Healthier Together

Improving health and care in Bristol, North Somerset and South Gloucestershire

Clinical Guideline

NICOTINE REPLACEMENT THERAPY (NRT) FOR THE TREATMENT OF NICOTINE DEPENDENCE

- **SETTING** Bristol, North Somerset and South Gloucestershire (BNSSG) NHS Trusts and Primary Care
- FOR STAFF All staff involved in prescribing, administering and giving brief intervention for NRT.
- **PATIENTS** Adults and children over 12 years of age who are current smokers.

The Heaviness of Smoking Index:

How soon after you wake up do you smoke?	Within 5 minutes 6 - 30 minutes 31 - 60 minutes More than 60 minutes	3 2 1 0	
How many cigarettes per day do you smoke?	10 or less 11 - 20 21 - 30	1 2 3	
The higher the score, the more dependant the smoker is, indicating the need for higher starting doses of			
NRT and robust weekly support			
Dependence level: low (0-1), medium (2-4), and high (5-6)			

Guidance

Questions to aid prescribing choice:

Previous quit attempts:

- What has the patient already tried? What worked and what didn't?
- Has the patient used any support services?
- Experience of withdrawal symptoms and cravings

Prescribing **TWO** NRT formulations (dual therapy) e.g. a daily patch *PLUS* one other faster acting product when required for patient with medium to high dependency to counteract cravings and withdrawal symptoms which also doubles the chances of quitting smoking.

	Available Formulations:		
PRODUCT	DOSE/ADMINISTRATION	ADVANTAGES	DISADVANTAGES
Patches (N.B. Pregnant women should not use 24hr patches)	7mg in 24hrs or 10mg/16hrs (<5 cigarettes/day) 14mg in 24hrs or 15mg/16 hrs (5 – 10 cigarettes/day) 21mg in 24hrs or 25mg/16 hrs (>10 cigarettes/day)	Steady state of nicotine. Only needs one application per day, discreet.	Skin irritation, disturbed sleep (24hr use).
	To be applied on waking, patch is placed on clean, dry, non-tattooed and hairless area of the skin on the hip, trunk, or upper arm to allow a steady state of nicotine to be delivered throughout the day. Replace daily after removal. Place the next patch on a different area and avoid using the same site for several days. In pregnancy, remove the 16-hour patch before bed. Use the strength of patch to match the average daily cigarettes smoked for $6 - 8$ weeks. Then titrate strength down over $2 - 4$ weeks. Slower titration may be necessary. See BNF.		
Nicorette Quickmist® Mouth Spray 1mg/spray	Spray into the side of the cheek or under the tongue. A dose of nicotine is absorbed via the oromucosa within a few minutes. Use whenever the urge to smoke occurs, or to prevent cravings in situations where these are likely to occur. Use 1 to 2 sprays when cigarettes normally would have been smoked. Up to 4 sprays/hour. Most smokers will require 1 – 2 sprays every 30 minutes to 1 hour. Max. 64 sprays/day.	Controls cravings, fast acting, fresh taste.	Dry mouth/throat, nausea, mouth tissue irritation and hiccups. Contains a small amount of alcohol.
<u>Nicotine</u> <u>Lozenges</u> 2mg or 4mg	2mg strength = <20 cigarettes a day 4mg strength = >20 cigarettes a day Allow 1 lozenge to dissolve in the mouth. Move from side to side and rest against the inside of the cheek. Nicotine is absorbed via the lining of the mouth. Do not chew or swallow. Use whenever the urge to smoke occurs, or to prevent cravings in situations where these are likely to occur. Max. 15 lozenges/day.	Easy to use, discreet, mint flavour.	Hiccups and indigestion.
Nicorette® Inhalator 15mg/cartridge	Place cartridge in tube, piercing both ends. Inhale through the mouthpiece and a dose of nicotine is drawn up and absorbed through the lining of the mouth/throat. To be used when the urge to smoke occurs or to prevent cravings. The amount of nicotine from one puff is less than that from a cigarette. 1 puff on a cigarette is about 10 puffs on an inhalator. A 15mg cartridge lasts for approximately 40 mins of intense use. Otherwise 1 cartridge lasts 1 – 4 hours. Max. 6 cartridges/day.	Offers behavioural replacement for smoking. Occupies hands and controls cravings.	Throat irritation and coughing.
Nicotine Gum 2mg or 4mg	2mg strength = <20 cigarettes a day 4mg strength = >20 cigarettes a day One piece of gum should be used whenever the urge to smoke is felt or to prevent cravings in situations where these are likely to occur. Maximum daily dose: 15 pieces per day.	Available in different flavours and strengths, one piece of gum lasts for about 30 minutes.	Gum is difficult to use with dentures and may damage them. Throat irritation, increased salivation, dry mouth, and jaw pain.

