

## 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 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 reduces by half...and after 15 years the risk of CV disease is comparable to a lifelong nonsmoker.

Prioritize smoking cessation and explain that counselling PLUS smoking cessation meds work better than either alone.

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

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

If a med is needed, consider patient preference, cost, etc.

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.

Explain that 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. Consider suggesting 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.

Consider other options when appropriate. For example, lean toward bupropion for patients who also have depression.

Or consider combining options when first-line meds aren't enough.

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

Consider e-cigarettes in adults only after smoking cessation meds fail, or if they're unwilling to try other options.

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

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

And encourage setting 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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