

OFFERING **VERY BRIEF ADVICE** ON QUITTING SMOKING

Very brief advice (VBA) allows you to offer practical advice about stopping smoking in **30 seconds or less**. It can be used in any consultation and allows you quickly to update patient records

STEP 1: **ASK**

Ask and record your patient's smoking status

STEP 2: **ADVISE**

Advise that the best way to quit smoking is with a combination of support and treatment, which increases the likelihood of quitting successfully^{1,2}

STEP 3: **ACT**

Offer your patient the support and treatment they need

- Combine nicotine replacement therapy (NRT) formats: by prescribing a nicotine patch alongside a fast-acting NRT format, e.g. a mouthspray, you can increase the likelihood of a successful quit attempt compared to a single NRT product
- If you have a local stop smoking service, refer your patient or suggest that they make an appointment
- If you do not have a local stop smoking service, ask your patient to come back for a consultation where you can discuss quitting smoking in more detail

To access the NCSCT's VBA module, visit: <https://elearning.ncsct.co.uk/vba-launch>

Smokers are up to **three times more likely to quit** when offered specialist support compared to willpower alone^{*3,4}

*Statement derived from data based on English stop smoking services

Adverse event reporting and prescribing information can be found on the next page

1. NCSCT. Local stop smoking services. Service and delivery guidance 2014. Available at: https://www.ncsct.co.uk/usr/pub/LSSS_service_delivery_guidance.pdf. Accessed: October 2020; 2. NICE. NICE guideline NG92. March 2018; 3. Bauld L et al. Int J Environ Res Public Health 2016;13(12):1175; 4. West R, Papadakis S. (2019) Stop smoking services: increased chances of quitting. London; NCSCT.

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard

Adverse events should also be reported to McNeil Products Limited on 01344 864 042.

NICORETTE INVISI PATCH (NICOTINE) PRESCRIBING INFORMATION

SEE SMPC OF PRODUCTS FOR FULL INFORMATION

PRESENTATION: Transdermal delivery system available in 3 sizes (22.5, 13.5 and 9cm²) releasing 25mg, 15mg and 10mg of nicotine respectively over 16 hours.

USES: Nicorette Invisi Patch relieves and/or prevents craving and nicotine withdrawal symptoms associated with tobacco dependence. It is indicated to aid smokers wishing to quit or reduce prior to quitting, to assist smokers who are unwilling or unable to smoke, and as a safer alternative to smoking for smokers and those around them. Nicorette Invisi Patch is indicated in pregnant and lactating women making a quit attempt. If possible, Nicorette Invisi Patch should be used in conjunction with a behavioural support programme.

DOSAGE: It is intended that the patch is worn through the waking hours (approximately 16 hours) being applied on waking and removed at bedtime. **Smoking Cessation: Adults (over 18 years of age):** For best results, most smokers are recommended to start on 25 mg / 16 hours patch (Step 1) and use one patch daily for 8 weeks. Gradual weaning from the patch should then be initiated. One 15 mg/16 hours patch (Step 2) should be used daily for 2 weeks followed by one 10 mg/16 hours patch (Step 3) daily for 2 weeks. Lighter smokers (i.e. those who smoke less than 10 cigarettes per day) are recommended to start at Step 2 (15 mg) for 8 weeks and decrease the dose to 10 mg for the final 4 weeks. Those who experience excessive side effects with the 25 mg patch (Step 1), which do not resolve within a few days, should change to a 15 mg patch (Step 2). This should be continued for the remainder of the 8-week course, before stepping down to the 10 mg patch (Step 3) for 4 weeks. If symptoms persist the advice of a healthcare professional should be sought. **Adolescents (12 to 18 years):** Dose and method of use are as for adults however; recommended treatment duration is 12 weeks. If longer treatment is required, advice from a healthcare professional should be sought. **Smoking Reduction/Pre-Quit:** Smokers are recommended to use the patch to prolong smoke-free intervals and with the intention to reduce smoking as much as possible. Starting dose should follow the smoking cessation instructions above i.e. 25mg (Step 1) is suitable for those who smoke 10 or more cigarettes per day and for lighter smokers are recommended to start at Step 2 (15 mg). Smokers starting on 25mg patch should transfer to 15mg patch as soon as cigarette consumption reduces to less than 10 cigarettes per day. A quit attempt should be made as soon as the smoker feels ready. When making a quit attempt smokers who have reduced to less than 10 cigarettes per day are recommended to continue at Step 2 (15 mg) for 8 weeks and decrease the dose to 10 mg (Step 3) for the final 4 weeks. **Temporary Abstinence:** Use a Nicorette Invisi Patch in those situations when you can't or

