Please ensure that any prescribed treatment is recorded in the patient’s medical records or that a label is printed.

**NRT**
- **Champix/varenicline (POM)**
  - Under 12 years old: Must not be used
  - Under 18 years old: Pregnant or breastfeeding; End stage renal failure; Adverse reactions.
  - Under 18 years old: Pregnant or breastfeeding; Epilepsy or any seizure disorder; Liver disorder; Acute symptoms of alcohol or benzodiazepine withdrawal.
  - Eating disorder; Bipolar affective disorder; depression; Adverse reactions; Monoamine oxidase inhibitors (MAOIs).

**Zyban/bupropion (POM)**
- Depression/mental illness; epilepsy; close monitoring is essential; discuss with patient’s GP; Severe renal failure (reduce dose to max 1mg per day).
- Alcohol abuse; Withdrawal from tranquilizer use; Diabetes; Stimulants or anorectic products; Depression/mental illness; epilepsy; close monitoring is essential; discuss with patient’s GP; Severe renal failure (reduce dose to max 1mg per day).
- Under 18 years old; Pregnant or breastfeeding; Epilepsy or any seizure disorder; Liver disorder; Acute symptoms of alcohol or benzodiazepine withdrawal.
- Eating disorder; Bipolar affective disorder; depression; Adverse reactions; Monoamine oxidase inhibitors (MAOIs).

**Caution**
- Heart or circulatory problems; Prescription medication; Liquorice gum in pregnancy.
- Depression/mental illness; epilepsy; close monitoring is essential; discuss with patient’s GP; Severe renal failure (reduce dose to max 1mg per day).
- Alcohol abuse; Withdrawal from tranquilizer use; Diabetes; Stimulants or anorectic products; Depression/mental illness; epilepsy; close monitoring is essential; discuss with patient’s GP; Severe renal failure (reduce dose to max 1mg per day).

**Adverse reactions.**
- Under 18 years old; Pregnant or breastfeeding; Epilepsy or any seizure disorder; Liver disorder; Acute symptoms of alcohol or benzodiazepine withdrawal.
- Eating disorder; Bipolar affective disorder; depression; Adverse reactions; Monoamine oxidase inhibitors (MAOIs).

All pharmacists must ensure they stay up to date with the therapeutics and the prescribing of pharmacotherapy support associated with smoking cessation.

Patients are 4 times more likely to quit with NHS support from Wandsworth Stop Smoking Service.

**Benefits of referring patients to the Stop Smoking Service are:**
- FREE confidential, expert advice
- Group or individual appointments in the daytime or evening
- Nicotine replacement therapy available via the voucher scheme
- Tips on how to handle cravings and staying Smokefree
- Specialist support for pregnant women and their families throughout their pregnancy

**Key tips to achieve quits:**
1. Ask the WWHAM questions (Who is the patient? What are their symptoms? How long have they had them? Action taken so far? Medication already prescribed?) and then:
2. Did you chose this format for a particular reason?
3. Have you tried to stop before?
4. Why did you lapse?
5. What will you do differently this time?
6. Always start client on highest strength NRT patch and then titrate down in line with clinical guidance.
7. Combination therapy should be recommended to clients to combat breakthrough cravings.
8. Encourage client to stay in touch, regardless of quit or lapse.

Call Smokefree on freephone 0800 389 7921 office 0208 812 7794 Email stopsmoking.team@wpct.nhs.uk www.wandsworthsmokefree.co.uk

for free advice and more tips.

Because life’s better smokefree.

Sponsored by an educational grant from McNeil Products Limited.
Treatment options

Please ensure that any prescribed treatment is recorded in the patient’s medical records or that a label is printed.
Please also refer to the PCT pharmacotherapy for stop smoking policy, 2009.

