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The Impact of Covid-19 on Medical Professionals' Benzodiazepine Prescribing Practices

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Dear Editor,

Benzodiazepine (BZD) prescribing is common in Ireland[1]. Current guidelines recommend that prescriptions should be short term (< 4 weeks), yet long-term prescribing persists[2]. BZD misuse affects individuals, their families and society at large due to hospitalizations, substance dependence treatment and crime[3]. Despite having medical guidelines for appropriate prescribing, BZD management and withdrawal is, typically, poorly managed and has a reputation for being difficult for doctors and patients. Due to the Covid-19 pandemic health systems worldwide have had to adapt to meet varied health needs[4]. This study explores how Covid-19 has impacted medical professionals' prescribing practices of BZD's.

In early 2020, medical professionals working in General Practice, Addiction Services, Emergency Departments and Psychiatric Settings, in the HSE South/Southwest region of Ireland were recruited by HSE Addictions Services South. Focus groups were conducted to capture how medical professionals manage individuals who use BZD's in their practice and how Covid-19 has impacted upon their prescribing practices. Ethical approval was granted by the UCC, School of Applied Psychology ethics committee. In total, 6 online focus groups (52 participants) were carried out between July and November 2020.

Qualitative framework analysis surrounding the impact of Covid-19 identified three main themes: how telemedicine has sometimes reduced the pressure felt by medical professionals to prescribe benzodiazepines; the benefits of e-prescribing for prescription management; the effectiveness of the harm reduction approach that was implemented nationally due to Covid-19 restrictions. In relation to reduced pressure, one GP noted that: *"you can issue your script without the person standing over you or them being in your presence so it allows a bit more time and…a little more headspace to start a good change".* Participants also identified some difficulties resulting from Covid-19, including the uncertainty of patient well-being due to phone consultations and non-attendance. The importance of continuous evaluation of Covid-19's impact was evident across all 6 focus groups.

From this study, it appears there have been some positive changes to medical practitioners' prescribing practices, as a result of Covid-19. Thus, telemedicine, e-prescribing and harm reduction approach, have demonstrated some positive changes from the practitioners' perspective. The outcome for patients, though, was not explored in this study and remains unclear. Future research would benefit from continuous evaluation of the impact of Covid-19 on medical practice and the health of service users within Ireland.

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