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England

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29 September 2017

Dear Mr Tomalin

Re: Regulation 28 Report – Carly Marie Gordon (died 25.05.2016)

Thank you for your letter and Regulation 28 report dated 17th August 2017.

I am very sorry to hear of the tragic death of Ms Gordon and please extend my sympathy to her family.

You raise two concerns:

- 1) The long term use of shorter acting benzodiazepine instead of longer acting benzodiazepine in accordance with the British Association of Psychopharmacology guidelines should be followed when patients are prescribed this drug to avoid dependence; and
- 2) All patients who receive this drug for an extended period of time should be reviewed by their medical advisors to assess their suitability for the long term use of this particular medication.

In November 2013 the Psychopharmacology Special Interest Group of the Royal College of Psychiatrists and the British Association for Psychopharmacology (BAP) published a joint statement, with recommendations on the use of benzodiazepines in a paper entitled *Benzodiazepines: Risks and benefits* (*Journal of Psychopharmacology* 27(11) 967–971).

In their paper the authors recognised the existence of widespread concerns about the use of benzodiazepines and related drugs. They also stated that whenever benzodiazepines are prescribed, the potential for dependence or other harmful effects must be considered. They also recognised that, when prescribing these medicines, the risks of dependence associated with their long-term use should be balanced against the benefits of using short or intermittent courses of

these agents, as well as the risks of the underlying conditions for which treatment is being provided.

Whilst recognising the difficulties facing clinicians, the BAP guidance entitled *Benzodiazepines: Risks and benefits* supports an individualised approach to prescribing, based on clinical judgement, with the involvement of patients and carers (where appropriate) in the prescribing decision.

Overall, the BAP guidance supports best practice as the short term or intermittent use of benzodiazepines, but also accepts that for a minority of patients longer term treatment may be appropriate; but in all cases vigilance of potential hazards is required throughout treatment.

“The balance of risks and benefits with benzodiazepines or alternative interventions in an individual patient can be hard to assess, and is ultimately a matter of clinical judgment.”

Advice on best practice in the management of benzodiazepine withdrawal is available through the National Institute of Health and Care Excellence (NICE) series of clinical knowledge summaries (CKS) available at <https://cks.nice.org.uk/benzodiazepine-and-z-drug-withdrawal#!scenario>.

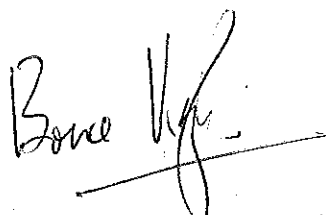
This topic covers the management of people who are prescribed long term benzodiazepine treatment and offers advice on the management of withdrawal of treatment.

It is important that prescribers and pharmacists are aware of the risks associated with the use of benzodiazepines when prescribing or dispensing these medicines. In response to the specific concerns raised in your letter, I will ask [REDACTED] our National Clinical Director for mental health, and [REDACTED] our Head of Mental Health and LD Medicines Strategy to write to all medical directors and chief pharmacists in mental health trusts in England to;

- 1) Ask them to take a lead on raising prescribers' and pharmacists' awareness of the risks associated with benzodiazepine prescribing and withdrawal across their local health community;
- 2) Stress the importance of regular and close monitoring of patients who are withdrawing from benzodiazepines;
- 3) Highlight the risks associated with short acting benzodiazepines in particular;
- 4) Remind them of the statements and guidance published by the BAP and NICE clinical knowledge summaries; and
- 5) Raise the issues within their local area prescribing committees to ensure dissemination across both primary and secondary care prescribers.

I hope this provides you with the reassurance that NHS England is responding to your concerns and taking action to raise awareness of best practice guidance on benzodiazepine prescribing.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Bruce Keogh', with a horizontal line drawn through the bottom of the signature.

Professor Sir Bruce Keogh KBE, MD, DSc, FRCS, FRCP
National Medical Director
NHS England