

UNIVERSITY STUDENT HEALTH SERVICES

MY QUIT PLAN: *Feelin' the Cessation!*

❖ **WHY I WANNA QUIT**

- Make a list of reasons for why you want to quit tobacco. Everyone smokes and quits for different reasons. Take a look at your list when cravings come or if you are losing motivation. Make a mini version of this list to carry in your cigarette pack.
- Make a symbol of what you want MORE than your tobacco...and look at it often!
- Learn about the health rewards you will gain by quitting tobacco. Many rewards start within 24 hours. Check out the infographic on the next page.

❖ **BEFORE YOUR QUIT ATTEMPT**

Strategize:

- Choose a time that gives you the best chance for success. If stress levels are super high right now, give yourself a break and choose another time to quit.
- For inspiration and practical advice, check out the video “**What is the Single Best Thing You Can Do to Quit Smoking?**” by Doc Mike Evans at www.youtube.com/watch?v=z16vhtjWKL0.
- Take the “**Why I Smoke**” **Test** to help you zone in on what triggers your tobacco use. Then you can take specific actions to overcome that urge to pick up a cigarette.
- Use tobacco cessation resources and/or consider meds to increase your chances of success.
 - Not sure where to start? Visit www.cdc.gov/tobacco/how2quit.htm to learn about **free online resources, texting programs, and apps, like quitSTART.**
 - Other free digital resources include the [QuitGuide](#) app, [This is Quitting](#) (text messaging program for young adults), and [BecomeAnEx](#) (customized quit plan in collaboration with the Mayo Clinic).
 - Call **1-800-QUIT-NOW** for free materials and personalized confidential coaching.
- Research **tobacco cessation medications** several weeks before your quit attempt. Schedule an appointment with your medical provider to discuss options. If you choose to use medication, begin taking (medication) _____ on (date) _____.

Start changing things up:

- Tell friends and family that you plan to stop. Wear a button or sticker, or put one on your book bag.
- Carry a “survival bag” with you. Include 3x5 cards with your top 3 reasons for quitting, a picture of your loved ones, gum/candy, fruit/carrot sticks, straws/toothpicks, fidget toys, etc.
- Start to delay your first tobacco product for 5-10 minutes.
- Begin to throw away tobacco products, ashtrays, lighters, etc.
- Clean out your house, car, and workplace.
- Practice what to say when someone offers you tobacco.
- Spend more time around non-tobacco users and in smoke-free places.
- Make friends with an ex-tobacco user.

❖ **WHEN YOU QUIT**

- | | |
|--|---|
| <ul style="list-style-type: none"> ▪ Ask friends, family, and co-workers for support and encouragement. ▪ Change your daily routine. ▪ Stay busy. | <ul style="list-style-type: none"> ▪ Avoid situations where you’d typically use tobacco. ▪ Drink plenty of water. ▪ Do something special to celebrate! |
|--|---|

❖ **AFTER YOUR QUIT ATTEMPT**

- Reward yourself for successes – one hour, one day, or one week without smoking.
- Maintain a tobacco-free environment at work, in your car, and at home.
- Stay away from people who use tobacco.
- Avoid possible triggers. Avoid drinking alcohol, coffee, or other beverages that you associate with tobacco use. Take a walk during your class or work break. Wash dishes by hand after a meal.
- If you miss the sensation of having a cigarette in your mouth, chew on carrot or celery sticks, flavored toothpicks, or a straw. Chew sugarless gum or mints to help with cravings.
- Keep your hands busy. Doodle, play with silly putty or a fidget toy, knit, or crochet.
- Exercise! Go for a walk. Take the stairs. You’ll burn calories and alleviate stress.
- Find other ways to reduce stress. Try meditation, prayer, yoga, and deep breathing.
- Join a support group.
- Schedule a follow-up visit in 1-2 weeks: _____.

HOW DOES QUITTING SMOKING IMPROVE YOUR HEALTH?



15 years

- Risk of heart disease is that of a nonsmoker.
- Risk of death is nearly the same as a nonsmoker.



10 years

- Lung cancer risk is half that of a smoker.
- Risk of pancreatic cancer is roughly the same as a nonsmoker.



5 years

- Risk of stroke and cervical cancer is the same as that of a nonsmoker.
- Risks of cancer of the mouth, throat, esophagus, and bladder are cut in half.



