

## Products to help you Quit smoking

Quitting may not be easy. Tobacco products are addictive and it is easier to quit smoking with help. There is a range of medical products available that can double your chances of success.

### What type of products?

Medical products shown to be successful are:

- Nicotine replacement therapies (patch, gum, lozenge, sublingual tablet and inhaler). All nicotine replacement therapies are available over the counter in your local pharmacy and can be bought without a prescription. Some products may be more widely available in supermarkets etc.
- Bupropion (Zyban) tablets. These need to be prescribed by a doctor and are listed on the Pharmaceutical Benefits Scheme, which makes them cheaper.

Correct usage of any of the above products has been shown to double the chances of stopping smoking among heavy smokers. If you have recently had a heart attack, are pregnant, or you are breastfeeding, talk to your doctor before using these products.

### How does nicotine replacement therapy (NRT) work?

NRT works by replacing the nicotine obtained from cigarettes with nicotine delivered by the patch, gum, lozenge, sublingual tablet or inhaler.

- The gum, lozenge and sublingual tablet slowly deliver the nicotine through the lining of the mouth.
- The patch slowly delivers the nicotine through the skin.
- The inhaler delivers the nicotine a little faster through the mouth.

Because these products deliver a constant low dose of nicotine compared to cigarettes they:

- reduce your body's addiction to the nicotine in cigarettes
- reduce symptoms of withdrawal, eg cravings, sleeplessness, poor concentration and anxiety.

### How to use NRT

The following information is not intended to replace the Consumer Medicine Information that accompanies the NRT. Remember to read the Consumer Medicine Information issued in the NRT packaging before using the NRT.

#### Patch

The nicotine patch is an adhesive patch that you wear on your skin. It slowly releases nicotine, which you absorb through your skin. The patch works by replacing some of the nicotine you normally inhale from cigarettes.

- If you smoke more than 10 cigarettes a day, start on the highest strength patch – either the 15mg/16 hour patch, or the 21mg/24 hour patch.
- If you smoke less than 10 cigarettes a day or weigh less than 45kg, start on either the 14mg/24 patch or 10mg/16hrs.
- Wearing a patch for 16 hours per day is as effective as wearing one for 24 hours per day.
- Using the patch for 8 weeks is as effective as longer courses and there is no evidence that gradually reducing the dose is better than simply stopping use of the patch.
- Nicotine patches should not be used for longer than 3 months.

You must use nicotine patches correctly for them to be effective in helping you quit.

1. One patch is used per day.
2. Apply to clean, dry, smooth skin on arm or upper body, in the morning.
3. Choose a different site each day to avoid skin rash.

### **Gum**

- Nicotine gum is available in 2mg and 4mg strengths. Usually the 4mg strength is recommended if you smoke 20 or more cigarettes in a day or are a smoker who has not been able to quit smoking using the 2mg strength.
- Nicotine gum is NOT to be chewed like regular gum, but used as an oral patch.
- Use gum regularly, for example, 1 piece per hour, as follows:
  - 1 Chew 3-4 times, until you feel a tingling sensation or a 'peppery' taste.
  - 2 Flatten it and place it between your cheek and gum.
  - 3 Occasionally move the gum around your mouth and chew two or three times to release more nicotine as needed.
  - 4 Eating or drinking anything except water should be avoided for 15 minutes before and during chewing.
  - 5 Discard after 30 minutes.
- Medical guidelines recommend you use the gum every 1-2 hours during the day, for a period of 1-3 months.
- It is recommended that you do not chew more than 20 of the 2mg or 10 of the 4mg pieces in one day.

### **Lozenge**

This product works in the same way as nicotine gum; the nicotine is absorbed into the bloodstream through the lining of the mouth. Because the lozenge is sucked until it dissolves completely, up to 25 per cent more nicotine may be absorbed into the blood than with similar dosages of gum. This means that it may be more effective in reducing nicotine withdrawal symptoms.

1. Use one lozenge at a time.
2. Do not exceed 15 lozenges per day.
3. The lozenge should be moved around the mouth from time to time and sucked until it dissolves (takes 20-30 minutes).

4. Do not eat or drink while sucking the lozenge.
5. For about six weeks, use one lozenge about every 1-2 hrs.
6. For the next 3 weeks, use one lozenge every 2-4 hrs.

