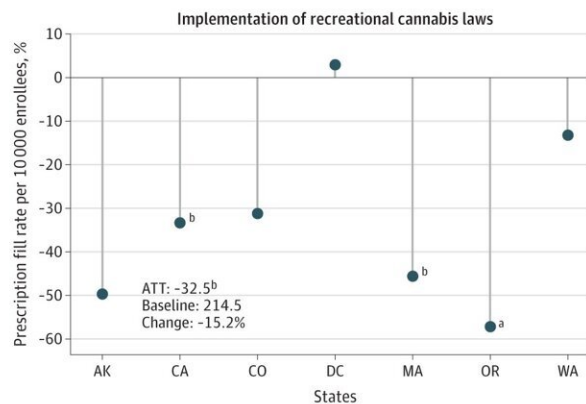
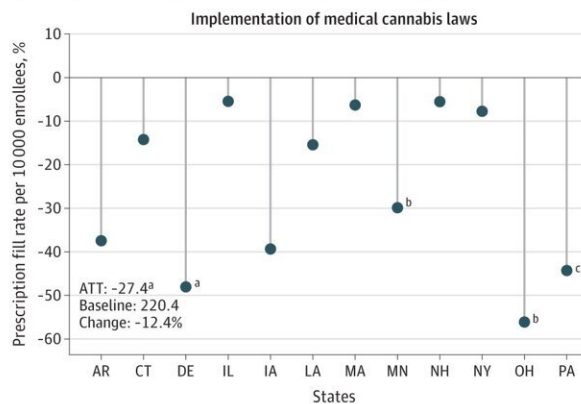


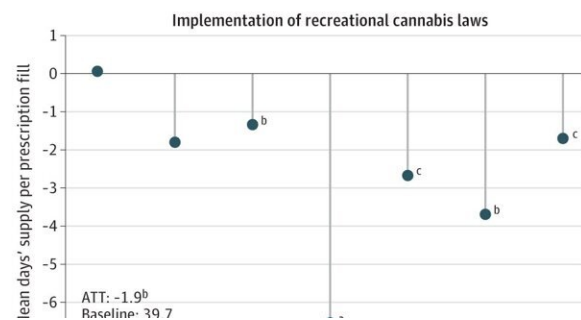
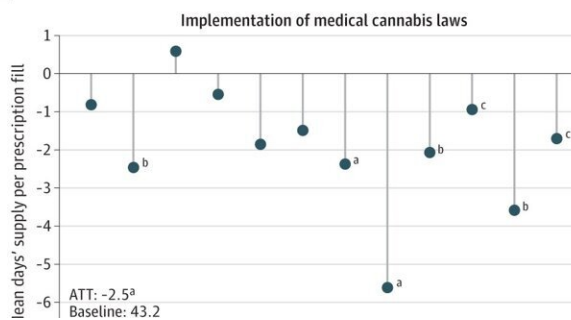
# Reductions seen in benzodiazepine dispensing when states relax medical, recreational cannabis access

September 11 2024, by Bob Yirka

**A** Prescription fill rate per 10000 enrollees (extensive margin)



**B** Mean days' supply per prescription fill (intensive margin)



Benzodiazepine prescription fills: Case study mean treatment effects. Credit: *JAMA Network Open* (2024). DOI: 10.1001/jamanetworkopen.2024.32021

A small team of mental and public policy specialists from the Georgia

Institute of Technology, the University of Georgia and Indiana University has found that when states relax or rescind laws governing the use of marijuana, reductions occur in benzodiazepine dispensing.

As [reported](#) in *JAMA Network Open*, the group studied dispensation statistics for several drugs used to treat [mental illnesses](#) in states where marijuana laws were changed.

Benzodiazepines are a class of drugs that work to depress the central nervous system, thereby producing a sedating effect. They are commonly prescribed by psychiatrists to patients with mental health diagnoses including anxiety, insomnia and panic disorders.

Prior research has suggested that [medicinal cannabis](#) is often used to treat many of the same types of ailments, and anecdotal evidence suggests some people use the drug recreationally for similar purposes.

The team wondered whether legally allowing greater access to [cannabis use](#) might lead to reductions in the prescription of other drugs. To find out, they compared dispensing rates in states before and after cannabis laws were changed.

The researchers studied the medical records of about 10 million patients from 2007 through 2020 who were covered by [insurance policies](#) that paid for cannabis prescriptions, focusing most specifically on those prescribed one of five types of psychotropic medications: benzodiazepines, antidepressants, antipsychotics, barbiturates and sleep medications.

They also looked at what happened to the dispensing rates after [new legislation](#) regarding access to cannabis in several states over the same time period.

They found no changes in dispensing rates for four of the five types of drugs. For the fifth, benzodiazepines, the researchers found what they describe as consistent reductions in benzodiazepine dispensing in states where legislation allowed access to either medicinal cannabis, recreational use of the drug, or both.

The team suggests that changing cannabis access laws can have an impact on the dispensing rates of other drugs. They also note that because changes can be measured at the state level, new avenues of research regarding the impact of cannabis research are opening up as [state laws](#) are changed.

**More information:** Ashley C. Bradford et al, Cannabis Laws and Utilization of Medications for the Treatment of Mental Health Disorders, *JAMA Network Open* (2024). [DOI: 10.1001/jamanetworkopen.2024.32021](#)

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