1 year

- Risk of heart disease drops to half that of a smoker.



1 to 9 months

- Coughing and shortness of breath decrease.
- Cilia regrow in the lungs.



20 minutes

- Blood pressure and pulse drop to normal.
- Hands and feet start to warm up.



8 hours

- Carbon monoxide level in blood drops to normal.
- You feel more energized.



24 hours

- Chances of heart attack decreases.



48 hours

- Sense of smell and taste improve.
- Nerve endings start to regrow.



72 hours

- Bronchial tubes relax.



2 weeks to 3 months

- Circulation, lung function, and stamina improve.

Start your smoke-free journey today!
Talk to your doctor today about options to quit smoking.

COURAGE TO QUIT®

In-person stop smoking program
couragetoquit.org

TOBACCO CESSATION QUITLINE

Telephone counseling service
1-800-QUIT-NOW
(1-800-784-8669)

CVS PHARMACY® and MINUTECLINIC®

Visit your local CVS Pharmacy
or MinuteClinic



RESPIRATORY
HEALTH
ASSOCIATION®

The "Why I smoke" Test

Circle the number that best describes how you feel about each statement.

	Always	Frequently	Occasionally	Seldom	Never
A. I smoke cigarettes to keep from slowing down.	5	4	3	2	1
B. Handling a cigarette is part of the enjoyment of smoking it.	5	4	3	2	1
C. Smoking cigarettes is pleasant and relaxing.	5	4	3	2	1
D. I light up a cigarette when I'm upset about something.	5	4	3	2	1
E. When I run out of cigarettes, I find it almost unbearable.	5	4	3	2	1
F. I smoke automatically without even being aware of it.	5	4	3	2	1
G. I smoke to perk myself up	5	4	3	2	1
H. Part of the enjoyment of smoking comes from the steps I take to light up.	5	4	3	2	1
I. I find cigarettes pleasurable.	5	4	3	2	1
J. When I feel uncomfortable about something, I light up a cigarette.	5	4	3	2	1
K. I am very much aware of the fact when I am not smoking.	5	4	3	2	1
L. I light up a cigarette without realizing I still have one burning in the ashtray.	5	4	3	2	1
M. I smoke to give myself a "lift."	5	4	3	2	1
N. Part of the enjoyment of smoking is in watching the smoke I exhale.	5	4	3	2	1
O. I want a cigarette most when I am comfortable and relaxed.	5	4	3	2	1
P. When I feel "blue" or want to take my mind off my cares, I smoke a cigarette.	5	4	3	2	1
Q. I get a real craving for a cigarette when I haven't smoked for a while.	5	4	3	2	1
R. I've found a cigarette in my mouth and didn't remember having put it there.	5	4	3	2	1

SELF KNOWLEDGE IS POWER

Adding Up Your Score

Use the following table to score yourself:

- Enter your circled number for each statement in the space provided, putting the number for statement A on line A, for statement B on line B, and so on.
- Add the three scores on each line. For example, the sum of your scores on lines A, G and M gives you a total score for the "Stimulation" category.

_____	+	_____	+	_____	=	_____
A		G		M		Stimulation
_____	+	_____	+	_____	=	_____
B		H		N		Handling
_____	+	_____	+	_____	=	_____
C		I		O		Pleasure
_____	+	_____	+	_____	=	_____
D		J		P		Relaxation/Tension Reduction
_____	+	_____	+	_____	=	_____
E		K		Q		Craving
_____	+	_____	+	_____	=	_____
F		L		R		Habit

A score of 11 or more indicates an important reason. The higher your score (15 is the highest) the more important the reason. The next page has a list of "Tips on How to Quit." Use the tips that fit you and your needs the best. (The Why I Smoke Test was obtained from a National Institutes of Health Publication)

TIPS ON HOW TO QUIT

Stimulation

If you scored high in this category, your brain prefers the stimulant effects of nicotine.

- When you quit, you need to find substitutes that stimulate. For example:
 - Take a brief walk, ride a bike, do calisthenics, or simply make yourself busy around the house.
 - Plan ahead. Organize your day ahead of time so you won't need a cigarette to get going.
 - Chew on cinnamon sticks, sugar-free gum, or carrot sticks; rinse with mouthwash; or brush your teeth to give your tongue and mouth some stimulation.
- Avoid fatigue. With plenty of sleep, you won't need a stimulant to get you going.