do not want to smoke for prolonged periods (greater than 16 hours). For shorter periods then an alternative intermittent dose form would be more suitable (e.g. Nicorette inhalator or gum). Smokers of 10 or more cigarettes per day are recommended to use 25mg patch and lighter smokers are recommended to use 15mg patch.

CONTRAINDICATIONS: Children under 12 years of age. Known hypersensitivity to nicotine or any component in the patch.

PRECAUTIONS: Underlying cardiovascular disease, diabetes mellitus, renal or hepatic impairment, phaeochromocytoma or uncontrolled hyperthyroidism, generalised dermatological disorders, gastrointestinal disease. Angioedema and urticaria have been reported. Erythema may occur. If severe or persistent, discontinue treatment. Stopping smoking may alter the metabolism of certain drugs. Transferred dependence is rare and less harmful and easier to break than smoking dependence. May enhance the haemodynamic effects of, and pain response, to adenosine. Keep out of reach and sight of children and dispose of with care. Should be removed prior to undergoing MRI procedures.

PREGNANCY AND LACTATION: Smoking cessation during pregnancy should be achieved without NRT. However, for women unable to quit on their own, NRT may be recommended to assist a quit attempt after consulting a healthcare professional.

SIDE EFFECTS: *Very common:* pruritus. *Common:* headache, dizziness, nausea, rash, urticaria, vomiting. *Uncommon:* hypersensitivity, palpitations, paraesthesia, tachycardia, flushing, hypertension, hyperhidrosis, myalgia, application site reactions, asthenia, chest discomfort and pain, malaise, fatigue, dyspnoea. *Rare:* Anaphylactic reaction, GI discomfort, angioedema, erythema, pain in extremity. *Very rare:* reversible atrial fibrillation.

NHS COST: 25mg packs of 7: £11.43, 25mg packs of 14: £18.72, 15mg packs of 7: £11.43, 10mg packs of 7: £11.43

LEGAL CATEGORY: GSL.

PL HOLDER: McNeil Products Ltd, 50-100 Holmers Farm Way, High Wycombe, HP12 4EG.

PL NUMBERS: 15513/0161; 15513/0160; 15513/0159.

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Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard

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NICORETTE QUICKMIST 1MG/SPRAY MOUTHSPRAY (NICOTINE), NICORETTE QUICKMIST COOL BERRY 1MG/SPRAY MOUTHSPRAY (NICOTINE) & NICORETTE QUICKMIST SMARTTRACK 1MG/SPRAY MOUTHSPRAY (NICOTINE) PRESCRIBING INFORMATION:

SEE SMPC FOR FULL INFORMATION

PRESENTATION: Oromucosal spray. Each 0.07 ml contains 1mg nicotine, corresponding to 1mg nicotine/spray dose.

USES: Relieves and/or prevents craving and nicotine withdrawal symptoms associated with tobacco dependence. It is indicated to aid smokers wishing to quit or reduce prior to quitting, to assist smokers who are unwilling or unable to smoke, and as a safer alternative to smoking for smokers and those around them. It is indicated in pregnant and lactating women making a quit attempt.

