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Conference Abstract

A meta-synthesis of clinicians' experiences and perceptions of benzodiazepine prescribing: developing an integrated approach for care for insomnia and sleep problems

Niroshan Siriwardena, Professor of Primary and Prehospital Health Care, Community and Health Research Unit, School of Health and Social Care, University of Lincoln, Lincoln LN6 7TS, United Kingdom

Coral Sirdifield, University of Lincoln, United Kingdom

Sibyl Anthierens, University of Antwerp, Belgium

Hanne Creupelandt, University of Ghent, Belgium

Susan Chipchase, University of Lincoln, United Kingdom

Thierry Christiaens, University of Ghent, Belgium

Correspondence to: **Niroshan Siriwardena**, School of Health and Social Care, University of Lincoln, Lincoln LN6 7TS, United Kingdom, E-mail: nsiriwardena@lincoln.ac.uk

Abstract

Purpose: To investigate clinicians' experiences and perceptions of benzodiazepine prescribing.

Theory: To develop a theory for improving benzodiazepine prescribing practice, exploring implications for an integrated health services approach.

Methods: A multidisciplinary team conducted a systematic review and meta-synthesis of qualitative studies published in Western settings between January 1990 and August 2011 using 'thematic synthesis'. Study quality was assessed using the Critical Appraisal Skills Programme (CASP) checklist.

Findings: We included eight studies. Prescribing was complex and demanding within the constraints of daily practice, leading to variable prescribing by individual practitioners and between GPs. Decisions were influenced by the changing context of GPs' work, their views of their own role and responsibilities, and their perceptions of benzodiazepines and alternative treatment options. Clinical practice was also influenced by GPs' perception of patient expectations, the relationship with their patient, and whether they were initiating, continuing or withdrawing benzodiazepines.

Discussion: Benzodiazepine prescribing could be improved in line with current guidance through improved communication with patients, ensuring GPs accept responsibility for deciding whether or not to continue prescribing for patients who were previously managed in secondary care,

education and training of primary and secondary care clinicians on other treatments and greater provision of alternatives to drugs.

Keywords:

sleep initiation and maintenance disorders, systematic review, benzodiazepines, primary health care, therapeutics

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