

QUITWORKSSM-NH

5 A's Tobacco Intervention PHARMACOTHERAPY

A Quick Guide For
Tobacco Treatment

NICOTINE REPLACEMENT OPTIONS

PATCHES

Nicoderm [®] CQ 7, 14, 21 mg	Initial: 1 patch/24 hrs. MAX: Same as above	Treatment Duration: 8–12 wks.
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GUM

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

Commit [®] 2, 4 mg	1 lozenge/1–2 hrs. (wks 1–6) 1 lozenge/2–4 hrs. (wks 7–9) 1 lozenge/4–8 hrs. (wks 10–12)	Treatment 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	Treatment Duration: 3–6 mos.
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INHALER

Nicotrol [®] Inhaler 10 mg/cartridge	Initial: 6–16 cartridges/day MAX: 16 cartridges/day	Treatment 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	Treatment Duration: 7–12 wks.
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VARENICLINE

Chantix [®] 0.5, 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	Treatment Duration: up to 7–12 wks.
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Inclusion of this adult dosage chart is strictly for the convenience of the prescribing provider. Please consult the Physician's 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.

Tri-State 5 A's 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-SR) unless contraindicated.
- ✓ Provide supplementary educational materials.

ARRANGE FOLLOW-UP

- ✓ Refer to Try-To-STOP Tobacco Resource Centers, NH: Fax consent signed by patient to **1-866-560-9113**. for proactive call to assess and arrange treatment.
- ✓ At subsequent visit, review patient's progress. 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