TAILORED TOBACCO TREATMENT OPTIONS
A practice tool to help clinicians decide on tobacco treatment options

TOBACCO TREATMENT PHARMACOTHERAPY OPTIONS*

**EVIDENCE BASED CLINICIAN APPROACH**

Appropriate pharmacotherapy with proper counseling should be offered to all tobacco users willing to reduce or stop their tobacco use.

ASK about tobacco use
"Have you used tobacco in the last 30 days?"

ADVISE to stop
"As a health professional, the best advice I can give you is to stop smoking."

ASSESS readiness to stop
"On a scale of 1-10, how confident and ready are you to stop using tobacco?"

ASSIST to stop
Use practical counseling and offer pharmacotherapy.

REFER to program
1-800-LUNG-USA (Freedom from Smoking)
1-800-QUIT-NOW ( Quit NOW Kentucky)

Long Acting Options
Varenicline, Bupropion, & Nicotine Patch (21 Mg, 14Mg, 7Mg)

Short Acting Options
Inhaler, Lozenge (2mg, 4mg) & Nicotine Gum (2mg, 4mg)

**COMBINATION THERAPY** (Long and Short Acting)

Bupropion + Nicotine Patch (21 Mg, 14 Mg, 7 Mg)

Nicotine Patch (21 Mg, 14Mg, 7Mg) + Lozenge (2 Mg, 4 Mg)

Nicotine Patch (21 Mg, 14Mg, 7Mg) + Gum (2 Mg, 4 Mg)

Nicotine Patch (21 Mg, 14Mg, 7Mg) + Inhaler

THE SELECTION OF PATCH DOSE IS GENERALLY BASED ON THE NUMBER OF CIGARETTE/DAY, WITH 1 MG OF PATCH PER CIGARETTE SMOKED. FOR EXAMPLE, A 10 CIGARETTE PER DAY SMOKER WOULD USE A 14 MG PATCH; A PACK A DAY SMOKER, A 31 MG PATCH. GUM AND LOZENGE STRENGTH (2 MG VS 4 MG) ARE DETERMINED BY THE TIME TO FIRST CIGARETTE AFTER WAKING. IF THE FIRST CIGARETTE IS SMOKED WITHIN 30 MINUTES, THE 4 MG IS USED. IF LATER, THE 2 MG. THE GUM/LOZENGE DOSE SELECTION APPLIES TO USE OF LOZENGE OR GUM EITHER AS A SINGLE AGENT, OR IN COMBINATION WITH THE PATCH OR BUPROPION.


**THE FIRST LINE TREATMENT FOR SNuff/SMOKELESS TOBACCO USERS IS COUNSELING IN COMBINATION WITH AN ORAL EXAM BY A DENTAL PROFESSIONAL. WITH MEDICATIONS ADDED AFTERWARD OR AT THE TIME OF THE ORAL EXAM. AMONG MEDICATIONS, VARENICline AND LOZENGE HAVE BEEN FOUND TO BE THE MOST EFFICACIOUS FOR SNuff/SMOKELESS TOBACCO USERS.**

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NICOTINE REPLACEMENT EQUIVALENCIES

**CIGARETTES**

- 2 packs/day: two 21 mg patches
- 1.5 packs/day: 21 mg + 14 mg patches
- 1 pack/day: one 21 mg patch
- 0.5 pack/day: one 14 mg patch
- 5 or less cigarettes/day: 4 mg gum OR 4 mg lozenge

**SNUFF**

- 3 cans/week: two 21 mg patches + 4 mg gum
- 2 cans/week: two 21 mg patches
- 1 can/week: one 21 mg patch

**CIGARS**

- 1-2 cigars/day: one 7 mg patch

*These nicotine replacement equivalencies are based on research studies and clinical experience to provide adequate replacement of nicotine during tobacco free hospitalizations. As such these equivalencies may be off-label prescribing/ use.


EVIDENCE BASED CLINICIAN APPROACH

Using adequate pharmacotherapy can help manage withdrawal when in situations of voluntary or involuntary abstinence.

**ASK about tobacco use**

"What kind of tobacco products do you use? How often do you use them?"

**ASSESS nicotine withdrawal**

"Have you experienced any of the following symptoms in the past 24 hours: cravings, depressive symptoms, insomnia, anger, anxiety, poor concentration, restlessness, or decreased appetite?"

**PROVIDE nicotine replacement**

Offer nicotine replacement based on withdrawal score and tobacco product use.

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