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Involuntary tranquilliser addiction

Motion for a resolution

tabled by Mr Jim DOBBIN and other members of the Assembly

This motion has not been discussed in the Assembly and commits only those who have signed it

In 1990 the Committee of Ministers of the Council of Europe adopted the Resolution AP(90)3 on the prescription of benzodiazepines. Since 1990 no progress on involuntary addiction has been reported in Europe although all member States of the Council of Europe are affected by the problem.

Involuntary tranquilliser addiction is the unnecessary dependence of patients upon misprescribed mind-altering tranquillisers without informed consent. The Parliamentary Assembly recognises involuntary tranquilliser addiction as a serious illness.

In the United Kingdom an estimated 1.5 million patients are long term tranquilliser users. Tranquilliser addiction is known to cause disabling side effects such as cognitive impairment, pseudo-dementia and damage to the foetus. Addicted patients have suffered the loss of their homes, jobs, careers and marriages.

Involuntary tranquilliser addiction is a physical illness and originates from misprescribing by doctors and psychiatrists. It is not caused by psychological problems and should not be confused with tranquilliser misuse.

Withdrawal from tranquillisers can take twelve months or more. A safe and successful tapering withdrawal method has been designed by Professor Heather Ashton and developed by charitable groups such as Bristol Tranquilliser Project and Oldham ADS in the United Kingdom.

In view of the individual and public health implications of involuntary tranquilliser addiction the Assembly calls on member States to:

- recognise involuntary tranquilliser addiction as a serious illness;
- enforce prescribing guidelines according to their own regulations;
- introduce specialist tranquilliser withdrawal services.

Signed (see overleaf)



Signed¹:

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