



Clonazepam induced dysphagia in Geriatric Patients: A Case Report

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Introduction

Swallowing occurs with 56 pairs of muscles controlled by the central nervous system and five

cranial nerves. Because of this, the causes of dysphagia are very varied. Drugs such as

benzodiazepines are known to cause dysphagia, especially in the elderly people. In this case report, we would like to report the case of an elderly patient who experienced sudden onset of dysphagia after taking clonazepam (rivotril).

Case Report

An 82-year-old male patient visit to the outpatient clinic with symptoms of dysphagia that had occurred a month ago. He complained of a cough when eating or drinking water. He had a cerebral infarction in his right cerebrum 12 years ago, but he was doing so without paralysis or difficulty swallowing. His medications included choline alfoscerate, sildozosin, and clonazepam (rivotril). He had been taking rivotril for two years when he had trouble sleeping. Recently, he said that he had fallen down a few times after taking rivotril, and that his cough was worse when he drank water. No acute lesions were observed on emergency diffusion brain MRI images. In the VFSS inspection he

showed PAS 5 like deep penetration when ingested with properties such as puree, solid, and liquid. In some situations, delayed aspiration was also observed. After a week of not taking rivotril, he said he had a much less frequent aspiration episode and it was recommended to mix liquids with viscosity enhancers. A week later, he reported that he had no symptoms of aspiration. About 1 month after discontinuation of rivotril, the VFSS test was performed again. In all situations, except for liquids, it showed good swallowing function of PAS 1. Aspiration was observed when he consumed liquids using a straw, but not when he consumed them with a spoon.

Conclusion

Clonazepam is variously used in treating psychotic and neurologic disorders including anxiety disorders and epileptic seizures and as in the case of this patient, it is also known to help with sleep disorders. Although it has side effects such as drowsiness, it is known to be a relatively safe drug that can be used for a long time. In the geriatric patients, susceptibility to drugs may vary depending on various underlying diseases, muscle loss, and aging. This patient had taken clonazepam several times before without major side effects, but this time he experienced more severe drowsiness and difficulty swallowing. Therefore, when prescribing drugs to elderly patients in the long term, it is necessary to consider the side effects a little more.