

Strategies to support your patients during the crucial first week

<p>REDUCE TO QUIT®</p>	<p>Consider REDUCE TO QUIT® for patients who want to quit, but are not ready to quit entirely</p> <ul style="list-style-type: none"> · Produced similar quit rates to abrupt cessation · NRT increases the chances of success by helping to manage cravings and withdrawal symptoms
<p>NRT</p>	<p>Offer NRT to all patients – even those not ready to quit</p> <ul style="list-style-type: none"> · Most smokers want to quit and are looking to their HCP for advice · The offer of NRT has been shown to spur a quit attempt¹ · A review of 12 clinical studies showed that oral NRT, like NICORETTE®, significantly reduced irritability, anxiety and withdrawal discomfort² · Remind patients that NRT needs to be used beyond the first week for at least 10 or 12 weeks to be effective
<p>PROVEN STRATEGIES</p>	<p>Offer proven strategies to prevent and manage relapse during the first week</p> <ul style="list-style-type: none"> · High-dose NRT patch treatment (35 mg) was shown to significantly reduce withdrawal symptoms and cravings during abstinence and can even eliminate them entirely³ · Continuing NRT patch treatment during a relapse was shown to significantly increase the likelihood of recovery at 6 and 10 weeks⁴
<p>PRACTICAL TIPS</p>	<p>Provide practical tips to help patients get through the first week</p> <ul style="list-style-type: none"> · Remind them that cravings are temporary. A 5-minute distraction (e.g., playing a game on their phone) is often enough to get past it · Have them write a list of reasons for quitting and keep it visible. Looking at it can help them get through challenging times · Explain that their brain will try to rationalize having a cigarette (e.g., “It’s OK to smoke when I drink”). Have a plan to manage this · Suggest drinking water when a craving hits to keep the mouth busy · Advise changing up their routine, which can be tied to smoking (e.g., a new route to work; avoiding certain people/places for a few days)

REMEMBER: YOUR ROLE IS VITAL

NRT + strategic advice from an HCP was shown to **increase a smoker’s quitting success by 4X** vs. going cold turkey.⁵

REFERENCES: **1.** Burris JL, *et al.* A mechanistic test of nicotine replacement therapy sampling for smoking cessation induction. *Psychol Addict Behav* 2015 Jun;29(2):392–399. **2.** Health Canada. Looking forward: The future of federal tobacco control. Sept. 12, 2011. Available at: <http://www.hc-sc.gc.ca/hc-ps/consult/2011/foward-avenir/consult-eng.php>. **3.** Asfar T, *et al.* Do smoking reduction interventions promote cessation in smokers not ready to quit? *Addict Behav* 2011;36:764–768. **4.** Ellerbeck EF, *et al.* Effect of varying levels of disease management on smoking cessation. *Ann Intern Med* 2009;150:437–446. **5.** Sutherland G. Smoking: Can we really make a difference? *Heart* 2003;89:ii25–27.