

# **COPD sufferers prescribed most sedatives**

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New research has revealed that Norwegian COPD sufferers are prescribed even more sedatives than psychiatric patients. The researchers behind the study believe that this is problematic because the drugs in question are addictive and inhibit lung function.

The results were published recently in an article in the International Journal of Chronic Obstructive Pulmonary Disease, and highlight the use of benzodiazepine sedatives among COPD patients.

"We find that large amounts of sedatives are prescribed to this group of patients", says Thomas Halvorsen, who is a health services researcher at SINTEF, adding that the disease is physically very stressful to live with.

The study was carried out in close collaboration with the former SINTEF researcher Pål Erling Martinussen, who is now an associate professor at NTNU. Together, they conclude that the amount of benzodiazepines prescribed to this group of patients is surprisingly high.

The results from their study indicate that as many as 69 per cent of COPD sufferers are taking these addictive medications. Women are prescribed approximately 25 per cent more of these drugs than their fellow male patients.

## **More than for psychiatric illnesses**

The study is based on data taken from the Norwegian Patient Register and the Prescriptions Register. This means that all patients, 5,380 in

total, who were diagnosed with COPD and admitted to hospital during 2009, were included in the analyses.

The use of benzodiazepines among COPD patients is revealed to be significantly higher than that in all other major patient groups, including those involving [psychiatric illnesses](#).

"In psychiatry the average is 52 per cent", says Halvorsen. "These figures are taken from a major survey that examined the use of addictive prescription drugs among the population as a whole", he says.

## **Compromises lung function**

COPD is a disease that develops gradually and often over many years. For this reason, it is mainly the elderly who receive the diagnosis, and this is why the high levels of drug use are worrying researchers. Elderly people have a lower tolerance to benzodiazepines than the young.

"Doctors are well aware that benzodiazepines inhibit [lung function](#), but feel nevertheless that in some cases it is necessary to prescribe these drugs in order to alleviate the physical stresses caused to their patients by the disease", says Halvorsen. "However, the problem is that in many cases the amounts prescribed are disturbingly high. Our study demonstrates that doctors should be more careful about what they are prescribing", he adds. Halvorsen believes that these Norwegian findings are applicable to other countries.

## **Different doctors, many visits**

The results of the survey revealed a clear correlation between the number of visits patients made to their doctors and the number of prescriptions issued. The more points of contact a COPD patient has

within the health system, the greater the volume of drugs prescribed.

"Because the discharge summaries sent from hospitals to the patients' general practitioners (GPs) are often written so late that doctors may encounter difficulties in obtaining the overall picture", says Halvorsen.

"The first doctor doesn't know what the other is doing, and this is troubling for many reasons. These medications are addictive and it may be dangerous to take two different types of drugs at the same time", he explains.

The two researchers behind the study are now encouraging doctors to better coordinate their treatments with other treatment providers. They also believe that doctors have to be more receptive to treatment programmes other than sedatives, such as conversational therapies and coping techniques.

## **A doctor's view: a difficult balancing act may cause high levels of sedative use**

Professor and GP Arnulf Langhammer is Project Manager for the Lung Project being carried out by the Nord-Trøndelag medical research centre (HUNT). He believes that the researchers' article is a wake-up call, and has sent the following comments to Gemini.no:

"This is an interesting study that reveals high levels of sedative use among COPD sufferers.

The study includes COPD patients who have been admitted to hospital – in other words, most of whom are suffering from acute cases of the disease. This group of patients suffers from multiple health complaints, commonly including anxiety problems that exacerbate patients' breathing difficulties. And in turn, of course, these breathing difficulties generate

further anxiety. The treatment of anxiety will thus be an essential step for these patients.

The study demonstrates that sedative use is greatest among the group with the highest GP consultation frequency. This may also indicate that doctors are trying out strategies other than simply prescribing drugs. With the exception of the most acute COPD sufferers, I am not so sure that these drugs have a detrimental effect on lung function.

This is a helpful wake-up call and should contribute towards stimulating greater efforts in promoting the uses of non-drug treatment strategies for anxiety before patients with COPD develop the disease in its acute form. However, both benzodiazepines and low doses of opiates will continue to be important treatments for the alleviation of symptoms among patients suffering from acute cases of COPD."

## **Facts about COPD (Chronic Obstructive Pulmonary Disease)**

COPD affects the lung tissue, causing the patient to suffer gradual deterioration in his or her ability to breathe. Development of the disease can be slowed down, but not reversed. The condition can become worse periodically, and can trigger seizures similar to asthma attacks and coughing fits. Many sufferers are regularly admitted to hospital. Feelings of anxiety and fear are common among this group of [patients](#), among other things because many suffer difficulties in sleeping. Smoking is the most common cause of COPD, but some people also contract the disease as a result of daily exposure to smoke or chemical processes in unhealthy working environments. The World Health Organisation (WHO) has estimated that in 2030 COPD will be the fourth most common cause of death worldwide.

Provided by SINTEF

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