<table>
<thead>
<tr>
<th>Product</th>
<th>Dosage</th>
<th>Treatment period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patch 16 hour</td>
<td>25mg/15mg/10mg</td>
<td>12 weeks</td>
</tr>
<tr>
<td>Patch 24 hour</td>
<td>2mg/3mg/1mg/1mg</td>
<td>8-12 weeks</td>
</tr>
<tr>
<td>Inhalator</td>
<td>10mg</td>
<td>12 weeks</td>
</tr>
<tr>
<td>Gum</td>
<td>4mg/2mg</td>
<td>Recommended withdrawal after 3 months</td>
</tr>
<tr>
<td>Nasal spray</td>
<td>10mg</td>
<td>12 weeks</td>
</tr>
<tr>
<td>(for highly dependent smokers)</td>
<td></td>
<td>At least 12 weeks. Maximum treatment duration 6 months.</td>
</tr>
<tr>
<td>Microtab</td>
<td>2mg</td>
<td>12 weeks</td>
</tr>
<tr>
<td>Lozenge</td>
<td>1mg/2mg/4mg</td>
<td>12 weeks</td>
</tr>
<tr>
<td>Champix (varenicline)</td>
<td>0.5mg/1mg</td>
<td>12 weeks</td>
</tr>
<tr>
<td>Zyban (Glypargone)</td>
<td>150mg</td>
<td>7-9 weeks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Regime</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10 CPD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nicorette Invilis Patch</td>
<td>2mg/3mg for 8 weeks, then 15mg for 2 weeks, then 10mg for 2 weeks.</td>
<td></td>
</tr>
<tr>
<td>Nicotinell</td>
<td>2mg/3mg for 8 weeks, then 14mg for 3-4 weeks, then 7mg for 3-4 weeks.</td>
<td></td>
</tr>
<tr>
<td>NiQuitin CQ</td>
<td>2mg/3mg for 6 weeks, then 14mg for 2 weeks, then 7mg for 2 weeks.</td>
<td></td>
</tr>
<tr>
<td>Nicotinell</td>
<td>1mg/3mg for 6 hours, then 7mg for 2 weeks.</td>
<td></td>
</tr>
<tr>
<td>NiQuitin CQ</td>
<td>1mg/3mg for 6 hours, then 7mg for 2 weeks.</td>
<td></td>
</tr>
</tbody>
</table>

**Advantages**
- Easy to use; semi-transparent patch with excellent safety/tolerability profile.
- Easy to use; all brands have good tolerability profile.
- Helps to keep hands/mouth busy; could help to prevent overeating, a safer alternative to smoking.
- Easy to regulate dose; could prevent overeating/helplful with cravings.
- Fast onset of action; easy to adjust dose.
- Can be used discreetly; easy to adjust dose, very few side effects.
- Can block nicotine receptors; Acts as a partial agonist, helping to reduce cravings and the satisfaction derived from smoking.

**Disadvantages**
- Not orally gratifying; local itching may occur but tends to be transient.
- 24 hr patches may cause sleep disturbance; not orally gratifying.
- Coughing/throat irritation.
- Difficulty with dentures; jaw ache; gastric upset; hiccup.
- May cause some nasal irritation initially but settles after a few days.
- Gastric upset; stinging mouth; hiccup; localised irritation.

**References:**
3. Mcguigan et al (2009), ‘Higher drop-out rates for dummy patches increases one year smoking cessation rate compared to the European CEASE trial’, Cochrane database of systematic reviews. 2009:1
5. Stingray (2009), ‘Smoking withdrawn workshop_60minute_smoke_smoke_smoking_part1.htm’

**Key:**
- TTFC—Time To First Cigarette
- CPD—Cigarettes Per Day
- OD—Once daily
- BD—Bi daily

**Combination therapy**
- Always use 2 NRT products from day 1 unless assessment indicates otherwise.
- In trials, a combination of two different NRT products (eg patch + another format) was in general more effective than a single NRT product.
- To relieve early morning and break-through cravings, use the fastest acting format available.

16 hr and 24 hr patch - points to consider:
- 15mg and 2mg patches have been shown to be equally effective.
- 2mg/15mg Patch has been shown to be more effective than 15mg patch.
- 2mg patch gives 15% nicotine substitution compared to 30% from the 15mg patch.
- 16 hr patches are designed to mimic the average smoker’s daily habit, minimising the risk of sleep disturbance. The manufacturers state that the 24 hr patch optimises the effect against morning cravings; however, studies have shown that a higher percentage of relapses occur in the afternoon/evening and not in the morning. If morning urges are an issue, consider a fast acting oral product.

**Zyban**
- The effect against morning cravings; however, studies have shown that a higher percentage of relapses occur in the afternoon/evening and not in the morning.

**References:**
3. Mcguigan et al (2009), ‘Higher drop-out rates for dummy patches increases one year smoking cessation rate compared to the European CEASE trial’, Cochrane database of systematic reviews. 2009:1

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