

Letter from Jim Dobbin MP to Anne Milton MP,
Public Health Minister, March 5, 2012

5th March 2012

Rt Hon Anne Milton MP
Richmond House
79 Whitehall
London
SW1A 2NS

Dear Anne,

I am writing to thank you for the recent meeting with the Involuntary Tranquilliser Addiction Expert Patients Group, for the interest you have shown in this issue and the commitment you have given to work on this issue. However, I also have to inform you that our group was disappointed with the position set out on behalf of the Department of Health by Earl Howe in the House of Lords in his response to proposed Amendment 107 to the Health and Social Care Bill.

The Earl of Sandwich 107:

(1)Each clinical commissioning group shall have a duty to provide services to those suffering from addiction to and withdrawal from benzodiazepines, selective serotonin reuptake inhibitors and Z-drugs.

(2)In fulfilling this duty, clinical commissioning groups must co-operate with and take account of the good practice of specialised agencies in this field.

This amendment represents the APPGITA proposal for specialised tranquilliser withdrawal services which we have discussed with you. Members of our group were therefore surprised and disappointed with the blunt rejection by Earl Howe of this reasonable suggestion, which we believed was under your consideration.

Not only did Earl Howe reject the proposal, he also insisted that withdrawal services are available for involuntary tranquilliser addiction within existing PCT services. As you know, the APPGITA has contended for many years that such services are non-existent within NHS local services. We have requested details of any such services by Parliamentary Question, correspondence and

at meetings. Caroline Montagu's recent research confirmed there are no services and this has been common knowledge amongst involuntary addicts and campaign groups for decades.

Further to this, upon the rejection of amendment 107 by Earl Howe, both Baroness Findlay and Earl Sandwich suggested the content of amendment 107 should be included within the guidelines provided to the new commissioning bodies. Earl Howe did not agree to that suggestion.

The rejection of amendment 107 effectively returns responsibility for iatrogenic tranquilliser addiction back to where this illness has always resided untreated, with local commissioners. In a time of reorganisation and budget cuts, it seems unlikely that commissioners will be inclined to introduce a new service for so many people, particularly when there is no guidance or allocated funding provided by the Department of Health.

Please will you explain the apparent inconsistencies between Earl Howe's statement in the Lords and our own discussions. For your assistance, I have attached a list of all existing tranquilliser services in the UK known to the APPGITA.

Yours sincerely,

Jim Dobbin MP
Chair APPGITA

cc. Earl Sandwich
Earl Howe
Eric Ollerenshaw MP
Melanie Davis (Camden Mind)
Chris Heffer (DoH)
Professor Heather Ashton
John Perrott
Barry Haslam
Ian Singleton (Bristol Tranquilliser Project)
Baroness Finlay

List of specialised services for Involuntary Tranquilliser addiction in UK

- Belfast Health and Social Care board David McKeown
- Bristol and District Tranquilliser Project

- Bristol, Battle against Tranquillisers
- Camden and Islington, MIND Tranquilliser Service
- Cardiff, Recovery Road
- Mold, Prescribed Medication Support Service
- Newcastle, North-East Council for Addiction
- A) Oldham Tranx B) Alcohol and Drug Services Oldham
- Council for Information on Tranquillisers and Antidepressants
Liverpool
- Bradford Bridge Project