

MEDICATIONS FOR QUITTING SMOKING

Nicotine Gum

Dosage: Comes in 2 mg and 4 mg doses. The 2 mg gum is recommended for those smoking under 25 cigarettes a day. The 4 mg gum is recommended for those smoking more than 25 cigarettes a day.

Use: Each piece of gum is good for 20 to 30 minutes. The gum should be chewed until the patient experiences a “peppery” taste. Then they need to “park” it between the gums and cheek until the peppery taste is gone. This process should be repeated until the gum’s taste is gone.

Pros: It imitates the patient’s smoking pattern. Can be used on a scheduled basis or as needed. Use of the medication is discrete. Nicotine reaches the brain in 5-10 minutes. This product mimics the behavior of those using spit tobacco and may be especially appealing to them.

Cons: Learning to use the gum correctly can be difficult. Patient must be careful not to eat or drink anything except water 15 minutes before and during use of the product. Foods and other liquids make absorption of the nicotine difficult. Patients often do not chew enough of the gum in a day to get the maximum benefit. Patients frequently discontinue use of the gum too early in their quitting process. This may relate to cost or to difficulty of use. Users with dental work may have problems with the gum—sticking to dental work or discomfort. Heavy smokers may not get enough benefit from the gum.

Nicotine Patch

Dosage: Patches come in 21 mg, 14 mg, 7 mg, 15 mg, 10 mg and 5 mg, depending on the manufacturer. They come in 16 hour and 24 hour versions. For patients smoking 5-10 cigarettes a day, the 14 mg patch should be used. For those smoking 11-20 cigarettes a day, the 21 mg patch should be used. For those at 21 to 40 cigarettes a day, use 35 mg (One 21 mg patch and one 14 mg patch). For those using more than 40 cigarettes a day, use 42 mg (Two 21 mg patches).

Use: Patch should be placed on a hairless location anywhere between the waist and neck. Patch should be applied every morning upon waking.

Pros: Easy to use. It only needs to be done once a day.

Cons: Can cause mild to moderate skin irritation. Patients may discontinue use because of the discomfort. Some patients experience insomnia with the 24-hour patch. They may need to remove it before going to bed. It takes 2 hours to reach a therapeutic level of nicotine.

Nicotine Spray

Dosage: A dose of nasal spray contains 0.5 mg delivery to each nostril. Initial dosing should be 1-2 doses per hour, increasing as needed to no more than 5 times per hour or 40 times in 24 hours. Minimum recommended treatment is 8 doses per day.

Use: Patient should exhale first and then use spray. Spray should not be inhaled. Tilt head back when using.

Pros: Medication is absorbed quickly. Can use as needed, imitates the smoker's tobacco use pattern.

Cons: Most (94%) of users experience nasal irritation. Increases in nasal congestion seen. Changes in taste or smell may occur. Some risk of dependency.

Nicotine Inhaler

Dosage: Each inhaler cartridge delivers 4 mg of nicotine over 80 inhalations. Recommended dosage is 6-16 cartridges per day. Recommended duration of treatment is up to 6 months.

Use: Patient sucks on the mouthpiece. 3-4 puffs per minute for 5 minutes replaces one cigarette.

Pros: Mimics patient's smoking pattern and behaviors. Medication absorbed in 5-10 minutes.

Cons: Product must be kept at 40 degrees or higher to be effective. Many patients experience irritation in the mouth and throat. Coughing and rhinitis were also common. Requires frequent use to gain therapeutic effect. Not always covered by insurance plans.

Nicotine Lozenge

Dosage: The lozenge comes in 2 mg and 4 mg. For smokers using less than 24 cigarettes a day, use the 2 mg. For those using more than 24 cigarettes a day, use the 4 mg. Do not exceed 20 lozenges a day. Use 1 lozenge every one to two hours but not more than 5 in 6 hours.

Use: Patient lets lozenge slowly dissolve in mouth. Do not bite, chew or swallow the lozenge. Try to minimize swallowing while using the lozenge.

Pros: Mimics patient's smoking pattern and behaviors.

Cons: The lozenge is difficult to learn to use. It is not to be consumed like a hard candy. Cannot eat or drink 15 minutes before and during use. Taste is difficult to get used to. Patients may experience mouth or throat irritation or heartburn.

Bupropion

Dosage: Dosage for cessation is 150 mg, once a day for the first 3 days, then increasing to twice a day. Treatment should be started 1 to 2 weeks before quitting smoking.

Use: Take by mouth with or without food. Swallow whole. Do not crush, chew or break.

Pros: Nicotine free medication. Can be used with a nicotine replacement therapy if needed. Easy to use. High, long-term success rates, especially when used with the patch.

Cons: Some patients experience insomnia. Contraindicated in patients with a history of seizure, liver disease, brain injury or eating disorder. Patients with major depressive disorder may experience an increase in symptoms or thoughts of suicide.

Chantix/Varenicline

Dosage: The recommended dose is 1 mg twice daily following a 1-week titration. The first dose should be taken 1 week prior to the patient's quit date. The initial dose should be .5 mg once daily for the first 3 days. On the 4th day the dosage should be increase to .5 mg twice daily for the remainder of the first week. On the 8th day through the end of treatment, the dose should be 1 mg twice daily.

Use: Should be taken after eating with a full glass of water.

Pros: Nicotine free medication. Has no known contraindications. High short-term success rates (40% after 3 months.)

Cons: Cannot be taken with nicotine replacement medication. Patients may experience nausea and changes in dreaming. This is a new medication and is not yet covered by all insurance plans.

Michigan Department of Community Health
Karen S. Brown, M.P.A.
Public Health Consultant
Tobacco Section
Health Promotion & Publication
Phone: (517) 335-8803
E-mail: brownks@michigan.gov
Fax: (517) 335-8269
Address: P.O. Box 30195
Lansing, MI 48909

Last updated: 2/12/07