The lozenge comes in two strengths. It is easy to decide which one is suitable for you.

If you usually reach for your first cigarette of the day:

- Within 30 minutes of waking – use the 4mg.
- Longer than that – use the 2mg.

**Remember to read and adhere to the information on the pack.  
See your doctor or pharmacist for more information.**

### **Sublingual tablet**

Similar to the lozenge, nicotine is released and absorbed through the lining of the mouth as the tablet dissolves. The levels of nicotine attained are similar to those of the 2mg gum. Sublingual tablets may be useful in situations where chewing gum is inappropriate.

1. Tablet is placed under the tongue where it releases nicotine as it dissolves.
2. Tablet should not be swallowed, sucked or chewed.
3. Drinking is permitted while tablet dissolves.
4. Those who smoke less than 20 cigarettes per day should use one tablet per hour (8-12 tablets per day).
5. Those who smoke greater than this amount should use two tablets per hour (16-24 tablets per day).
6. Full dose of tablets should be used for 3 months, then gradually reduced to zero.
7. The sublingual tablet should not be used for longer than 12 months.

### **Inhaler**

This device consists of a plastic mouthpiece and cartridge containing 10mg of nicotine.

It may be useful for those who miss the hand to mouth action of smoking.

- The inhaler resembles a cigarette and the nicotine is inhaled through the mouth.
- After 20 minutes of intense use with deep inhalations for continuous puffing you will have used all the available nicotine in a cartridge.

The program recommended by the manufacturers is:

- 6-12 cartridges per day for 12 weeks
- 3-6 per day for 2 weeks
- 1-3 per day for 2 weeks
- Use of the inhaler beyond 6 months is not recommended.

## **Withdrawal symptoms and side effects**

Some smokers confuse symptoms of withdrawal from tobacco with the side effects of NRT. They may become tense, agitated, depressed, have disturbed sleep or crave cigarettes when using NRT. These can be symptoms of nicotine withdrawal.

This can happen when the nicotine from the NRT has not properly replaced the nicotine from cigarettes. Different types of NRT can be combined to enhance the success, for example patch plus one of the following:

1. Gum
2. Lozenge
3. Sublingual tablet
4. Inhaler.

Some people do experience side effects, but these are usually mild.

Side effects can include:

- A rash on the skin where the nicotine patch is worn. Moving the patch to a new area of skin each day will help reduce skin irritation, and there are also medicated skin creams available
- Hiccups
- Indigestion
- Mouth irritation.

If you are concerned, talk to your doctor.

## **What is bupropion (Zyban)?**

Bupropion is a non-nicotine medication that helps people stop smoking. It is available only on prescription so you need to visit your doctor. Bupropion can be combined with NRT to help with quitting. Talk to your doctor about the suitability of this treatment. Bupropion may not be appropriate for all smokers and is not recommended for people with seizure disorders, those on certain medications for depression, or those with a history of manic-depressive illness. At the time of publication Zyban is the only form of bupropion available in Australia.

**For more information talk to your doctor or pharmacist.  
Call the Quitline 131 848 for free, ongoing counselling while you quit.**

## **Other strategies**

Other strategies that may help you when you decide to quit are:

- Counselling.
- Developing a quit plan which includes:
  - 1 Setting a date to quit.
  - 2 Reviewing past experience to determine what worked and what did not work.
  - 3 Identifying potential problems and ways to deal with them.
  - 4 Enlisting the support of family and friends.
  - 5 Quitting with a friend.
  - 6 Reducing alcohol and caffeine use in the first two weeks.

- 7 Avoiding other people's smoke.
- Being mindful of stressful or negative events.
  - Call the Quitline 131 848.
  - Visit [www.quitnow.info.au](http://www.quitnow.info.au) or [www.health.nsw.gov.au](http://www.health.nsw.gov.au).

If you need help making phone calls in English, ring the Translating and Interpreting Service (TIS) on 131 450.

Telephone numbers are correct at time of publication but are not continually updated. You may need to check the numbers in the telephone directory.

You can find more health information in your language on the Multicultural Communication website at <http://mhcs.health.nsw.gov.au>