

30 Stop Smoking Advice

second When you only have 30 seconds the most effective thing you can do is ASK, ADVISE and ACT

ASK

ASK every patient about tobacco use at every healthcare contact, including on hospital admission and record smoking status.

ADVISE

“Quitting is the single best thing you can do to improve your health. We need to do two things – give you support and start you on medication. With medication and support you are over **3 times** more likely to be successful.”

Combined pharmacotherapy and behavioural support is 3 times more effective when compared with quitting unaided

KEY MESSAGES:

- Tobacco dependence is a chronic relapsing disease, WHO (ICD-F17.2) classification
- Smokers expect to be asked about smoking as it shows concern for their overall health
- Tobacco dependence treatments are both clinically effective and cost effective
- No other clinical intervention produces the same significant results for such a small investment in time

ACT

PRESCRIBE

“The first few days and weeks after you quit can be the hardest. Many people will go back to smoking unless they get extra help. You will now get the medication and support to help you.” (see prescribing information on page 2).

REFER

“I would also like you to call the **HSE Quit Team @ 1800 201 203 www.quit.ie***, which is a free service. They will give you tips on dealing with cravings, withdrawal symptoms, smoking medications and help in staying motivated. Are you happy to do that now?”



* as per local arrangements

Make every contact count



PRESCRIBING FOR TOBACCO DEPENDENCE

Tobacco use remains the leading preventable cause of illness and death in our society. Smokers who quit reduce their risk of many diseases, including cardiovascular disease, respiratory disease and cancer. Quitting increases life expectancy. Some smokers make many attempts to quit before they succeed.

TREATMENT

VARENICLINE (CHAMPIX) + NRT*

SET QUIT DATE: 7-14 DAYS AFTER STARTING VARENICLINE

KEY MESSAGES:

- This is the most effective medication; quit rate is over triple placebo for combination Varenicline and NRT.
- Available only on prescription
- There is good evidence that combining NRT with Varenicline improves success rates
- Varenicline has a proven safety profile

NICOTINE REPLACEMENT THERAPY (NRT)*

PATCH

GUM /
LOZENGE

INHALER

MOUTH
SPRAY

COMBINATION NRT

A combination of nicotine patch and a faster acting intermittent form along with behavioural support is more effective than monotherapy and should be considered the standard treatment

PATCH
+ GUM

PATCH +
LOZENGE

PATCH +
INHALER

PATCH +
MOUTH
SPRAY

SET QUIT DATE: SAME DAY AS STARTING NRT

KEY MESSAGES:

- Quit rate is 70% greater than placebo
- NRT is available to purchase over the counter
- NRT is available for medical card holders (less standard prescription charge)
- NRT should be prescribed to all patients ON ADMISSION to hospital, including day cases, to help them manage nicotine withdrawal symptoms

BUPROPION (ZYBAN) + NRT*

SET QUIT DATE: 7-10 DAYS AFTER STARTING BUPROPION

KEY MESSAGES:

- Quit rate is over double placebo
- Available only on prescription
- There is good evidence that combining NRT with Bupropion improves success rates
- Bupropion has a proven safety profile

We're
here to help!



FREEPHONE 1800 201 203
FREETEXT QUIT TO 50100
EMAIL US SUPPORT@QUIT.IE
TWEET US @HSEQUITTEAM
FACEBOOK US FACEBOOK.COM/HSEQUIT
GET STARTED ON WWW.QUIT.IE

* for comprehensive information on these medications consult your prescribing manual.

This guideline was developed in line with the evidence available. This guidance does not, however, override the individual responsibility of health professionals to make decisions appropriate to each patient. The guideline will be reviewed as new evidence emerges.

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