DOSAGE: *Adults and Children over 12 years of age:* The patient should make every effort to stop smoking completely during treatment with Nicorette QuickMist. One or two sprays to be used when cigarettes normally would have been smoked or if cravings emerge. If after the first spray cravings are not controlled within a few minutes, a second spray should be used. If 2 sprays are required, future doses may be delivered as 2 consecutive sprays. Most smokers will require 1-2 sprays every 30 minutes to 1 hour. Up to 4 sprays per hour may be used; not exceeding 2 sprays per dosing episode and 64 sprays in any 24-hour period. Nicorette QuickMist should be used whenever the urge to smoke is felt or to prevent cravings in situations where these are likely to occur. Smokers willing or able to stop smoking immediately should initially replace all their cigarettes with the Nicorette QuickMist and as soon as they are able, reduce the number of sprays used until they have stopped completely. When making a quit attempt behavioural therapy, advice and support will normally improve the success rate. Smokers aiming to reduce cigarettes should use the mouthspray, as needed, between smoking episodes to prolong smoke-free intervals and with the intention to reduce smoking as much as possible.

CONTRAINDICATIONS: Children under 12 years of age. Known hypersensitivity to nicotine or any excipients in the mouthspray.

PRECAUTIONS: Underlying cardiovascular disease, diabetes mellitus, G.I disease, uncontrolled hyperthyroidism, phaeochromocytoma, hepatic or renal impairment. Stopping smoking may alter the metabolism of certain drugs. Transferred dependence is rare and both less harmful and easier to break than smoking dependence. May enhance the haemodynamic effects of, and pain response to, adenosine. Due to the presence of a small amount of butylated hydroxytoluene (BHT), this medicine may cause local skin reactions (e.g. contact dermatitis), or irritation to the eyes

and mucous membranes. Keep out of reach and sight of children and dispose of with care. Care should be taken not to spray the eyes whilst administering the spray.

PREGNANCY & LACTATION: Smoking cessation during pregnancy should be achieved without NRT. However, if the mother cannot (or is considered unlikely to) quit without pharmacological support, NRT may be used after consulting a healthcare professional.

SIDE EFFECTS: *Very common:* Headache, throat irritation, nausea, hiccups. *Common:* Toothache, cough, hypersensitivity, burning sensation, dizziness, dysgeusia, paraesthesia, abdominal pain, diarrhoea, dry mouth, flatulence, salivary hypersecretion, stomatitis, vomiting, dyspepsia, fatigue. *Uncommon:* Abnormal dreams, palpitations, tachycardia, flushing, hypertension, bronchospasm, dysphonia, dyspnoea, nasal congestion, sneezing, throat tightness, eructation, glossitis, oral mucosal blistering and exfoliation, paraesthesia oral, dry skin, urticaria, angioedema, hyperhidrosis, pruritus, rash, erythema, pain in jaw, asthenia, chest discomfort and pain, malaise, oropharyngeal pain, rhinorrhoea, gingivitis, musculoskeletal pain, hyperhidrosis. *Rare:* Dysphagia, hypoaesthesia oral, retching. *Not known:* Atrial fibrillation, anaphylactic reaction, blurred vision, lacrimation increased, dry throat, GI discomfort, lip pain, muscle tightness, angioedema, erythema.

NHS PRICE: Nicorette QuickMist 1mg/spray mouthspray: 1 dispenser pack £13.66, 2 dispenser pack £21.57, Nicorette QuickMist Cool Berry 1mg/spray mouthspray: 1 dispenser pack £13.66, 2 dispenser pack £21.57, Nicorette Quickmist SmartTrack 1mg/spray mouthspray: 1 pack dispenser £14.30, 2 pack dispenser £23.12

LEGAL CATEGORY: GSL.

PL HOLDER: McNeil Products Ltd, Roxborough Way, Maidenhead, Berkshire, SL6 3UG

PL NUMBER: Nicorette QuickMist 1mg/spray mouthspray: 15513/0357, Nicorette QuickMist Cool Berry 1mg/spray mouthspray: 15513/0395, Nicorette Quickmist SmartTrack 1mg/spray mouthspray: 15513/0357

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