Prescribing Notes

- Be aware that irritability, restlessness and aggression may be signs of nicotine withdrawal.
- Prescribe the appropriate strength patch to deliver an adequate fixed dose of nicotine throughout the day, which should be reduced over time. See BNF for dose reduction advice.
- Prescribe a second formulation to be used when required when there is an urge to smoke/counteract cravings.

Cautions

(Refer to the BNF or Summary of Product Characteristics for further details of all products)

- Haemodynamically unstable patients may cause palpitations (uncommon) and very rarely reversible AF.
- Unstable diabetes.
- Phaeochromocytoma or uncontrolled Hyperthyroidism.
- Hepatic/Renal impairment.
- Patients with recent history of myocardial infarction or cerebrovascular accident/TIA.
- Use a 16-hour patch in pregnancy, not 24-hour patch.
- Patches must not be placed on broken or tattooed skin and used in caution in cases of Psoriasis, Eczema, Dermatitis, Urticaria or previous allergic reaction to an NRT patch.

Symptom	Duration	Prevalence
Light headedness	<2 days	80%
Night time awakenings	<1 week	10%
Poor concentration	<2 weeks	17%
Irritability/aggression	<4 weeks	50%
Symptom	Duration	Prevalence
Depression	<4 weeks	60%
Restlessness	<4 weeks	40% (8% severe)
Constipation	>2 weeks	70%
Mouth Ulcers	>4 weeks	60%
Increased appetite	>10 weeks	70%

Withdrawal Symptoms from Stopping Smoking

Local Stop Smoking Services

Upon discharge from hospital, all patients should be referred to their local Stop Smoking Service who can offer further behavioural and pharmacological support. The best way of stopping is with a combination of expert support, advice and medication that their local Stop Smoking Service can provide for free.

There is an **NHS website** called **SmokeFree** which provides quitting advice and support, it can also be downloaded via app store. Web: <u>Quit smoking - Better Health - NHS (www.nhs.uk)</u>

For Bristol residents	Everyone Health: Tel: 0333 0050095 Email: eh.bristol@nhs.net Web: https://www.bristol.gov.uk/social-care-health/support-to-stop-smoking Patients can self-refer by texting QUIT to 60777 or by calling 0333 005
	0095 For eligibility criteria and up to date information about the services on offer, please visit: <u>https://remedy.bnssgccg.nhs.uk/adults/self-care/smoking-cessation/</u>
For North Somerset residents	SmokeFreeTel: 01275546744Email: smokefree@n-somerset.gov.ukWeb: Stop Smoking Better Health North Somerset (betterhealthns.co.uk)Patients can self-refer by texting HELP to 07800001316
	For up-to-date information about the services on offer, please visit: https://remedy.bnssgccg.nhs.uk/adults/self-care/smoking-cessation/

For South Gloucestershire residents	Tel: 01454 865502 Web: <u>https://oneyou.southglos.gov.uk/be-smoke-free/smokefree-services/</u>
	Patients can self-refer by texting their name and 'READY' to 01454865337, or calling the same number.
	For up to date information about the services on offer, please visit: <u>https://remedy.bnssgccg.nhs.uk/adults/self-care/smoking-cessation/</u>

Hospital Admission and Discharge

The British Thoraic Society guideline, <u>Medical Management of Inpatients with Tobacco Dependency</u>, provides a practical framework that clinicians can apply to help inpatients manage their tobacco dependence.

At discharge, at least two weeks of NRT should be supplied if required, prescribed on a TTA.

Take Home Message

- Smokers expect to be asked about smoking by healthcare professionals; this shows concern about their overall health.
- Every healthcare professional's role is to trigger quit attempts, by giving brief advice at every opportunity.
- Using NRT alongside intensive behavioural support from trained advisors improves quit rates.
- It is always better for patients to cease smoking and to use NRT. Smoking related deaths and disease are caused by the many thousands of chemicals in tobacco smoke, NOT nicotine.
- Stopping smoking will not only benefit a patient's long-term health by reducing the risk of developing smoking related disease, it can also reduce post-operative complications, reduce wound healing complications and improve recovery time.

Vaping Position Statement

Nicotine vaping is substantially less harmful than smoking and it is also one of the most effective tools for quitting smoking. Vaping is not completely harmless and is only recommend for adult smokers, to support quitting smoking and staying quit. <u>Here</u> you will find more information on the evidence and research of vaping, plus advice on how to use vapes (sometimes called e-cigarettes or e-cigs) as a tool to quit smoking.

Related Documents

- <u>https://quitnow.smokefree.nhs.uk</u>
- <u>https://elearning.ncsct.co.uk/stop_smoking_medications-launch</u>