



Rx Update

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OTC SMOKING CESSATION MEDICATIONS

Cigarettes contain nicotine, which is an addictive drug that makes it difficult to stop smoking. A person who is addicted to nicotine may experience psychological symptoms as well as physical withdrawal symptoms such as irritability, anxiety, difficulty concentrating, frustration, anger, restlessness, and craving for tobacco when he or she stops smoking. Smoking cessation medications help people stop smoking cigarettes by easing their withdrawal symptoms. As a general rule, **people who smoke more than 10 cigarettes a day and want to quit should use an FDA-approved smoking cessation product.** Most smoking cessation products contain nicotine, but they do not contain the tar, carbon monoxide, and other toxins that make cigarettes so harmful to people's health.

Nicotine replacement products that are available in the UIHC Ambulatory Care Pharmacy and can be purchased without a prescription (over-the-counter, OTC) include: nicotine chewing gum (Nicorette[®]), nicotine lozenges (Commit[®]), and nicotine transdermal patches (Nicoderm CQ[®]). Patients who should consult a physician before using nicotine smoking cessation products include those who: have heart disease, recent heart attack, or irregular heartbeat because nicotine can increase the heart rate; high blood pressure not controlled with medication because nicotine can increase blood pressure; continue to smoke; take other smoking cessation drugs; take a prescription medication for depression or asthma; or are pregnant or breast-feeding. Depending on how much the patient smoked, they may still experience some withdrawal symptoms or may feel some side effects from the nicotine, such as headache, nausea, upset stomach, dizziness, or disturbing dreams. **Smokers who are heavily dependent on nicotine or who have failed an attempt to quit may want to ask their doctor about using a combination of nicotine replacement products and/or prescription medications** (e.g., bupropion [Zyban[®]]). Behavioral therapy (counseling, support groups) is also an important component in helping patients quit smoking.

The **nicotine transdermal patch (Nicoderm CQ[®])** is started at the 21 mg/day patch for patients who smoke more than 10 cigarettes per day, and an initial dose of 14 mg/day for patients who smoke 10 cigarettes or less per day. The dose is titrated down over 8 to 10 weeks. A new nicotine patch is applied each day to a different area of dry, clean, non-hairy skin and left on for 16 to 24 hours per day. The patch should be worn for 24 hours for patients who experience cravings in the morning and should be taken off at night for patients who experience vivid dreams or sleep disturbances at night while wearing the patch. A mild itching, burning or tingling at the site of the patch after it is applied is normal, but should go away within about an hour. After removing the patch, the skin might be red for up to a day. If the skin develops a rash or becomes swollen or very red, a doctor should be consulted. The patch may not be a good choice for those with skin problems or allergies to adhesive tape.

Chewing nicotine gum (Nicorette[®]) releases nicotine into the bloodstream through the lining of the mouth. Unlike regular chewing gum, nicotine gum must be chewed very slowly until it has a slight taste or causes a slight tingling sensation in the mouth; then "parked" between the cheek and gum until the taste and tingling goes away; then chewed and parked in the same way for about 30 minutes. The 2 mg gum should be used if the patient smoked fewer than 25 cigarettes a day and the 4 mg gum if the patient smoked 25 cigarettes or more a day. One piece should be chewed every 1 to 2 hours for the first six weeks and then the frequency gradually reduced. Most people find that chewing 9 to 12 pieces a day controls their urge to smoke; no more than 24 pieces should be used per day. Nicotine gum should not be used in patients with temporomandibular joint disease (TMJ), dentures or other vulnerable dental work, stomach ulcers, or diabetes. Nicotine gum may cause belching, jaw aches, and a sore mouth or throat.

The **nicotine lozenge (Commit[®])** is similar to the nicotine gum and releases nicotine into the bloodstream through the lining of the mouth. The 2 mg lozenge is used for patients who smoke their first cigarette more than 30 minutes after waking up and the 4 mg lozenge should be used in patients who smoke within 30 minutes of waking up. One piece should be used every 1 to 2 hours for the first six weeks and then the frequency gradually reduced. The lozenge should be placed in the mouth and allowed to slowly dissolve. The lozenge should occasionally be moved from one side of the mouth to the other until completely dissolved (about 20 to 30 minutes). Patients should minimize swallowing and not chew or swallow the lozenge so that the nicotine can be properly absorbed in the mouth. A warm or tingling sensation may be felt. Patients should not eat or drink for at least 15 minutes before using a lozenge or while one is in the mouth. Patients should use at least 9 lozenges per day for the first 6 weeks, but they should not use more than 5 lozenges in a 6-hour period or more than 20 lozenges per day. Nicotine lozenges should not be used in patients with stomach ulcers or diabetes.