



Quick Reference Guide

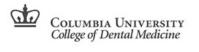
For comprehensive uses, dosage, contraindications and adverse effects, refer to individual product inserts and to the Physician's Desk Reference (PDR).

Product	Best For	Precautions	Adverse Effects	Dosage	Tapering Schedule	Patient Education
Nicotine Patch ^{a, b} 21mg, 14mg, 7mg	For patients who smoke more than 10 cigarettes a day As an adjunctive	Allergy to adhesive possible Serious arrhythmias or severe worsening angina	Skin irritation or discoloration	≥ 10 cig/24hr: 21 mg/24hr for 6 weeks <10cigs/24hr or <100lbs: 14mg/24hr for 6 weeks	≥ 10 cig/24hr: 14mg/24hr for 2 weeks followed by 7mg/24hr for 2 weeks, then stop <10cigs/24hr:	Apply daily to dry, hairless skin Focal rash common; rotate site daily Do not smoke while using these
	medication in combination therapy treatment (with short acting NRTs or Zyban®)	Caution within 6 weeks of myocardial infarction Discontinue if tachycardia or palpitations occur		14118/2411 101 0 Weeks	7mg/24hr for 2 weeks then stop	products
Nicotine Gum ^c 4mg, 2mg	For patients who smoke less than one pack per day acceptable as solo therapy As an adjunctive medication in combination therapy treatment (with Nictotine Patch or Zyban®)	Poor dentition May be inappropriate for use in patients with complete or large partial dentures Serious arrhythmias or severe worsening angina Caution within 6 weeks of myocardial infarction	Unpleasant taste of unflavored gum Mild sense of buccal mucosal irritation from nicotine absorption when "parked" Hiccups and cough can occur from incorrect use of the gum If chewed or swallowed,	Use 4mg ≥ 10 cig/24hr ^d Use 2mg < 10 cig/24hr ^d E ach 4mg piece = 2mg absorbed = 2 cigs Each 2mg piece = 1mg absorbed =1 cig 20 cigs = 10 pc 4mg gum = 20 pc 2mg gum Take evenly spaced throughout the day to replace need for nicotine	Tapering may occur naturally as need for nicotine decreases Alternatively, decrease by one piece per day every few days	DO NOT CHEW LIKE ORDINARY GUM Recommended use time 20 - 30 minutes per piece Alternate chewing and "parking" between cheek and gum (chew until mouth tingles, then "park" for 1 minute) Do not eat or drink 15 minutes before or while using these products
		Discontinue if tachycardia or palpitations occur	indigestion and heartburn can occur	Take additional as needed		Do not smoke while using these products



Product	Best For	Precautions	Adverse Effects	Dosage	Tapering Schedule	Patient Education
Nicotine Lozenge Commit® 4mg, 2mg	For patients who smoke less than one pack per day acceptable as solo therapy As an adjunctive medication in combination therapy treatment (with Nictotine Patch or Zyban®)	Patients with dry mouth or sicca syndrome may not be able to produce enough saliva to dissolve lozenge Serious arrhythmias or severe worsening angina Caution within 6 weeks of myocardial infarction Discontinue if tachycardia or palpitations occur	Mild sense of buccal mucosal irritation from nicotine absorption Hiccups and cough can occur from incorrect use of the lozenge If chewed or swallowed, indigestion and heartburn can occur	Use 4mg ≥ 10 cig/24hr Use 2mg < 10 cig/24hr Each 4mg lozenge = 2mg absorbed = 2 cigs Each 2mg lozenge = 1mg absorbed = 1 cig 20 cigs = 10 4mg lozenges = 20 2mg lozenges Take evenly spaced throughout the day to replace need for nicotine Take additional as needed	Tapering may occur naturally as need for nicotine decreases. Alternatively, decrease by one lozenge per day every few days.	DO NOT BITE, CHEW OR SWALLOW Allow to dissolve in mouth slowly while moving lozenge from side to side Each lozenge takes 20-30 minutes to dissolve Do not eat or drink 15 minutes before or while using this product Do not smoke while using this product
Nicotine Inhaler Nicotrol Inhaler®	For patients who desire the hand-to-mouth feel of a cigarette As an adjunctive medication in combination therapy treatment (with Nictotine Patch or Zyban®)	Hypersensitivity to menthol Serious arrhythmias or severe worsening angina Caution within 6 weeks of myocardial infarction Discontinue if tachycardia or palpitations occur	Mouth and throat irritation Cough		After initial treatment period of 12 weeks, gradually reduce dose over the next 6-12 weeks	Instruct patient to take 40 puffs, take an hour break, then another 40 puffs per cartridge (manufacturer recommends 80-100 puffs for 20 minutes for optimal results, but many patients find such use unpleasant or impractical) Do not use more than 16 cartridges each day Patient is not to puff the inhaler like a cigarette; rather instruct to hold the puff in the mouth for a moment, then to resume regular breathing. This is more akin to cigar or pipe smoking Absorption is via the buccal mucosa and inappropriate use including attempted inhalation may cause mouth and throat irritation and coughing Avoid food and acidic drinks such as coffee, tea, citrus juices, and sodas before and during use Decreased nicotine delivery in cold winter air Do not smoke while using these products





