

Sedatives appear to be safe in alcohol withdrawal syndrome

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(HealthDay)—For patients with alcohol withdrawal syndrome, treatment with high-dose intravenous sedatives is not associated with excess morbidity or mortality, according to a study published in the February issue of the *American Journal of Respiratory and Critical Care Medicine*.

Robert Stewart, M.D., from Texas A&M University in College Station, and colleagues conducted an observational cohort study involving 188 patients hospitalized with alcohol withdrawal syndrome. Sixteen percent of the patients developed pneumonia and 20.2 percent required intubation.

The researchers found that all patients received lorazepam and 170 received midazolam, via continuous intravenous infusion in all but two cases. Nineteen patients received propofol and 19 received dexmedetomidine. Compared with nonintubated patients, intubated patients received significantly more benzodiazepine (median total dose, 761 versus 229 mg of lorazepam equivalent; P patients (median, 15 versus six days; $P \leq 0.0001$). One patient died during hospitalization.

"In this single-center, observational study, where endotracheal intubation was deferred until aspiration or cardiopulmonary decompensation, [treatment](#) of alcohol withdrawal syndrome with high-dose, continuously infused sedating medications was not associated with excess morbidity or [mortality](#)," the authors write.

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