# **Smoking Cessation Pharmacotherapy**

Quitting smoking is easy; I've done it a thousand times. Mark Twain

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RxFiles Top 3 Reasons to Stop Smoking?

# 1. Live longer and enjoy the grandkids!

- Former smokers reduce their risk of heart disease by 50% within 1 year.<sup>1</sup> {↓ blood pressure, heart rate & normalize O<sub>2</sub> within 20 minutes}

# 2. Save some major cash!

• Over the course of just 5 years, smoking 1 pack per day costs \$18,000

# 3. Because it can be done!

- Success is seldom seen on the first attempt.
- Most smokers will require 4-5 attempts before smoking cessation is successful!<sup>2</sup> Nonpharmacological and pharmacological interventions increase the chance of success.

#### What smoking cessation therapies work?

• Personal motivation is key to successful cessation! A major life changing event can be a powerful motivator.

• <u>Support</u>, <u>counseling</u> and <u>follow-up</u> are most useful and should be offered with or without drug options.

• The figure below shows both success rates and the costs of available pharmacological therapies. Options such as nicotine replacement therapies (NRT), bupropion ZYBAN and nortriptyline may be indicated (See chart, page 2).

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#### To what extent is weight gain a problem?

• A gain of <5kg <sub>1st yr</sub> is common; while a concern, the benefits of quitting far exceed this issue. Strategies to minimize weight gain should be part of the quit plan.

### Is it OK to smoke while on an NRT Patch?

• Smoking the odd cigarette while on the patch is not likely to cause serious harm; however caution is advised in patients with serious arrhythmias, angina or post-MI {Complete cessation while on NRT is most advantageous! Adding an acute release form of NRT such as gum to patch users could benefit those who continue to light up.<sup>3,4</sup>}

### Can bupropion be used in an SSRI patient?

• Yes, in some cases if the patient is at low risk of seizures and the dosage is titrated up gradually. See also RxFiles Q&A – Bupropion (Zyban) and SSRIs.<sup>5</sup>

# Table 1: Tips to Help Smokers Succeed

- 1. Set a <u>quit date</u> and <u>follow-up</u> with physician or pharmacist
- 2. Initiate an <u>exercise program</u> before quitting.
- 3. Plan reward events for quitting {SMALL & FREQUENT}
- 4. Join a support group; talk with family and friends
- 5. Find an <u>alternative item</u> to put in your hand
- 6. Avoid places that <u>trigger</u> a craving to smoke

7. Request / arrange for <u>telephone follow-up</u>\* {e.g. by Office RN} \*Smoking cessation : HOTLINE: 1-877-513-5333 (NS, SK, ON, MB, NB) WEBSITE: <u>www.smokershelplineworks.ca</u>

Other benefits: less sexual dysfunction, improved cognitive function... Various tools are available to assess dependence. E.g. Fagerstrom Tolerance Scale <sup>6</sup> References and acknowledgments available at <u>www.RxFiles.ca</u>



# Effectiveness of Smoking Cessation Pharmacotherapy from Systematic Reviews

**NNTs** average around <u>10</u> for single therapies and 13+ for combination versus single therapies. There can be wide variance in the absolute cessation rates depending on population studied and other study interventions (e.g. group behaviour therapy, telephone support, specialized clinics<sup>9</sup>, etc.). **Real world observational study - bupropion:** found similar abstinence rates at 1 year (21%); adverse event discontinuation rates were higher (30%).<sup>II</sup> \$ = cost for course of treatment (usually 12-13 weeks) **CI**= confidence interval **NS**=not statistically significant {Supportive interventions generally included in most trials.}

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