

Diagnosing Benzodiazepine Withdrawal Syndrome (BZWS)

Patient Presentation

1. Higher dose and/or longer use of BZDs increases risk of BZWS¹
2. Over 4 weeks' use is correlated with BZWS; intermittent use or 2-4 weeks use has lower probability of BZWS²
3. BZWS symptoms are varied, with no required subset³
4. BZWS symptoms can be intermittent and shifting, with no apparent pattern⁴
5. A particular symptom can range from absent to intense over hours to weeks, with no apparent pattern⁵

Selected Psychological BZWS Symptoms⁶

1. Anxiety states, Agitation
2. Irritability / Restlessness
3. Depersonalization / Derealization
4. Depression / Sadness / Suicidality
5. Excitability / Mood swings
6. Paranoia / Feelings of persecution

Selected Neurophysiologic BZWS Symptoms⁶

1. Hyperacusis / Tinnitus
2. Cutaneous sensory alterations
3. Dizziness / Lightheadedness
4. Dyscognition
5. Muscular / Neuromuscular symptoms
6. Pain – Ache / Neuropathic / Local or diffuse
7. Sexual dysfunction
8. Sleep problems
9. Smell, taste and visual alterations

Selected Somatic BZWS Symptoms⁶

1. Appetite change / Weight gain or loss
2. Dry mouth / Thirst
3. Menstrual abnormalities / Breast engorgement
4. Fatigue / Malaise
5. Food intolerance
6. Hyperventilation or Dyspnea

Cardiovascular: Flushing / Palpitations / Tachycardia / BP ↑ or ↓

GI: Gas / Constipation / Diarrhea / Dysphagia / Nausea / Vomiting

Urinary: Frequency / Incontinence / Polyuria

Common BZWS Look-Alikes and Misdiagnoses

1. Increase of original complaint (e.g., anxiety)
2. Multiple Sclerosis
3. Fibromyalgia or Chronic Fatigue Syndrome
4. Lyme disease
5. Somatic Symptom Disorder (psychosomatic, psychogenic)

The best indicator of BZD dependence, BZD Withdrawal Syndrome, or BZD Injury Syndrome is an increase in symptom severity or onset of new symptoms with reduced dose.⁷

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