

STOP SMOKING MEDICATIONS AT A GLANCE



Recommendation 3 from National Stop Smoking Clinical Guidelines (National Clinical Effectiveness Committee Guideline No. 28)

3.1: For people, who are currently interested in quitting, all healthcare professionals should recommend that behavioural support, either alone or in combination with pharmacological supports, increases the chances of successful quitting.

3.2: For people currently interested in quitting all healthcare professionals should recommend Varenicline (alone or in combination with nicotine replacement therapy (NRT)) as first-line treatment in the absence of a contra-indication for those wishing to use pharmacological support.

3.2.1: If Varenicline is not suitable, combination NRT treatment should be recommended.

3.2.2: NRT monotherapy, or bupropion (alone or in combination with NRT) or nortriptyline can also be recommended, but not as first-line.

ALL STOP SMOKING MEDICINES WORK BEST WHEN COMBINED WITH BEHAVIOURAL SUPPORT FROM A TRAINED STOP SMOKING ADVISOR

Medication	Dose		Duration of Course	Additional Information and precautions
Varenicline (Champix) PRESCRIPTION ONLY Long Acting	Week 1: Continue smoking		12 weeks	Patients who cannot tolerate adverse reactions of Varenicline may have the dose lowered temporarily or permanently to 0.5mg twice daily. For patients with severe renal impairment (estimated creatinine clearance < 30 ml/min) or those with moderate renal impairment who experience intolerable adverse effects, the recommended max. dose is 1mg once daily. Avoid in pregnancy. Shared decision-making with patient if breast feeding taking risk/benefit into account. See SPC and PIL for further information including precautions, interactions and adverse events.
	DAY	DOSE		
	Day 1 – 3	0.5mg x 1 daily		
	Day 4 – 7	0.5mg x 2 daily		
	Week 2: Stop Smoking		Can prescribe an additional 12 weeks if required.	
	Day 8 – 84+	1mg x 2 daily		
Refer to SPC and PIL for more information.				

THE SINGLE BIGGEST MISTAKE WITH NRT IS UNDER-DOSING. UNDER-TREATED CRAVINGS INCREASE THE RISK OF SMOKING RELAPSE.

Nicotine Replacement Patch	24 HOUR PATCH	*Heavy dependence	*Light dependence	10 – 12 weeks	Initial patch strength determined by the amount smoked per day, lighter smokers can start on step 2 (14mg/24 hr patch or 15mg/16 hr patch). See SPC for further details. 24 hour patch helpful if early morning cravings. 16 hour patch helpful for patients with sleep disturbances. All healthcare professionals should advise pregnant women who currently smoke about the harms of smoking and the benefits of quitting. NRT can be recommended in shared decision-making following discussion of benefits and risks.
	Long Acting	Weeks 1 – 4	21mg		
Weeks 5 – 8		14mg	7mg		
Weeks 9 – 10		7mg	7mg		
Weeks 11 – 12		7mg	7mg		
16 HOUR PATCH		*Heavy dependence	*Light dependence		
Weeks 1 – 4		25mg	15mg		
Weeks 5 – 8		25mg	15mg		
Weeks 9 – 10		15mg	10mg		
Weeks 11 – 12		10mg	10mg		
*Heavy = 20 + cigs a day/20 Pack-years *Light = < 20 cigs a day				See SPC and PIL for further information including precautions, interactions and adverse events.	

Medication	Dose	Duration of Course	Additional Information/Precautions
Nicotine Gum Short Acting	2mg & 4mg Dose depends on number of cigarettes smoked per day < 20 per day = 2mg > 20 per day = 4mg Take 1 piece every 1 – 2 hrs as needed, maximum of 15 pieces per day.	12 weeks	Use as needed, chew slowly until taste becomes strong, then rest between gum and cheek. Chew again when taste has faded. Repeat for around 30 min then dispose of gum.
			See SPC and PIL for further information including precautions, interactions and adverse events.
Nicotine Inhaler Short Acting	15mg/cartridge Each cartridge lasts for 20 – 40 minutes of inhaling, maximum of 6 cartridges per day. Inhale when required for cravings.	12 weeks	Inhale through the mouthpiece, nicotine vapour passing through the mouth is absorbed by the buccal mucosa. There is a greater effort needed than with a cigarette, inhale deeply or with shallow puffs.
			See SPC and PIL for further information including precautions, interactions and adverse events.
Lozenge Short Acting	1mg, 1.5mg, 2mg & 4mg Strength varies with manufacturer. Dose depends on number of cigarettes smoked per day or time taken to smoke first cigarette upon waking. Take 1 piece every 1 – 2 hrs as needed, maximum of 15 pieces per day.	12 weeks	One lozenge should be placed in the mouth and allowed to dissolve. Periodically, the lozenge should be moved from one side of the mouth to the other and repeated, until the lozenge is completely dissolved (may take up to 30 minutes). Do not chew or swallow.
			See SPC and PIL for further information including precautions, interactions and adverse events.
Mouth-spray Short Acting	1mg/spray Use 1 or 2 sprays when cigarettes normally would have been smoked or if cravings emerge. Up to 4 sprays per hour may be used. Do not exceed 2 sprays per dosing episode and do not exceed 64 sprays in any 24 hour period.	12 weeks	Point spray nozzle as close to open mouth as possible. Press firmly on dispenser and release one spray into the mouth. Do not inhale while spraying. Do not swallow for a few seconds after spraying.
			See SPC and PIL for further information including precautions, interactions and adverse events.
Bupropion Hydrochloride (Zyban) Long Acting	Week 1: Continue Smoking		Not recommended in pregnancy, clinical decision in breast feeding taking risk/benefit into account. Caution in renal/hepatic impairment, hypertension, and predisposition to seizures. Use with caution in older patients. Recommended dose in older patients: 150mg x1 daily. See SPC and PIL for further information including precautions, interactions and adverse events.
	DAY	DOSE	
	Day 1 – 6	150mg x 1 daily	
	Week 2: Stop Smoking		
	Day 7 – 63+	150mg x 2 daily	
Refer to SPC and PIL for more information.		7 – 9 weeks If no effect seen at 7 weeks, treatment should be discontinued. Dose can be tapered, if there is an adverse reaction.	

**Currently NRT is free of charge for ALL clients engaging with a HSE stop smoking service through a supported quit attempt.
This document is a quick guide. Please refer to SPC and PILs for definitive guidance.**

