



PHARMACOTHERAPY QUICK GUIDE

Medication Options and Dosages

| | PATCHES | | GUM | LOZENGE | SPRAY | INHALER | TABLETS |
|-------------------|--|------------------------------|--|--|--|--|--|
| Brand Strength | Nicotrol® 15 mg | Nicoderm®CQ® 21, 14, 7 mg | Nicorette® 2, 4 mg | Commit™ 2, 4 mg | NicotrolINS® 10 mg/ml | Nicotrol® 10 mg/cartridge | Zyban® 150 mg |
| Dosing | 1 patch/ 16 hours | 1 patch/ 24 hours | 1 piece/1-2 hours | 1 loz./1-2 hrs wks 1-6 1 loz./2-4 hrs wks 7-9 1 loz./4-8 hrs wks 10-12 | 2-10 sprays/hour | 6-16 cartridges/day | 150 mg/day (days 1-3) 300 mg/day (day 4+) |
| Duration | 8 weeks | 8 weeks | 8-12 weeks | 12 weeks | 3-6 months | 3-6 months | 7-12 weeks |
| Advantages | Private; once/day | | Can offset cravings, delays weight gain | Decreasing amounts reduces dependence | Responds quickly to cravings (6 min) | Keeps hands busy, mimics smoking | Also treats depression, delays weight gain |
| Adverse Reactions | 50% experience local skin reaction (rotate and use steroid cream); sleep disturbances (remove at bedtime) | | Mouth soreness, hiccups, dyspepsia | Indigestion, insomnia hiccups, mouth soreness | Transient nasal irritation, sore throat, watery eyes | 40% experience mouth and throat irritation, dyspepsia | Dry mouth, insomnia, shakiness |
| Contraindications | Severe eczema or other skin diseases or allergies that may be exacerbated by the patch | | TMJ or other jaw problems; dentures | TMJ; mouth or tongue problems | Asthma, rhinitis, nasal polyps, sinusitis | Allergy to menthol | Seizure disorder; bupropion allergy; bulimia or anorexia nervosa; concurrent use of MAO inhibitors |
| Telephone | 1-800-699-5765 | 1-800-834-5895 | 1-800-419-4766 | 1-800-419-4766 | 1-800-699-5765 | 1-800-699-5765 | 1-800-U-CAN-QUIT |
| Web address | nicotrol.com | nicodermCQ.com | nicorette.com | commitlozenge.com | nicotrol.com | nicotrol.com | zyban.com |

This adult options and dosages chart is provided strictly for the convenience of the prescribing clinician. Please consult the *Physician's Desk Reference* for complete product information and contraindications.



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Clinical Notes

Pharmacotherapies for the treatment of nicotine dependence are known to

- Double long-term quit rates and
- Help ALL patients who smoke, are interested in quitting and do not have a medical contraindication to NRT (Nicotine Replacement Therapy) or bupropion SR (Zyban®).

Children and Adolescents

Recommend NRT only when there is clear evidence of nicotine dependence and a desire to quit. Consider body weight and degree of dependence when selecting NRT dose.

Pregnant Women

In the absence of adequate studies on the safety of pharmacotherapy in pregnant women, encourage pregnant smokers to quit using behavioral interventions first. Recommend pharmacotherapy if the likelihood of smoking abstinence, with its potential benefits, clearly outweighs the risk of pharmacotherapy.

Light Smokers

Consider reducing the dose of NRT for those who smoke fewer than 12 cigarettes per day. No adjustments are necessary when using bupropion SR.

Psychiatric Conditions

Bupropion SR abates mood-related withdrawal symptoms and produces few adverse effects. Combined with NRT, bupropion SR helps decrease the relapse to smoking common among smokers with psychiatric conditions, such as depression and alcohol abuse.

Cardiovascular Disease

NRT, particularly the patch, presents no adverse cardiovascular effects. Nevertheless, weigh the risks and benefits among patients in the first four weeks of post-myocardial infarction and those with serious arrhythmias or severe angina pectoris.

Peptic Ulcer Disease

Although no studies are available on NRT's effects on ulcer disease, nicotine may delay healing of active ulcers. Weigh risks and benefits of NRT in patients with active ulcer.

Other Conditions that may Contraindicate NRT

- Severe renal failure
- Active hyperthyroidism
- Poorly controlled insulin-dependent diabetes
- Severely uncontrolled hypertension
- Peripheral vascular disease

Long-term Use of Pharmacotherapies

The long-term use of NRT or bupropion SR presents no known health risks. Recommend long-term therapy (six or more months) for smokers reporting persistent withdrawal symptoms. Encourage patients who stop medication prematurely to continue use for the recommended duration.

Combining Pharmacotherapies

Recommend combination therapy for patients who have failed on monotherapy or who are heavily addicted. Quit rates have been shown to increase slightly by combining the nicotine patch with other NRTs or bupropion SR.