

# Treatment Options for Smoking Cessation

- ❖ **Pharmacotherapies** should be used only when the teen shows both **tobacco dependence** AND **intention to quit**.
- ❖ **Social support** should be established in addition to, or instead of, pharmacotherapy. Suggest: quit smoking with a friend/family member or join a support group such as Nic-Anon.

## WHAT PHARMACOTHERAPIES ARE AVAILABLE?

PRODUCT	AVAILABILITY	DAILY DOSE (Treatment Duration)	COMMON SIDE EFFECTS	ADVANTAGES	DISADVANTAGES
<b>TRANSDERMAL PATCH</b> <i>(Nicoderm CQ and Nicotrol)</i> »Place on hairless part of body between neck and waist - rotate	OTC	Nicoderm CQ 1 patch for 24 hours 21 mg/ 4 weeks, then 14 mg/2 weeks, then 7 mg/ 2 weeks	▶ Skin irritation (treat with Hydrocortisone cream) ▶ Insomnia (Remove patch at night)	▶ Provides steady level of nicotine ▶ Easy to use ▶ Unobtrusive ▶ Available OTC	▶ User cannot adjust dose if craving occurs
	OTC	Nicotrol 1 patch for 16 hours 15 mg/ 8 weeks (use lower dose if smoking ≤ 10 cigs/day)			
<b>GUM</b> <i>(Nicorette/Nic Mint)</i> »Chew until tongue is tingly, park, repeat x 30 min., water only for 15 min. before and during chewing	OTC	1-24 cig./d.: 2 mg. gum (up to 24 pieces/d.) 25+ cig./d.: 4mg. gum (up to 24 pieces/d.)  (Up to 12 weeks)	▶ Mouth irritation ▶ Sore jaw ▶ Dyspepsia ▶ Hiccups	▶ User controls dose ▶ Provides oral substitute ▶ Available OTC	▶ Proper chewing technique is needed to avoid side effects and achieve efficacy ▶ Can damage dental work ▶ Use difficult for those with orthodontic braces
<b>NICOTINE LOZENGE</b>	OTC	9-20 daily  (Up to 12 weeks)	▶ Hiccups ▶ Heartburn	▶ Patient controls dosage ▶ Easy to use ▶ Discreet	▶ Limited information on long-term use
<b>VAPOR INHALER</b> <i>(Nictrol IN)</i>	Prescription	6-16 cartridges/day  (3-6 months)	▶ Mouth and throat irritation ▶ Cough	▶ User controls dose ▶ Provides hand-to-mouth substitute for cigarettes	▶ Frequent puffing needed ▶ Device visible when used
<b>NASAL SPRAY</b> <i>(Nicotrol NS)</i>	Prescription	8-40 doses/day  (3-6 months)	▶ Nasal irritation ▶ Sneezing ▶ Cough ▶ Teary eyes	▶ User controls dose ▶ Most rapid nicotine delivery ▶ Highest nicotine levels	▶ Most irritating NRT product to use ▶ Device visible when used
<b>BUPROPION SR</b> <i>(Zyban, Wellbutrin SR)</i> »Can be used with NRT* »Start one week before quit date	Prescription	150 mg am x 3 days, then 150 mg bid (7-12 weeks; up to 6 months to maintain abstinence)	▶ Insomnia (take dose at 8am & 4pm) ▶ Dry mouth	▶ Easy to use (pill) ▶ No nicotine exposure	▶ Seizure risk for patients with seizure disorder or bulimia
<b>VARENICLINE</b> <i>(Chantix)</i> »Can be used with NRT* »Start one week before quit date	Prescription	0.5 mg once a day, 1-3 days 0.5 mg twice a day, 4-7 days 1 mg twice a day thereafter  (Up to 6 months)	▶ Nausea ▶ Vomiting ▶ Sleep disturbance ▶ Constipation ▶ Flatulence	▶ Easy to use (pill) ▶ No nicotine exposure	▶ Use not well studied for the adolescent population

\*Nicotine Replacement Therapy

Note: Nortriptyline and Clonidine are second line pharmacotherapies for tobacco cessation, but are not commonly used for adolescents.

## Important Things To Remember When Prescribing Smoking Cessation Pharmacotherapies To Teens...

- ▶ Be aware of the psychosocial and behavioral aspects of youth smoking and confirm teen's desire to quit before initiating pharmacotherapy.
- ▶ Bupropion SR or Nicotine Replacement Therapy are recommended because there has been no evidence to show they are harmful to teens.
- ▶ If the teen has a history of depression, Bupropion may be helpful for both depression and tobacco cessation.
- ▶ If the teen is concerned about weight gain, Bupropion and nicotine gum have been shown to delay, but not prevent weight gain.
- ▶ Follow-up by phone or in person is essential. Schedule a visit for at least 2 and 4 weeks after quit date.
- ▶ Much more research is needed to determine the efficacy of these pharmacotherapies in children and adolescents.

Sources:

- 1) Massachusetts General Hospital. Quit Smoking Service. Drugs Used to Treat Tobacco Use. 2006, <http://www.mgh.harvard.edu/qss/providers.pdf>. Chart adapted with permission.
- 2) US Department of Health and Human Services. Treating Tobacco Use and Dependence: Quick Reference Guide for Clinicians. 2000, [www.massgeneral.org/tts/smoking\\_providers.htm](http://www.massgeneral.org/tts/smoking_providers.htm)
- 3) US Department of Health and Human Services. Clinical Guideline: Treating Tobacco Use and Dependence. 2000, [http://www.surgeongeneral.gov/tobacco/treating\\_tobacco\\_use.pdf](http://www.surgeongeneral.gov/tobacco/treating_tobacco_use.pdf)