

Rolleston Central Health: Prescribing Drugs of Dependence Policy

Policy statement

Drugs of dependence, defined as prescription medications that have a therapeutic need but also a higher potential for misuse, abuse and dependence¹; even if used as prescribed can have adverse consequences. These medications will not be prescribed at Rolleston Central Health until the evidence of clinical need is deemed by the doctor to outweigh the risks of use. A growing body of evidence suggests that if these medications are used for long periods, they can have harmful side effects, including anxiety symptoms, memory and sleep problems, and they can be addictive. We do not recommend long-term use.

Rolleston Central Health has a team approach to the prescribing of drugs of dependence and medications with a higher potential for misuse², which include but are not limited to:

- Adult methylphenidate
- Benzodiazepines
- Dexamphetamine
- Duromine
- Gabapentinoids
- Medicinal cannabis
- Opioid analgesics
- Quetiapine
- Tramadol
- Zopiclone

All patients having drugs of dependence prescribed must be made aware that their case will be discussed with the team of GPs to confirm prescribing remains appropriate and within the guidelines of the New Zealand Medical Council guidelines for Good Prescribing Practice.³

If you are new to the practice

- It may take time to get accurate medical information about your condition. Until such information is available, your GP may choose not to prescribe any medication.
- Your GP may decide not to continue prescribing a medication previously prescribed for you. It may be determined that such a medication is not suitable.

Requirements for patients who are prescribed drugs of dependence

- Patients will be required to sign a Pre-Treatment Agreement for Drugs of Dependence, which details our practice's expectations when prescribing drugs of dependence. This contract details your responsibilities as a patient taking drugs of dependence, any prescription issues, advice on taking your medications, how we will monitor your care and the standard of behaviour that are expected.
- Patients will have their notes audited and discussed in the Doctor's Team Meeting three-monthly and the result of the team discussion will be documented in their clinical notes.
- If a patient requests an increase in their medication, the GP will likely review this with a colleague prior to consenting.
- If there is any doubt about the genuine need for this medication, advice will be sought from a GP colleague.
- If it appears that there are no demonstrable benefits to daily function or quality of life from the medication, the GP will gradually taper off the dose as directed.

Authorised by: Dr Philip Schroeder

Last reviewed: June 2022

For two yearly review

¹ [Drugs-of-dependence-responding-to-requests.pdf \(racgp.org.au\)](#)

² [Best Practice Advocacy Centre New Zealand \(bpac.org.nz\)](#)

³ [Good prescribing practice 10420 \(002\).pdf \(mcnz.org.nz\)](#)