Handling

A high score here means you like to handle a cigarette or watch the smoke. There may be other parts of the ritual of smoking that are also habit-forming for you. Luckily there are many ways to keep your hands busy (the last four mentioned here are even constructive):

- Wear a rubber band around your wrist and snap it.
- Doodle with a pen or pencil when you're on the phone, in meetings, etc.
- Handle a coin or polished rock or play with a paper clip.
- Do a crossword or jigsaw puzzle.
- Squeeze a small ball (also great for your wrist muscles).
- Clean or polish your fingernails.
- Knit, sew, or crochet (you'll be way ahead on birthday and holiday presents).

Pleasure

If you scored high in this category, you just have to find other pleasures. Here are some alternatives:

- Keep a list of the pleasures of being a nonsmoker (smell great, extra money, taste food better, etc).
- Substitute another pleasure, such as time with friends, going to the movies, or reading a magazine.
- Get involved in a sport or another hobby – you'll be surprised how good you'll feel.
- Treat yourself to something special.
- Contemplate the harmful effects of smoking. You may find that's enough to help you quit.

Relaxation/Tension Reduction

Many smokers use their habit as a crutch in moments of discomfort. If you're this type, you may find it easy to quit when things are good, but tough when things go wrong.

- Activity is a great tension reducer and distraction. Exercise clears stress chemicals from the body. Get out there, and find an exercise you could love.
- Consider learning meditation, yoga and other stress-relieving hobbies.
- Try some deep breathing exercises. (Believe it or not, they do work for many people). Or feel free to talk to your healthcare professional about other relaxation techniques.
- Think about what you really need when you're upset. Talk with a friend.

Craving

If you scored high in this category, you're not unusual. Your craving for another cigarette begins to build up the moment you put one out. Is the craving psychological, physical, or both? If you crave nicotine, your nicotine receptors in the brain make you uncomfortable and irritable when the level of nicotine in your blood drops.

- Strongly consider using nicotine replacement products (patch, gum, spray, etc.) and/or a smoking cessation pill if cravings keep you from stopping your tobacco.
- Reorder your day to avoid situations that trigger your smoking urge. For example, change your morning routine and your work habits, alter your driving route, etc.
- Stay busy! Don't allow yourself to have gaps of unprogrammed time.

Habit

Once smoking becomes habitual, you smoke automatically. Chances are you enjoy only a fraction of the cigarettes you smoke. You have established many "Pavlovian" triggers in your brain. Smoking is linked to driving, coffee, telephones and all sorts of daily habits.

- Disconnect the Pavlovian behaviors. Declare the house smoke-free! Throw away your cigarettes, ashtrays, etc.
- If your spouse or friends smoke, designate a portion of your home as smoke-free.
- Chew sugar-free gum.
- Go to places where smoking is prohibited – public buildings, movies, theaters, libraries, etc.
- Substitute a different behavior when you're bored. Take a soothing bath/shower or listen to music.
- Have your car cleaned. Wash out the ashtray and fill it with toothpicks.
- Have the inside of your house – drapes, carpets, furniture – thoroughly cleaned.

Success in Cessation Starts With Making a SOLID DECISION*

If you are still ambivalent about quitting smoking or if you have tried to quit before and failed, you can harness the power of a “solid decision.”

Fill out the grid below and really think about what is important to you.

Everyone has a love/hate relationship with certain things in their lives.

If you want to change a behavior, you need to take a look at the positives and negatives of the behavior. Create an honest picture of your life.

You must face what tobacco holds for you both now and in the distant future.

What I LOVE about my tobacco use	What I HATE about my tobacco use	You have to own the pain!
Now:	Now:	
5 years from now:	5 years from now:	
10 years from now:	10 years from now:	
20 years from now:	20 years from now:	

NEURAL ASSOCIATIVE CONDITIONING*

Now harness the power of your solid decision.

Associate what you HATE about your tobacco with the tobacco *when you use it*. Go over that list in your head every time you smoke or feel like smoking.

Then, the rest of the day, you only think good thoughts about yourself.

Develop a vision of yourself as a non-smoker that is so powerful that you will do anything to achieve your desire.

