

Lorazepam

Ativan, Loreev XR, a benzodiazepine, a fast-acting calming medicine

Lorazepam eases intense anxiety and agitation quickly, and it is gentle on the liver compared with similar medicines.

WHAT IT TREATS

Anxiety, agitation, seizures

HOW YOU TAKE IT

By mouth, as prescribed

WHEN IT WORKS

20 to 40 minutes

HABIT FORMING

Yes, your body adapts

⚠️ IMPORTANT SAFETY WARNING

Mixing **lorazepam** with opioids or alcohol can slow or stop your breathing. Your body comes to depend on it, so stopping suddenly can cause seizures and can be life-threatening. Only your prescriber tapers it. Store it safely; others may misuse it.

① WHAT THIS MEDICINE DOES

- **Lorazepam** is a benzodiazepine. It turns down the brain's alarm signal, so intense anxiety and agitation settle quickly.
- It is also used in hospitals for seizures, for alcohol withdrawal, and for nausea during cancer treatment.
- Your liver handles it in a simpler way than most similar medicines, so it is often chosen for people with liver trouble.
- It treats the storm, not the weather. Therapy or a daily medicine usually does the longer-term work beside it.

⌚ HOW TO TAKE IT

- Take **lorazepam** exactly as prescribed, whether that is on a schedule or only when symptoms spike. Both are normal.
- You can take it with or without food. If your stomach turns, a few crackers beforehand usually settle things.
- Swallow the extended-release capsule whole, or open it onto applesauce if your pharmacist says your version allows that.
- If you miss a scheduled dose, take it when you remember unless the next is close. Do not take two to catch up.
- Store it out of reach of children and visitors, ideally locked. One tablet can seriously harm a small child.

🔧 WHAT TO EXPECT

- Most people feel calmer within **20 to 40 minutes**, and the effect eases off over roughly six to eight hours.
- Because it wears off, anxiety can return before the next dose. Track that pattern so your prescriber can adjust it.
- With daily use over weeks, the same amount may do less. That is your body adapting, and it is expected, not a failing.
- Working looks like being able to think, breathe, and act again during a hard stretch, not feeling switched off.

♥️ COMMON SIDE EFFECTS

- Sleepiness is the most common effect, strongest in the first hour or two and after any change in how much you take.
- Feeling unsteady or clumsy is common, and falls are a real risk. Take stairs slowly and light the path to the bathroom.
- Memory for things during the medicine's peak can be patchy. Write down anything you will need to recall later.
- Slowed thinking or a next-day fog happens for some. Say so, since timing or the choice of medicine can be changed.
- Dry mouth, headache, or mild nausea can happen. Sip water and eat something small when you take a dose.
- Some people feel restless or short-tempered instead of calm. Report that instead of assuming it is just a bad mood.

⚠️ CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Very slow or shallow breathing, blue lips, or being hard to rouse: call **911** right away.
- A seizure, or heavy shaking and confusion after missed doses: call **911**. A sudden stop can cause this.
- New or worse thoughts of hurting yourself: call your prescriber today, or call or text **988** if you might act.
- A fall with a head injury, or a stretch of time you cannot account for: call your prescriber the same day.

🚫 WHAT TO AVOID

- Opioid pain medicine plus **lorazepam** can stop your breathing. Every prescriber and pharmacist you see needs to know about both.
- Alcohol slows your breathing in the same way, and the two together stack up fast. Skip alcohol on days you take this.
- Do not drive until you know how it affects you, and not for several hours after a dose. Sleepiness sneaks up quietly.
- Check with your pharmacist before adding sleep aids, cold medicine, muscle relaxers, or anything else that causes drowsiness.
- If you are pregnant, nursing, or planning a pregnancy, tell your prescriber. Do not stop on your own while pregnant.

⌚ STOPPING IT SAFELY

- Never stop suddenly. After regular use your body adapts, and an abrupt stop can cause seizures that can be life-threatening.
- Your prescriber sets the taper, cutting a little at a time over weeks or months and pausing whenever you need to.
- Rebound anxiety, poor sleep, and muscle tension are common while tapering and they do fade as your body readjusts.
- Wanting to come off is a reasonable goal. Raise it early so there is time to go slowly instead of scrambling.

❓ QUESTIONS TO ASK

- Is this for daily use, or only for the worst moments?
- Which of my medicines could slow my breathing along with this?
- What would a safe taper look like when I am ready to stop?
- Am I at higher risk of falling, and how can I lower that risk?

Where this information comes from

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NOTE

Sources are listed in APA 7th edition style. This handout is general information about a medicine, not medical advice, and it does not replace the instructions from your own prescriber or pharmacist. Never start, change, or stop a medicine on your own. If you think you are having a serious reaction, call your prescriber; if you cannot breathe, cannot stay awake, or are thinking of harming yourself, call 911 or 988 right away.