How to use the Water Titration Taper Schedule.xls Directions

The Water Titration Taper Schedule spreadsheet has 10 pages to accommodate various length taper schedules.
To begin, please become familiar with the following areas on the spreadsheet.

Input your information in the upper left corner of spreadsheet (Header box)
Note: Items in bold on the spreadsheet can be modified

<table>
<thead>
<tr>
<th>Medication</th>
<th>Klonopin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valium</td>
<td>20</td>
</tr>
<tr>
<td>Multiplier</td>
<td></td>
</tr>
<tr>
<td>Original Dose</td>
<td>1.500</td>
</tr>
<tr>
<td>Current Dose</td>
<td>1.500</td>
</tr>
<tr>
<td>Start Date</td>
<td>January 1, 2006</td>
</tr>
<tr>
<td>Dry Dose</td>
<td>1.000</td>
</tr>
<tr>
<td>Dissolve Dose</td>
<td>0.500</td>
</tr>
<tr>
<td>Water in ML</td>
<td>250</td>
</tr>
<tr>
<td>ML Increments</td>
<td>2</td>
</tr>
<tr>
<td>Display Dates</td>
<td>yes</td>
</tr>
</tbody>
</table>

**Medication:** Click on cell C-1 which is a drop down menu that includes most medications in the Ashton manual equivalency chart.

**Valium Multiplier:** Automatically gives you the potency of your drug compared to Valium per the Ashton manual.

**Original Dose:** Enter the amount of medication you originally were on before starting your taper. This field is used to calculate cumulative drop percentages.

**Current Dose:** Enter the current total amount of the medication that you are taking. If you plan to take part of the medication in pill form and part mixed with water, this should equal your total daily dose (both pill & liquid).

**Start Date:** Enter the date you would like to start tapering.

**Dry Dose:** Enter the amount of your medication in milligrams that you will be taking in dry tablet or capsule form (if any), note: time released capsules are not supported.

**Dissolve Dose:** Enter the amount of your medication in milligrams that you will be dissolving in water for the water titration portion of your dose.

**Water in ML:** Enter the amount of water in milliliters that you will be using to dilute your medication (100 mls, 125 mls, 150 mls, etc. - play with it until you get the desired percentage daily drop. To change the calculations, either hit the tab key, or arrow down to the next area.) This value can be changed for each schedule.

**ML Increments:** Enter 1 or 2 in this area. This is the amount of "drug water" you'll be removing daily. Keeping the reduction to 1 or 2 mls per day keeps the titration slow. This value can be changed for each schedule.

**Display dates:** Enter Yes or No in this area. This value is used to display or not display the dates. Set to yes for most schedules. Set to No for multi-dose, multi-schedule tapers or schedules where holding is frequent.

**A word about doses:** If you are starting out with a rather high dose, you may elect to take part of your dose in pill form and titrate part of it. What you must always keep in mind is that all calculations are based on your Total Daily Dose (the combination of pills and titrated drug). So if you're taking 1 mg in pill form and 1 mg as liquid, your spreadsheet calculation must have that information in it to get the proper percentages. It should show your total current dose as 2 mgs (1 mg dry dose and 1 mg dissolve dose).
# What do the columns tell me?

<table>
<thead>
<tr>
<th>Date</th>
<th>dry mg</th>
<th>Water in ML (mg)</th>
<th>dissolve mg</th>
<th>Toss</th>
<th>Drink mg intake</th>
<th>Valium mg intake</th>
<th>% drop daily</th>
<th>2 wk Valium mg drop</th>
<th>2 wk % drop</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-Nov-2005</td>
<td>1.000</td>
<td>250</td>
<td>0.500</td>
<td>2</td>
<td>248</td>
<td>1.496</td>
<td>0.0040</td>
<td>0.27%</td>
<td>0.00%</td>
</tr>
<tr>
<td>2-Nov-2005</td>
<td>1.000</td>
<td>250</td>
<td>0.500</td>
<td>4</td>
<td>246</td>
<td>1.492</td>
<td>0.0040</td>
<td>0.27%</td>
<td>0.53%</td>
</tr>
</tbody>
</table>

**Date**: Helps you keep track of your daily schedule. Check off the date after you have taken your dose.

**Dry mg**: The amount of medication, in milligrams, that you will be taking in dry tablet or capsule form (if any).

**Water in ML**: The amount of water, in milliliters, that you will be using to dilute your medication.

**Dissolve mg**: The amount of medication that you will be dissolving in water for the water titration portion of your dose. This amount will stay the same on all pages of the spreadsheet.

