Medication	Dose and Duration	Reason for Administering		
Benzodiazepines— choice varies depending on circumstances	Varies greatly depending on circumstances; may include symptom- triggered, adjunctive, and taper-based dosing alone or in combination			
Thiamine	100 mg po daily, continue indefinitelyPrevention of Wernicke's encephalo			
Folic acid (folate)	1 mg po daily, continue indefinitely	Prevention of folate deficiency		
Levetiracetam	500 mg po bid for 10-14 days (one month for benzodiazepine withdrawal)Seizure prophylaxis			
Ondansetron	4-8 mg po q 6-8 hours prn	Nausea and vomiting		
Aluminum hydroxide/ magnesium hydroxide/ simethicone (Maalox)	10-20 ml suspension po qid prn	GI upset		

## Typical Alcohol and Benzodiazepine Withdrawal Medications

Typical Opioid Withdrawal Medications				
Medication	Dose and Duration	Reason for Administering		
Buprenorphine/ naloxone	Begin taper at least 24 hours after most recent opioid dose or when COWS > 10. 8/2 mg bid X 1 day then 4/1 mg bid X 2 days then 2/0.5 mg bid X 2 days then stop.	Dysphoria and malaise		
Clonidine	0.1-0.2 mg prn q6-8 hours X 5 days	COWS > 6*		
Ondansetron	4-8 mg q6-8 hours prn X 5 days	Nausea and vomiting		
Loperamide	2-4 mg q6-8 hours prn X 5 days	Diarrhea		
Acetaminophen	650 mg q6-8 hours prn X 5 days	Headache, muscle and joint pain		

Naltrexone and Acamprosate Dosing					
Drug	Dose	Effect	Reasons to Use	Contraindications	
Naltrexone	50 mg po daily	Reduces craving	XR naltrexone not avail- able	Decompensated liver failure, on methadone or buprenorphine	
XR-Naltrexone	380 mg IM q4 weeks	Reduces craving	May be effective for patients with comorbid AUD and OUD	Decompensated liver failure, on methadone or buprenorphine	
Acamprosate	666 mg tid, 333 mg tid if CrCl* 30-50	Reduces craving	Can use with methadone or buprenorphine	CrCl<30*	

\*CrCL = Creatinine Clearance (eGFR can be used as an approximation if CrCl is not available)

From the article: "Identifying and Treating Substance Use in Correctional Settings" with **Joshua Sonkiss, MD** *The Carlat Hospital Psychiatry Report*, Volume 5, Number 3&4, April/May/June 2025 www.thecarlatreport.com

## A CARLAT PSYCHIATRY REFERENCE TABLE

and Their Nicknames			
Drug	Nicknames		
Benzodiazepines	Zannies, K-pin, Tranks, Vs		
Bupropion	Barnies, Wellies, Jailhouse Coke		
Buspirone	Booze bar		
Gabapentin	Gabbies, Johnnies, Morontin		
Quetiapine	Suzie-Q, Quell, Q-ball when combined with heroin or other drugs		
Stimulants	Addies, Bennies, Vitamin R, Smarties		
Topiramate	Dopamax, Stupamax		
Trazodone	Sleepeasy		

## Commonly Misused Medications in Correctional Settings and Their Nicknames

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