

ALCOHOL FINDINGS **Your selected document**

This entry is our account of a review or synthesis of research findings selected by Drug and Alcohol Findings as particularly relevant to improving outcomes from drug or alcohol interventions in the UK. The original review was not published by Findings; click on the [Title](#) to obtain copies. Links to source documents are in [blue](#). Hover mouse over [orange](#) text for explanatory notes. The Summary is intended to convey the findings and views expressed in the review.

Send email address for updates

SEND [About update service](#)

[▶ Title and link for copying](#) [▶ Comment/query to editor](#) [▶ Tweet](#)

▶ **Benzodiazepines for alcohol withdrawal.**

Amato L., Minozzi S., Vecchi S. et al.

Cochrane Database of Systematic Reviews: 2010, 3, Art. No.: CD005063.

Rigorous review and synthesis of randomised trials indicates the superiority of benzodiazepines for controlling the potentially serious medical consequences of withdrawing from dependent drinking.

SUMMARY Benzodiazepines have been widely used for the treatment of alcohol withdrawal symptoms, but it is not known whether different benzodiazepines and different regimens of administration may have the same merits. This review aimed to evaluate the effectiveness and safety of benzodiazepines in the treatment of alcohol withdrawal by synthesising results from trials which had allocated patients at random to a benzodiazepine versus a placebo, some other pharmacological treatment, or another benzodiazepine. Sixty-four such studies were found involving 4,309 participants.

Main findings

Compared to placebos, three studies with 324 participants indicated that benzodiazepines were significantly better at preventing seizures, but there were no statistically significant differences for the other outcomes considered.

Comparing to other drugs, there were non-significant trends in favour of benzodiazepines in respect of seizures and delirium, severe life-threatening side-effects, treatment drop-outs, drop-outs due to side-effects, and global improvement in alcohol withdrawal syndromes. However, there were non-significant trend in favour of other drugs for alcohol withdrawal symptoms as measured by pre-specified scales at 48 hours and at the end of treatment.

There were no statistically significant differences between different benzodiazepines, but chlordiazepoxide performed better than other variants.

There were no statistically significant improvements consequent upon adding benzodiazepines to other drugs.

Drugs can be administered according to a fixed schedule or as indicated by the severity of symptoms. Results from a single study with 159 participants favoured a symptom-triggered regimen, which led to lower alcohol withdrawal severity scores at the end of treatment. However, differences in isolated trials should be interpreted very cautiously.

The authors' conclusions

Compared to placebo, benzodiazepines showed a protective benefit against alcohol withdrawal symptoms, in particular seizures, and compared to other drugs, potentially protective benefits in respect of several outcomes. Nevertheless, no definite conclusions about the effectiveness and safety of benzodiazepines was possible, because of differences between the trials both in interventions and assessments of outcomes.

Last revised 19 June 2015. First uploaded 19 June 2015

- ▶ [Comment/query to editor](#)
- ▶ [Give us your feedback on the site \(two-minute survey\)](#)
- ▶ [Open Effectiveness Bank home page](#)
- ▶ [Add your name to the mailing list](#) to be alerted to new studies and other site updates

Top 10 most closely related documents on this site. For more try a [subject](#) or [free text search](#)

- STUDY 2010 [An open trial of gabapentin in acute alcohol withdrawal using an oral loading protocol](#)
- REVIEW 2010 [Gamma-hydroxybutyrate \(GHB\) for treatment of alcohol withdrawal and prevention of relapses](#)
- REVIEW 2012 [BAP updated guidelines: evidence-based guidelines for the pharmacological management of substance abuse, harmful use, addiction and comorbidity: recommendations from BAP](#)
- REVIEW 2008 [Treating pregnant women dependent on opioids is not the same as treating pregnancy and opioid dependence: a knowledge synthesis for better treatment for women and neonates](#)
- STUDY 2010 [Disulfiram in severe alcoholism – an open controlled study](#)
- STUDY 2012 [Audit of alcohol detoxification at Leeds Addiction Unit](#)
- REVIEW 2010 [Opioid antagonists for alcohol dependence](#)
- REVIEW 2003 [Lofexidine safe and effective in opiate detoxification](#)
- REVIEW 2012 [Acamprosate for alcohol dependence: a sex-specific meta-analysis based on individual patient data](#)
- REVIEW 2009 [Traditional medicine in the treatment of drug addiction](#)



Key points

This Cochrane review summarises evidence from 64 randomised controlled trials evaluating the effectiveness and safety of benzodiazepines in the treatment of alcohol withdrawal symptoms.

The available data show that benzodiazepines are effective against alcohol withdrawal seizures when compared to placebo and there is a potentially protective benefit for many outcomes when compared with other drugs.

Data on safety outcomes is sparse and fragmented.