**Toss**: The amount of drug water, in milliliters, you will toss down the sink each day - cheering all the way!

**Drink**: The amount of drug water, in milliliters, you will drink each day.

**Mg intake**: This is the total milligrams of your medication that you are consuming per day. It is a total of your dry dosage plus your daily amount of medication water you drink.

**Valium mg intake**: The equivalent amount of valium, measured in milligrams that you are consuming per day.

**Mg drop**: The amount of your medication, measured in milligrams, that you are tapering/reducing each day.

**% drop daily**: The percentage of medication you are dropping on a daily basis.

**2-week mg drop**: The 2-week cumulative total of your medication that you are tapering/reducing. You can compare this to the amount of your medication that you were tapering/reducing when you were manually breaking your pills into little pieces. This field also highlights the degree of control you have over how much medication you drop in a two week period of time using the water titration method.

**2-week % drop**: This field is extremely helpful in determining your 2 week percentage drop. Many people recommend staying under a 10% reduction over a two week period.

**2-wk Valium mg drop**: The 2 week cumulative total of the Valium equivalent of your medication that you are tapering/reducing. This field can be very helpful when compared to the Ashton Manual sample reduction schedules which typically recommend reducing your medication by approximately 2mg of Valium near the beginning, and 1mg or less of Valium near the end of your taper.

**Cumulative % drop**: Your current daily cumulative drop in your medication. This field compares your current intake to your original starting dose on Schedule 1.
Let's Get Started!

Your first schedule: Now that you know what information you need to enter into the spread sheet, start with Schedule 1 by clicking on Schedule 1 tab at the bottom of the spread sheet. At the top left of the page you will enter the information as described in the "Input your information" section above so the spreadsheet can calculate the taper schedule. Items that need to be filled in are in bold.

Subsequent schedules: Once the water has all been "tossed" and there is no more water left on Schedule 1, you would then use Schedule 2, etc. On Schedule sheets 2-10, only the "Water in ML" and "ML increments" should be modified, the rest is automatic.

As an example: Let's say you're starting with 1.5 mg Klonopin. You want to take 1 mg by pill and titrate the rest. You will enter 1 mg under "dry mg," and .5 mg under "dissolve mg." Your schedule will run down to 0 mls of water.

When you go to Schedule 2 (click the tab at bottom of page of schedule 2) all the information will carry over, and it will show you are taking the remaining 1 mg as .5 mg dry (pill) and .5 to be titrated automatically.

How fast should I go?: Taper rate is controlled by how much water you use, and how much you extract on a daily basis. There are three guidelines you can use. 1) Keep "% drop daily" under 1%. 2) Keep the "2 week mg drop" to under 10%. 3) Keep the "2 week Valium mg drop" dose at or below 1mg. The "mg drop" field will show you how much you are dropping on a daily basis. In order to slow a taper rate down, increase the water and set "mg increment" to a value of 1. Decreasing the water or changing the "mg increment" to a value of 2 will speed up the taper rate. After several weeks you can evaluate how you feel, and adjust your titration rate up or down accordingly.

How to hold at a given amount (temporarily hold the taper)
Holding may be necessary in times of unusual stress, illness, while traveling, or if you are experiencing difficulties at the lower doses. Hold your taper one of two ways. Either calculate a new spreadsheet with your held dose inserted in the current dose field, or circle the toss amount you are holding at on the spreadsheet and just to the left of the date, write the word HOLD and your current mg intake that you are holding at. You would repeat this for each day you hold. When resuming your taper, write your next toss amount to the left of each date.

What about multiple doses?
You can titrate all or part of any dose by entering the information into the header box. When taking 2 or 3 small doses a day, you can titrate the entire daily dose, then remove the "toss" amount, and split the remaining "drug water" according to each dose. If you're taking large doses, you may want to continue taking part of the dose by mouth and part in liquid. Always be sure to enter the total daily dose under "current dose" and then break out the dry and dissolve doses properly. The spreadsheet will do all the work for you!

How to print the schedule
Identify which schedule sheet is your last schedule. This can be found by looking at the cumulative % drop being equal to 100%. When printing each schedule sheet, do a "print preview" and identify how many pages you need to print that has values on the pages, then change print all to pages and enter the page range. Caution: There will be a total of 15 pages that are printable. Be sure to print only the pages containing your schedule.

The information contained in this document comes from the personal experience of laypeople and is not intended to constitute medical advice. Do not attempt to stop or taper benzodiazepines without first consulting a doctor.

If you have further questions, please contact:
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