MAKE A POSITIVE SYMBOL

List the top 3 positive reasons you have for quitting:

- 1.
- 2.
- 3.

If you know what you want **MORE** than your tobacco... then you can quit.

From this list, you can make a symbol.

It might be a picture of a mountain you want to climb when your lungs feel great or a place you want to visit with the cash you save.

It might be a locket with a picture of a loved one or it might just be a symbol for freedom and independence.

When the tobacco “CRAVING VOICES” come...

grab your symbol and talk back to them. Whether you smoke or not, the craving voices will go away in 3 to 5 minutes. Your solid decision and your symbol will strengthen you & give you power in your quest to be smoke-free.

**Ideas adapted from a speech by Tony Robbins.*

UNIVERSITY STUDENT HEALTH SERVICES • Fact Sheet

TOBACCO CESSATION MEDICATIONS

About 70% of smokers say they want to quit, but only a small fraction is able to do so without help. People who use medications to quit can double, even quadruple, their chances of success. Options include **nicotine replacement products (NRTs), varenicline (Chantix), and bupropion (Zyban)**. These medications work in different ways to help reduce withdrawal symptoms and cravings. In general, Varenicline (Chantix) or combination NRT are considered first-line treatments because of somewhat better efficacy compared to bupropion (Zyban).

Remember that medicines for quitting tobacco are like shoes. You know how you try on shoes and some fit and some don't, but you don't give up wearing shoes? It's the same way with tobacco medications. You just have to try them on, and see if they fit.

VARENICLINE (CHANTIX)

Varenicline, the newest tobacco cessation medication, was designed specifically to block nicotine receptors in the brain. It quadruples quitting success rates (the highest among smoking cessation meds), and it seems to decrease both craving and withdrawal symptoms.

- Varenicline is no longer available as brand-name Chantix. It is available as a generic but can be expensive if you do not have health insurance.
 - If cost is an issue, visit www.pfizerxpathways.com to see if any patient assistance programs and/or coupons are being offered.
 - Pfizer offers a **free GETQUIT plan** that provides personalized support at www.get-quit.com.
 - Varenicline is not generally used with nicotine replacement products. However, one study has shown improved quit rates when used with the nicotine patch.
- ❖ **How do I start, and how long do I take it for?**
- Your healthcare provider will prescribe a starter kit that lasts for one month.
 - Start the medication 7 days BEFORE your quit date. If you are not ready to quit but want to reduce use, talk to your medical provider about taking Varenicline to prepare for quitting in the future.
 - Take 1 pill in the morning for the first 3 days. Then increase to 1 pill twice a day.
 - Take your pill after eating and with a full glass (8 oz) of water (to minimize nausea).
 - It is recommended to take varenicline for at least 3 months. You may extend use for another 3 to 9 months if you have quit successfully but are worried about relapse based on past experiences.
- ❖ **Are there any contraindications?**
- If you have kidney problems or are on kidney dialysis, you may need a lower dose of the medication.
 - If you are pregnant or breastfeeding, Varenicline is generally avoided due to limited information about its safety.
 - There were early concerns about the safety of varenicline in individuals with cardiovascular disease (CVD), depression, or other mental health problems. However, subsequent studies have not supported concerns about increased cardiovascular events or worsening mental health problems, and varenicline is generally considered safe.
- ❖ **Are there any side effects?**
- The primary side effects are that you stop thinking about cigarettes, and you quit with less frustration and withdrawal.
 - Most of the other side effects have been minimal and are more common at the start of therapy.
 - About one third of people experience some mild nausea or gastrointestinal symptoms. These symptoms are often reduced when you are no longer using nicotine.
 - Other common side effects include insomnia and vivid/strange dreams.
 - Some people may experience behavior changes and/or drowsiness that affect their ability to drive or operate machinery.
 - If you become depressed or notice a significant change in mood while taking Varenicline, stop the medication and notify your healthcare provider immediately. Depending on your symptoms, you may be advised to continue off the medication or restart it at a lower dose.
- ❖ **Can I drink alcohol while I'm on Varenicline?**
- It is important to limit alcohol use while taking Varenicline. Alcohol can increase the risk of serious psychiatric side effects, like worsening mood or suicidal thoughts.

