

# QUITWORKS<sup>SM</sup>

## Quick Guide To Pharmacotherapy In Tobacco Treatment

### NICOTINE REPLACEMENT OPTIONS

#### PATCHES

Nicotrol® 15 mg, 10 mg, 5 mg	Initial: 1 patch/16 hrs. MAX: Same as above	Tx Duration: 8 wks.
Nicoderm® CQ 21 mg, 14 mg, 7 mg	Initial: 1 patch/24 hrs. MAX: Same as above	Tx Duration: 8 wks.

#### GUM

Nicorette® 2 mg, 4 mg	Initial: 1 piece every 1–2 hrs. MAX: 24 pieces/24 hrs.	Tx Duration: 8–12 wks.
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#### LOZENGE

Commit® 2 mg, 4 mg	Initial: 1 lozenge every 1–2 hrs. MAX: 5 in 6 hrs; 20 per day	Tx Duration: 12 wks.
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#### NASAL SPRAY

Nicotrol® NS 10 mg/ml	Initial: 1–2 doses/hr. MAX: 5 doses/hr. or 40 doses/day	Tx Duration: 3–6 mos.
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#### INHALER

Nicotrol® Inhaler 10 mg/cartridge	Initial: 6–16 cartridges/day MAX: 16 cartridges/day	Tx Duration: 3–6 mos.
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### NON-NICOTINE MEDICATION

#### BUPROPION HCL SR

Zyban® 150 mg tablets	Initial: 150 mg/day (days 1–3) 300 mg/day (day 4+) MAX: 300 mg/day	Tx Duration: 7–12 wks.
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#### VARENICLINE

Chantix® 0.5 mg, 1.0 mg	Initial: 0.5 mg/day (days 1–3) 0.5 mg/2x/day (days 4–7) 1.0 mg/2x/day (day 8+) MAX: 2 mg/day	Tx Duration: Up to 12 weeks
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Inclusion of this adult dosage chart is strictly for the convenience of the prescribing provider. Please consult the Physicians' Desk Reference for complete product information and contraindications. This chart does not indicate or authorize insurance benefit coverage for any of these medications. For insurance benefit information, the patient will need to contact his/her insurer directly. The cost or provision of these medications is not included as any part of the Try-To-STOP TOBACCO Resource Center of Massachusetts or QuitWorks program. **Make smoking history.**

## 5A Tobacco Intervention

### ASK ABOUT TOBACCO USE AT EVERY VISIT

- ✓ Implement an office system that ensures that, for every patient at every visit, tobacco-use status is queried and documented.

### ADVISE ALL TOBACCO USERS TO QUIT

- ✓ “I strongly advise you to quit smoking and I can help you.”

### ASSESS READINESS TO QUIT

- ✓ Ask every tobacco user if s/he is willing to make a quit attempt at this time:
  - If willing to quit, provide assistance (see below).
  - If unwilling to quit, provide motivational intervention.

### ASSIST TOBACCO USERS IN QUITTING

- ✓ Provide brief counseling:
  - Reasons to quit
  - Barriers to quitting
  - Lessons from past quit attempts
  - Set a quit date, if ready
  - Enlist social support.
- ✓ Recommend use of pharmacotherapy (patch, gum, lozenge, nasal spray, inhaler, bupropion, varenicline) unless contraindicated.
- ✓ Provide supplementary educational materials.

### ARRANGE FOLLOW-UP

- ✓ Refer to Try-To-STOP TOBACCO Resource Center: fax consent signed by patient to 1-866-560-9113 for proactive call to assess and arrange treatment.
- ✓ At subsequent visit, review patient follow-up report from Try-To-STOP TOBACCO Resource Center. Congratulate success, encourage maintenance.
- ✓ If tobacco use has occurred:
  - Ask for recommitment to total abstinence
  - Review circumstances that caused lapse
  - Use lapse as a learning experience
  - Assess pharmacotherapy use and problems.
- ✓ Consider referral to more intensive treatment.

For More Information: 1-800-TRY-TO-STOP

Visit [www.quitworks.org](http://www.quitworks.org)