Product	Best For	Precautions	Adverse Effects	Dosage	Tapering Schedule	Patient Education
Nicotine Nasal Spray Nicotrol NS®	For patient who needs fast relief or an easy to adjust dose As an adjunctive medication in combination therapy treatment (with Nictotine Patch or Zyban®)	Not recommended in patients with chronic nasal inflammation and obstruction Severe reactive airway disease Serious arrhythmias or severe worsening angina Caution within 6 weeks of myocardial infarction Discontinue if tachycardia or palpitations occur	Nasal irritation Sneezing Cough Teary eyes	20 doses = 1ppd 1 dose = 1 spray in each nostril = 1 mg of nicotine absorbed Starting dose is 1 or 2 doses per hour, which may be increased up to 40 doses/day	Initial therapy is 3 months, before tapering for 3-6 months. Skip doses to taper.	Instruct patient to tilt head back and spray Troubling adverse effect of nasal irritation decreases with use Do not smoke while using these products
Sustained Release Buproprion Zyban® or Wellbutrin® SR Can be used w/ Nicotine Replacement Therapy	Patients who have difficulty discontinuing cigarette use during quit attempt	Seizure history Current use of Wellbutrin or MAO inhibitor Eating disorder (bulimia/anorexia) Alcohol dependence Head trauma Co-use with drugs sharing the cytochrome P4502B6 ^e pathway may be contraindicated Serious arrhythmias or severe worsening angina Caution within 6 weeks of myocardial infarction Discontinue if tachycardia or palpitations occur	Insomnia Dry mouth Anxiety Seizures	Start 1-2 weeks before quit date. 150mg/24hr for 3 days then 150mg BID with doses at least 8 hrs apart For elderly patients, or in cases of polypharmacy 150mg every morning may be recommended (fewer adverse effects)	No tapering required Usual length of treatment is 7-12 weeks	Take 2 nd pill in early evening to reduce insomnia Never double dose if a pill is missed Swallow tablet whole; do not crush, divide, or chew Patients should report changes in mood and behavior





Product	Best For	Precautions	Adverse Effects	Dosage	Tapering Schedule	Patient Education
Varenicline	Patients with high rates	Women breastfeeding	Nausea	Start 1 week before quit date	An additional 12 week	Take after eating and with 8 oz. water
	of relapse	should avoid use	Insomnia	0.5mg/24hr for the first 3	course is recommended for	(full glass)
Chantix®			Abnormal dreams	days then 0.5mg/BID for next	successful patients to	
Cilditux®		Persons with severe renal	Depressed mood	4 days (one in the morning,	increase the likelihood of	Take missed dose as soon as
		· · ·	Agitation	and one in the evening)	long-term abstinence	remembered; if close to next dose
		dosage adjustment	Siezures			time, skip missed dose and take next
				After first 7 days 1mg/BID	Unsuccessful patients or	dose at regular time
		Can exacerbate prior or		(one in the morning, and one	those who relapse should	
		current psychiatric illness		in the evening)	be encouraged to make	Nausea is usually transient and most
		Serious arrhythmias or			another attempt once	patients will not need to discontinue
		severe worsening angina		Patients should be treated	factors contributing to the	use; if nausea persists, dose reduction
				for 12 weeks	failure have been addressed	is recommended
		Caution within 6 weeks of				
		myocardial infarction				Patients should report changes in
						mood and behavior
		Discontinue if tachycardia				
		or palpitations occur				

Notes:

- a. Patches are available under various brand names such as Nicoderm® CQ® and Habitrol®, and under generic formulations.
- b. Nicotrol® is available in 15mg, 10mg, and 5mg doses, and is worn for 16 hour time periods (daytime hours only).
- c. Gum is available under various brand names such as Nicorette®, and under generic formulations.
- d. Manufacturer's insert recommends 4mg ≥ 25 cig/24hr, and 2mg < 25 cig/24hr.
- e. These include most antidepressants (SSRIs, many tricyclics), beta-blockers, antiarrhythmics, and antipsychotics

How to write a prescription

- Line 1: Name & strength of prescribed drug
- Line 2: Disp: Quantity & type (tablet, lozenge, spray, patch, inhaler, gum) of the prescribed drug dispensed
- Line 3: Sig: Directions for use (include quantity per day & time period for use)

Adapted from: Columbia University Pocket Guide to Tobacco Cessation, The Tobacco Cessation Clinics at Columbia University Medical Center; Smoking Cessation Pharmacotherapy Guidelines, Columbia University Manhattan Tobacco Cessation Program.