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Substance abuse and drug dependence are frequently observed among inmates. Clonazepam is a benzodiazepine approved only for treatment of epilepsy. Despite this, often correctional health care professionals inappropriately prescribed high doses of Clonazepam for the treatment of anxiety and insomnia in prison. It has therefore emerged as a drug of abuse in prison.

In this study we describe the pathway of removal of Clonazepam in an Italian prison.

First, all correctional health care professionals, together with psychiatrist, met to discuss the opportunity and the way to remove this drug from the formulary, considering the clinical and environmental impact on doing this. Psychiatrist recommended guidelines for substitution with others benzodiazepines if necessary.

During the next year (2012) we observed differences in the prescription of benzodiazepines and modifications in inmates behavior (as self-injury, aggressiveness or suicidal behavior), if any. Moreover, we registered if antipsychotics and antidepressant medications were necessary to manage the patients during the removal. We considered the mean number of the inmates in 2011 (n=348) and in 2012 (n=342). Drug doses are reported in number of tablets.

In 2012, the use of Clonazepam, limited to the treatment of epilepsy, reduced (from about 47.000 to 140 tablets) whereas the use of Delorazepam and Triazolam increased. The consumption of other benzodiazepines, antipsychotics and antidepressant medications remained substantially unchanged. Also frequency of suicidal and self-injurious behaviors did not change.

These conclusions support the decision to remove clonazepam for the treatment of anxiety or sleep disorders in prison.