leave what you don't need at home (in a safe place).

Track patterns of use and identify strategies for managing triggers. If you usually take benzos with certain people, hold off seeing them for a bit. If you always end up taking them after you have had a few beers, avoid drinking.



Manage your cravings. Try natural highs such as light exercise and meditation. Many people find mindfulness to be a useful practice to develop.

Crew let independent community groups use our space. For a timetable of the fellowship groups held at Crew, such as Narcotics Anonymous, visit crew.scot/contact-us

If you are taking street benzos and want to stop, your prescriber may offer you a prescription for medicinal benzodiazepines. If you accept this treatment option, make sure you follow the instructions and dose regime and keep your medication to yourself.

Drug services can help support you to reduce, stabilise or cease drug taking. Consider talking to someone if you are finding it difficult to stop taking drugs. For drug services in your area, visit: scottishdrugservices.com



WORRIED ABOUT OTHERS?

If someone is having problems with benzodiazepines it can have extreme consequences for those around them.

It's not always easy to help but your support is a powerful motivator. Try to have open and honest conversations with the person when you are both calm and sober.

Let them know how their behaviour is affecting you and others, and that your concerns come from a place of love. It can be helpful to write down what you want to say in advance.

It is always of primary importance to keep yourself (and your dependants) safe. It can be helpful to chat about issues you are experiencing with people you trust. For information on ways to help, as well as details of family services and support (either online, over the phone, in person or in a group), visit: sfad.org.uk



If you are in Edinburgh and the Lothians and are concerned about your own, or a loved one's drug use, Crew is here for you! We provide free, inclusive, non-judgemental counselling for those experiencing problems related to psychostimulant drugs.

To find out more, call 0131 220 3404
or visit: crew.scot

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