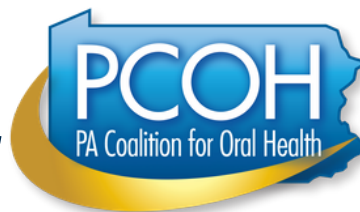


# PHARMACOTHERAPY QUICK GUIDE IN TOBACCO/NICOTINE TREATMENT



## SHORT-ACTING PRODUCTS

*\*Combining a short-acting NRT (Nicotine Replacement Therapy) with a long acting NRT is more effective than using a single type of NRT*

|                                      |   |                      |
|--------------------------------------|---|----------------------|
| <b>Gum</b><br>2mg, 4mg               | Dose: 1 piece every 1-2 hours<br>Max daily dose: 24 pieces                          | Duration: 6-14 weeks |
| <b>Lozenges</b><br>2mg, 4mg          | Dose: 1 lozenge every 1-2 hours<br>Max daily dose: 20 pieces                        | Duration: 12 weeks   |
| <b>Nicotrol® NS</b><br>10 mg/ml      | Dose: 1-2 doses intranasally per hour<br>Max daily dose: 5 doses/hr or 40 doses/day | Duration: 3-6 months |
| <b>Nicotrol® Inhaler</b><br>2mg, 4mg | Dose: 6-16 cartridges/day<br>Max daily dose: 16 cartridges/day                      | Duration: 3-6 months |

## LONG-ACTING PRODUCTS

|                                    |  |                      |
|------------------------------------|--|----------------------|
| <b>Patch</b><br>7 mg, 14 mg, 21 mg | Dose: 1 patch every 24 hours<br>21 mg patch if ≥ 10 cigarettes/day<br>14 mg patch if < 10 cigarettes/day | Duration: 6-14 weeks |
|------------------------------------|--|----------------------|

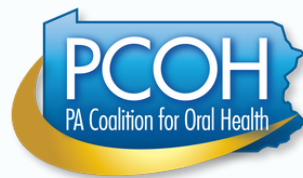
## BUPROPION SR (ZYBAN®WELLBUTRIN SR®)

|                       |  |                    |
|-----------------------|--|--------------------|
| <b>150 mg tablets</b> | Dose:<br>Day 1-3: 150 mg once daily<br>Day 4+: 150 mg twice daily<br>Max: 300 mg/daily | Duration: 12 weeks |
|-----------------------|--|--------------------|

## VARENICLINE (CHANTIX®)

|                             |  |  |
|-----------------------------|--|--|
| <b>0.5 mg, 1 mg tablets</b> | Dose:<br>Day 1-3: 0.5 mg once daily<br>Day 4-7: 0.5 mg twice daily<br>Day 8+: 1 mg twice daily<br>Continuing Month Pack: 1 mg twice daily<br>Max: 2 mg/daily | Duration: 12 weeks*<br><br><i>*If quit at 12 weeks, consider 12 more weeks of drug</i> |
|-----------------------------|--|--|

# 5 As OF TOBACCO/ NICOTINE INTERVENTION



## ASK ABOUT TOBACCO/NICOTINE USE AT EVERY VISIT

- Implement an office system that ensures that, for every patient at every visit, tobacco/nicotine-use status is queried and documented

## ADVISE ALL TOBACCO/NICOTINE USERS TO QUIT

- "I strongly advise you to quit smoking and I can help you."

## ASSESS READINESS TO QUIT

- Ask every tobacco/nicotine user if they are willing to make a quit attempt at this time:
  - If they are ready and willing to quit, provide assistance (see below)
  - If they are NOT ready or willing to quit, provide motivational intervention and let them know resources are available when/if they are ready

## ASSIST TOBACCO/NICOTINE USERS IN QUITTING

- Provide brief counseling:
  - Reasons to quit
  - Barriers to quitting
  - Lessons from past quit attempts
  - Set a quit date, if they are ready
  - Enlist social support
- Recommend use of combination or single pharmacotherapy (patch, gum, lozenge, nasal spray, inhaler, bupropion, or varenicline) unless contraindicated
- Be aware of insurance coverage; many health plans cover some or all medications
- Provide supplementary educational materials

## ARRANGE FOLLOW-UP

- Refer to PA Free Quitline **1-800-QUIT-NOW** or visit [pa.quitlogix.org](http://pa.quitlogix.org) for proactive calls to assess and arrange treatment
- At subsequent visits, review patient follow-up report from PA Free Quitline; congratulate success and encourage maintenance
- If tobacco/nicotine use has occurred
  - Ask for recommitment to total abstinence
  - Review circumstances that caused lapse
  - Use lapse as learning experience
  - Assess pharmacotherapy use and problems
- Consider referral to more intensive treatment

**For more information:  
Call 1-800-QUIT-NOW  
or visit  
[PA.QUITLOGIX.ORG](http://PA.QUITLOGIX.ORG)**