

Update on medicines for smoking cessation

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Aust Prescr 2015;38:106-11

This activity was developed by Australian Prescriber based on the content of the article, which can be read in full at <http://www.australianprescriber.com/magazine/38/4/106/11>

SUMMARY

Persistent cigarette smokers usually have a nicotine addiction. This addiction has a chronic relapsing and sometimes remitting course and may persist lifelong.

Remission can be facilitated by the use of medication as part of a comprehensive management strategy tailored to the individual patient.

Nicotine replacement therapy is a first-line drug treatment. It is available in many formulations.

Varenicline is also a first-line drug treatment. It should be started before the patient stops smoking.

Bupropion is a second-line therapy. It may be associated with an increased risk of seizures and drug interactions.

While there is some evidence that electronic cigarettes might facilitate smoking cessation, quit rates are not yet comparable with those of the drugs approved on the Pharmaceutical Benefits Scheme.

This CPD activity should take around one hour to complete. It can be included in a pharmacist's CPD plan for two Group 2 non-accredited CPD credits. Pharmacists should self-record this activity.

To complete this Group 2 activity, you should read the article and complete the online quiz. The questions are based on the content of the article.

The correct responses will be forwarded to the email address you provide, with proof of your participation, when you electronically submit answers to the questions. There will also be space to reflect on your responses and what you have learned through this activity.

(Note that Australian Prescriber CPD activities are not accredited by the Australian Pharmacy Council.)

Learning Objectives

1. Understand the use of drugs in smoking cessation
2. Apply knowledge of smoking cessation drugs in practice

Pharmacist Competency Standards

- 6.1 Assess primary healthcare needs
- 6.2 Deliver primary health care
- 6.3 Contribute to public and preventive health
- 7.3 Influence patterns of medicine use

These standards are in National Competency Standards Framework for Pharmacists in Australia 2010.

Questions

Visit <http://sgiz.mobi/s3/August-2015-Smoking-cessation> to complete this activity

1. True or false? Prescribing for smoking cessation

- a) should not be attempted in people who are smoking more than 30 cigarettes per day as they will be resistant to change
- b) needs to be accompanied by cognitive and behavioural interventions
- c) is more likely to succeed in people who are motivated to quit
- d) is contraindicated in patients with depression
- e) should not be repeated if the patient has resumed smoking after a previous course of therapy

2. True or false? Nicotine replacement therapy

- a) is a first-line drug treatment for smoking cessation
- b) should begin with a low dose
- c) is significantly more effective in an inhaled formulation
- d) can be used in different formulations by the same patient
- e) should begin before the patient stops smoking

3. True or false? Varenicline

- a) has less efficacy than nicotine replacement therapy
- b) requires a lower dose in patients with renal impairment
- c) should be started the day the patient stops smoking
- d) cannot be combined with nicotine replacement therapy
- e) commonly causes insomnia

4. True or false? Bupropion

- a) should be started before the patient stops smoking
- b) is contraindicated in patients with epilepsy
- c) requires a lower dose in patients with renal impairment
- d) cannot be combined with nicotine replacement therapy
- e) commonly causes insomnia

5. Which one of the following complaints is unlikely to be an adverse effect of the drugs used to assist smoking cessation?

- a) headache
- b) nausea
- c) aphthous ulcers
- d) abnormal dreams

Answers will be provided via email on completion of the activity at the link above.

Published by



For a medicineswise Australia.

Independent. Not-for-profit. Evidence based.

Funded by the Australian Government Department of Health

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ABN 61 082 034 393.

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