

Stay Current on the Latest Smoking Cessation Guidance

You'll see **renewed focus on smoking cessation**...due to updated Canadian guidelines.

Tobacco smoking is responsible for up to 30% of cardiovascular (CV) deaths.

Quitting at any age improves survival. Those who quit before age 40 have the same life expectancy as those who have never smoked.

The benefits of quitting begin quickly. Within one year, CV disease is reduced by half...and after 15 years the risk of CV disease is comparable to a lifelong nonsmoker.

Help patients prioritize smoking cessation...and be aware that counselling PLUS smoking cessation meds work better than either alone.

Alert patients to free services, such as calling 866-366-3667, texting "iQUIT" to 123456, or visiting SmokersHelpline.ca.

Continue to encourage patients. It often takes multiple attempts to succeed...and smoking even one cigarette a day increases CV risk.

Pull in your pharmacist if a med is needed to help with cessation efforts.

Expect your pharmacist to recommend a first-line option...varenicline, combo nicotine replacement therapy (NRT) with a nicotine patch PLUS breakthrough (gum, etc), or cytisine (Cravv).

These options work better than a single NRT or bupropion alone.

Cytisine is a natural health product and works as a partial nicotine agonist...similar to varenicline.

It seems as effective as varenicline and may have fewer side effects than varenicline...but labelled dosing is more complex with cytisine. Your pharmacist may suggest taking cytisine 3 mg three times daily instead...there's some evidence for this simplified dosing.

Generic varenicline or cytisine costs about \$60/month...versus at least \$100 for OTC nicotine patches plus gum, depending on quantity used.

Other options may be considered when appropriate. For example, bupropion may be used first-line for patients who also have depression.

Or combining options may be used when first-line meds aren't enough.

For example, limited data support NRT plus varenicline or bupropion...combo NRT with a higher dose of nicotine patches, such as 42 mg/day...or treatment periods longer than 12 weeks.

E-cigarettes may be tried in adults only after smoking cessation meds fail, or if they're unwilling to try other options.

But be aware that e-cigarettes aren't approved for smoking cessation in Canada...and long-term safety isn't known.

For patients who prefer e-cigs, they should completely stop cigarette smoking, such as within one week of switching to e-cigs.

They should also set a timeline to taper off e-cigs altogether...such as after 3 months of successful smoking cessation.

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Compare meds in our resource, *Smoking Cessation Drug Therapy*, for more on dosing, side effects, counselling tips, etc.

Key References:

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- Lindson N, Theodoulou A, Ordóñez-Mena JM, et al. Pharmacological and electronic cigarette interventions for smoking cessation in adults: component network meta-analyses. *Cochrane Database Syst Rev.* 2023. Sep 12;9(9):CD015226.

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