

Stop smoking medication

(NICOTINE REPLACEMENT THERAPY AND PRESCRIPTION MEDICATIONS)

Stop smoking medication may make quitting easier. Available products include nicotine replacement therapy and prescription medications. Nicotine Replacement Therapy (NRT) products include nicotine patches, gum, inhaler, lozenges, and sub-lingual tablets, which are sold under the brand name “Microtab”). They are available over the counter from pharmacies, and from some supermarkets and other shops.

The following information will help you decide if these products are suitable for you. This material is only a guide. If you have any concerns you should consult your doctor or pharmacist.

SHOULD I USE MEDICATION AT ALL?

The research on this question is now clear. Smokers who use a stop-smoking medicine together with a program of advice (like this one) are more likely to quit successfully than those who use either the advice program or the medication alone.

You should consider using medication to help you in your next attempt, especially if:

- (a) you smoke more than 10 cigarettes per day, inhale deeply and smoke your first within 30 minutes of waking; or
- (b) you got strong cravings to smoke and felt physically bad for the first week or so after you quit – or while you were stopped, if you didn’t last that long.

Usually, if you smoke less than 10 per day or can stop for a week or more without problems, medication is less likely to provide extra help. You may be just as likely to succeed without it.

If you haven’t tried to quit recently, you might like to try without medication first to see how things go. This can also help you learn more about how addicted you are. You may also succeed without its help.

You should always consider the pros and cons associated with each product and make the final decision yourself. Whichever treatment you choose, remember that these products only deal with your physical addiction to cigarettes. It is highly likely that you will also need to address your habits and emotions associated with smoking. Stop-smoking medicines can make quitting easier, but they don’t do all the work for you.

PRESCRIPTION MEDICATIONS

There are two prescription-only medications which are specifically for smoking cessation. They are:

- Varenicline (sold under the name of Champix in Australia) is the most important prescription-only medication. The scientific evidence shows that it is the most effective medication for most smokers.
- Bupropion (sold under the name of Zyban in Australia) is the other prescription-only medication your doctor might recommend.

Both Varenicline and Bupropion need to be used for around a week before you quit if they are to be most effective.

If you are interested in using either of these, you will need to talk to your doctor about getting a prescription. Your doctor will also advise you on which is most appropriate for you, or whether you would be better off using NRT. One important reason why you can only get them on prescription is that they cannot be used by some people. Make sure you discuss with the doctor or pharmacist what you need to know while using them.

NICOTINE REPLACEMENT THERAPY (NRT) PRODUCTS

Nicotine Replacement Therapy (NRT) products can reduce the cravings and withdrawal symptoms you may experience once you quit. They do this by replacing some of the nicotine that you would normally inhale from cigarettes. Research shows that people who use NRT are nearly twice as likely to quit successfully as those who don't use any help. To get the best out of them, you need to use nicotine replacement products correctly. Follow the instructions on the pack.

Addictive habits like cigarette smoking involve more than just the physical addiction. They are also habits, which need to be unlearned. Habits you use to help you do things, like control your emotions, and help you enjoy social situations, are harder to give up. NRT cannot help you with this aspect of your addiction. However, using NRT together with this program will help you to overcome your physical addiction to cigarettes. It will also help you to learn the skills and strategies you will need to come to enjoy being a nonsmoker. This will give you the best chance of quitting successfully.

WHICH FORM OF NRT IS BEST FOR ME?

All forms of NRT are of similar effectiveness. Different forms will suit different people, so choose the type that best fits your needs. We recommend that most people try NRT before considering prescription medications. Nicotine replacement products are safer, and as they do not require a prescription, are more readily available. If you have tried quitting with NRT, or just want to try one of the prescription medications first, discuss it with your doctor.

The once-a-day application of the nicotine patch is easy, but unlike the other forms of NRT, there is no ability to change dose when you are in a situation where you are tempted to smoke. If you don't want to think too much about it, then using the patches may be best. Patches come in two forms – 24 hour and 16 hour. There is no clear evidence as to which is more effective – it is a matter of personal preference. They are available at a subsidised rate if you first get a prescription from your doctor. This makes them cheaper, especially if you are a Health Care card holder.

Other forms of NRT are taken orally (e.g., nicotine gum, nicotine lozenge, sublingual tablet), in doses similar to that from a cigarette. However, they take a few minutes to work, so you need to start using them a few minutes before you think you will need them. You should also space them out through the day to keep your nicotine levels up. If you want to alter the amount of nicotine you receive to fit your need, an oral form will be best. The biggest difference between them is that the nicotine inhaler is designed to appeal to smokers who miss the hand-to-mouth ritual and/or the act of inhaling. It is also a very public form of NRT, one that can be used to let people know people that you have quit.

Some of the oral NRT products come in 4mg and 2mg strengths. There is evidence that stronger doses (the 4mg forms) are better for more addicted smokers, but for light smokers, there is no evidence of any benefit of using a stronger dose, and more evidence of undesirable side effects.

We recommend you use a 4mg product if you smoke 15 or more cigarettes a day and have your first cigarette of the day within 30 minutes of waking, or experience strong urges to smoke regularly. Look at the manufacturer's advice on the pack. If you are a lighter smoker, try a 2mg product first. Note: If you smoke less than 10 per day, and first smoke more than an hour after waking, you may not benefit from using NRT at all, and it can make you feel jittery. Be cautious if you decide to try it.

If you choose an oral form of NRT, you need to make sure you use enough. Take one every hour or two and consider taking an extra one 5-10 minutes before entering a situation where you expect to get strong urges to smoke.

More addicted smokers sometimes benefit from using a combination of patches and an oral preparation (e.g., gum), to use in high risk situations. Discuss this with your pharmacist if you think it might help you.

Using NRT to cut down: Some forms of NRT are also approved for use to help you cut down on how much you smoke before you quit. You can use them for several months. For some people this makes it easier when they are ready to quit smoking altogether.

NRT is generally safe: Nicotine replacement products are safe, provided they are used correctly. Most people who use NRT experience no side effects. If side effects occur, they are generally mild, and very much less than the risks associated with continuing to smoke cigarettes. If you take too much,

they can make you sick (nauseous) which is a sign to use less. You should also read the Consumer Medicine Information sheet that comes with each product, for a list of common medicines and medical conditions that may be affected by stopping smoking or using nicotine replacement.

- If you are pregnant, or you are taking other medicines, it is wise to discuss the possible implications of NRT use with your doctor or pharmacist.
- Patch users may experience a rash on the skin where the patch is worn. Moving the patch to a new area each day will reduce skin irritation, and using a medicated skin cream (available at pharmacies) can help. Some people experience sleep disturbances or vivid dreams, particularly with the higher strength 24-hour patches. Removing the patch before bedtime or switching to the daytime patch is recommended in this case.
- Nicotine gum may cause problems such as a sore mouth or jaw, mouth ulcers, indigestion or nausea. This can be a result of chewing the gum rather than just biting on it from time to time and then parking it between your teeth and gum (read the instructions for use). Also don't always park it in the same spot. Hiccups can be a problem, usually with the 4mg dosage.
- The most common side effects of the inhaler include a burning sensation in the mouth and throat, coughing, sneezing, running nose and hiccups. Again, these reactions are mostly rated as mild and usually diminish with continued use.
- Nicotine lozenge users have reported similar adverse reactions as with the other orally-administered nicotine replacement products (gum and inhaler), with hiccups being the most common side effect.