BUPROPION (ZYBAN)

Bupropion is the smoking cessation pill that has been on the market the longest. Research suggests that it can triple success rates. Bupropion can reduce withdrawal symptoms, cravings, and weight gain.

- Bupropion is available in several formulations. The sustained-release tablet is the form used for smoking cessation. Zyban and Wellbutrin are other trade names for bupropion.
- Bupropion is an affordable medication, even without health insurance. At Student Health, a month's supply (60 pills) of generic bupropion costs about \$12 out-of-pocket.
- Bupropion is safe to take with nicotine replacement products.

❖ How do I start, and how long do I take it for?

- Start bupropion about 2 weeks BEFORE your quit date.
- You may continue to smoke while on bupropion for the next 7-14 days. During that time the bupropion will work on your neuro-receptors to decrease craving and withdrawal. After 2 weeks, if you have not naturally stopped smoking, then you need to set and *celebrate* a definite quit date.
- Start with 1 pill in the morning for 3 days. Then, if you notice no decrease in smoking and no side effects, increase to 1 pill twice a day.
 - Take the second pill around dinnertime. Don't take it at bedtime because it might keep you up.
 - If you notice any unpleasant side effects, do not increase the dose. Continue taking only 1 pill in the morning. Monitor your smoking behavior.
 - If you are extremely sensitive to medicines and dislike the feeling of the pill, the good news is you may be able to quit on one pill or less a day.
- If you miss a pill, do not double the dose.
- If you still need your tobacco when your quit date arrives, you can use a nicotine replacement product (such as the patch, gum, etc.) with bupropion for extra support. You are more likely to need this extra help if you've been a heavy smoker for many years.
- The recommended duration of treatment is at least 12 weeks. Treatment may be extended to one year to prevent relapse in successful quitters.
 - Physical withdrawal from nicotine ends at about 2 weeks, but the extra time on the medication provides support while you learn to live as a non-smoker. You need to get into the car, visit with friends, finish a meal, and talk on the phone many times before the behavioral cue to smoke fades away. Bupropion makes this process easier.

❖ You should NOT take this medicine if you:

- Have a history of seizures, or have had a serious head injury.
- Have an eating disorder.
- Have problems with alcohol or drug abuse.
- Are taking any medications that can lower the seizure threshold, such as MOAIs (monoamine oxidase inhibitors) or St. John's Wort.

❖ You should take this medication WITH CAUTION if you:

- Have high blood pressure. Bupropion can increase blood pressure in some patients.
- Have liver or kidney disease. You may be advised to take a lower dose or to avoid it altogether.

❖ What are possible side effects?

- Most people have no side effects. They simply notice a decreased urge to use tobacco.
- Beneficial side effects can include less depression, extra energy, decreased eating (weight loss if you are overweight), and improved attention if have attention deficit disorder.
- Adverse effects are more common at the start of therapy. The most common side effects are insomnia and dry mouth. Other side effects include nervousness, rash, or constipation.
- Some patients complain of headache or an unusual taste in the mouth if they smoke while on the medication, but this helps to deter smoking.
- If you are sensitive to bupropion and feel wound-up, talk to your healthcare provider but be optimistic. This usually passes in a few days and is a sign that the medication is working. However, if you notice a significant worsening of your mood, it is important to notify your healthcare provider immediately! You may need to lower the dose or taper off the medication.

❖ You should NOT use alcohol while taking this medicine:

- Mixing alcohol with bupropion increases the risk of sedative effects.
- Withdrawal from alcohol can also increase your risk of seizures with bupropion.

NICOTINE REPLACEMENT THERAPY (NRT)

Studies show that nicotine replacement therapy can double your chances of quitting versus going cold turkey.

NRT can decrease withdrawal symptoms by giving you controlled doses of nicotine without the other harmful chemicals found in tobacco products.

