Treating Tobacco Use

General:

20% of humans smoke

70% of the smokers want to quit

50% of the smokers who want to quit, quit

Conclusion: 7% of smokers quit

**The 5 A’s of treating Tobacco Dependence**

1. Ask: Do you smoke? How long has it been since you quit? Do you still have urges?

2. Advise to quit

Advise Clearly: It is important for you to quit

Advise Strongly: QUIT!

Advise Personalizedly - smoking will kill your kids

3. Assess: Are you willing to quit at this time?

4. Assist

STAR:

**S**et a quit date: Quit within 2 weeks

**T**ell family and friends

**A**nticipate challenges

**R**emove tobacco products

Offer medication (table below)

Offer Counseling

Recognize danger situations stress, being around smokers but most importantly:

. being around stressed smokers

Coping Skills If/then statement: if urged then get distracted/change routine

Provide information 1 puff will cause a relapse

Be supportive express concerns and willingness and fears and ambivalence

5. Arrange for a follow up (monitor)

Follow up 1: within the first week

Follow up 2: within the first month

**1st line Medications**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug | Dose 1 | Dose 2 | Dose 3 | Duration |
| Bupropion  Don’t use Hx depression  Don’t use Hx of seizure | 150 mg  for days 1,2,3 | 150 mg BID  on day 4 - end |  | 6 months |
|  |  |  |  |  |
| Varenicline (Chantix)  Don’t use Hx crazy  Don’t use Hx renal | 0.5 mg daily  Day 1,2,3  (first half of week) | 0.5 mg BID  Days 4,5,6,7  (second half of week) | 1 mg BID  Days 8-end  (week 2 – end) | 6 months |
|  |  |  |  |  |
| Nicotine **Patch** (21,14,7)  < 10 fags/day | 14 mg daily  for 1 month | 7 mg daily  for 1 month - end |  | 3 months |
| Nicotine **Patch** (21,14,7)  > 10 cigs/day | 21 mg daily  For 1 month | 14 mg daily  For 1 month | 7 mg daily  For 1 month | 3 months |
|  |  |  |  |  |
| Nicotine **Gum**  < 25 cigs | 2 mg q hr |  |  | 3 months |
| Nicotine **Gum**  > 25 cigs | 4 mg q hr |  |  | 3 months |
|  |  |  |  |  |
| Nicotine Inhaler lol | 1 puff q20 min |  |  | 6 months |
|  |  |  |  |  |
| Nicotine Lozenge  Afternoon smoker | 2 mg |  |  | 6 months |
| Nicotine Lozenge  Morning smoker | 4 mg q1hr  For 1 month | 4 mg q2hr  For 1 month | 4 mg q4hr  For 1 month – end | 6 months |
|  |  |  |  |  |
| Nicotine Nasal Spray | 1 squirt per nostril qh1 |  |  | 6 months |

**Q&A**

Patient wants drugs and no counseling drugs + counseling > drugs alone (more + more > more)

Will I gain weight? not if you work out. Take a walk instead of smoking

Is NRT (nicotine replacement therapy) harmful? It’s safer than smoking 4,000 chemicals in a fag

What if I smoke <10 cigs/day? Get out of here you smoking poser

But I need help!! Nicotine patch 14 mg daily for 1 month then 7 mg/day for 2 months

**Patients Who are Unwilling to Quit**

Show them the 5 R’s

1. Relevance make it personal - smoking will kill your kids (hmm sounds familiar…)

2. Risk ask the patient to identify the risks such as SOB, COPD, MI, CVA, CVD, HTN

. and other acronyms they wouldn’t understand

3. Rewards Improved health, save money and healthier babies that smell better

4. Roadblock ask the patient to identify roadblocks such as weight gain, enjoyment, socialize

5. Repetition Ever tried. Ever failed. No matter. Try Again. Fail again. Fail better. –S Beckett

Roll with Resistance: back off if they are resistant.

Then ask permission to provide information: “Want to hear some strategies!?”

Support Self-Efficacy “So you were fairly successful the last time you tried to quit.”