NRT OVERVIEW	
NRT products	<ul style="list-style-type: none"> ▪ The nicotine <u>patch, gum, and lozenge</u> are available over-the-counter. ▪ The nicotine <u>inhaler and nasal spray</u> are available by prescription only. ▪ The patch releases nicotine slowly, while the other NRT forms are more rapid-acting.
Can NRT be used with other quit medications?	Yes, NRT may be used with bupropion (Zyban). In some cases, NRT may be used with varenicline. Talk to your medical provider for more information.
Can NRT products be used together?	<p>Yes! In fact, when NRT is used alone (without other quit meds), combination NRT is recommended over single-type NRT because of better efficacy.</p> <ul style="list-style-type: none"> ▪ <u>Combination NRT</u> combines use of a nicotine patch (a long-acting NRT) with a short-acting NRT (such as the gum or lozenge). The patch provides sustained withdrawal symptom relief, while the short-acting NRT controls breakthrough cravings and other withdrawal symptoms.
Can NRT be used even if I am still smoking?	Yes, NRT products (particularly the patch) can be used while you are cutting back, in anticipation of quitting in the near future.
How long is NRT used for?	<ul style="list-style-type: none"> ▪ In general, NRT is used for 2-3 months after stopping tobacco use. ▪ However, NRT can be used for as long as the user feels is necessary to stay tobacco-free. ▪ Individuals at high risk for relapse may use NRT indefinitely, which is safer than continuing to smoke. Nicotine dependence rarely occurs with NRT, and nicotine does not cause cancer.
Talk to your medical provider before starting NRT if you...	<ul style="list-style-type: none"> ▪ Are pregnant or breastfeeding. ▪ Have heart disease, a recent heart attack, or an irregular heartbeat (nicotine can increase heart rates). ▪ Have high blood pressure not controlled by medication (nicotine can increase blood pressure). ▪ Take prescription medication for depression or asthma (your prescription dose may need to be adjusted).
Side effects common to ALL FORMS OF NRT	<p>Possible side effects from excessive nicotine release include:</p> <ul style="list-style-type: none"> ▪ Nausea, vomiting, abdominal pain, diarrhea, constipation. ▪ Headache. ▪ Palpitations, dizziness. <p>Side effects are more likely to occur at the start of treatment. If side effects persist, adjust the dose or change to a different NRT product.</p>
SHORT-ACTING NRT PRODUCTS	
Forms	Gum, lozenge, inhaler, nasal spray
Correct Use	<p>A common mistake when using short-acting NRT is underdosing.</p> <ul style="list-style-type: none"> ▪ It is critical to use these products regularly throughout the day, according to the product label, even when you have no cravings. ▪ When starting NRT, experts recommend using short-acting products <u>at least once every hour while awake</u>. Take additional doses when you have breakthrough cravings and in anticipation of smoking triggers.

OVER-THE-COUNTER NRT PRODUCTS

NICOTINE PATCH (Brand Names: Habitrol, Nicoderm CQ, Nicorette, Nicotine Step 1/2/3)	
Description	Each patch contains nicotine which is absorbed through the skin.
Usual dose	<ul style="list-style-type: none"> ▪ <u>If you smoke more than 10 cigarettes a day</u>, apply a 21mg/day patch for 6 weeks, followed by a 14mg/day patch for 2 weeks, then a 7mg/day patch for 2 weeks. ▪ <u>If you smoke 10 or less cigarettes a day</u>, start with a 14mg/day patch for 6 weeks, then a 7mg/day patch for 2 weeks. ▪ The dose is typically tapered after the first 6 weeks. However, tapering is not required and has not been shown to improve quit rates.
Applying the patch	<ul style="list-style-type: none"> ▪ Use one new patch per day. Apply the patch to a dry, hairless area of skin. ▪ Change the location of the patch each day to avoid skin irritation.
Cost	\$20 for 14 patches at Student Health (price subject to change).
Side effects	<ul style="list-style-type: none"> ▪ Skin irritation. ▪ Also see “Side effects common to ALL FORMS OF NRT” on previous page. ▪ If insomnia or vivid dreams are a problem, remove the patch at bedtime and replace with a new patch the next morning. If removing the patch at night leads to morning nicotine cravings, use a short-acting NRT (gum, lozenge) while the new patch kicks in (which may take 30 minutes to 3 hours).
See your doctor before using if	You are allergic to adhesive tape or have skin problems.
Stop use and see your doctor if	You have skin redness lasting more than 4 days, swelling, or a rash.
NICOTINE GUM (Brand Names: GoodSense Nicotine, Nicorette, Thrive)	
Description	Nicotine is absorbed through the lining of the mouth. Several flavors available.
Usual dose	<ul style="list-style-type: none"> ▪ <u>If you usually smoke your first cigarette within 30 minutes of waking</u>, use the 4mg gum. ▪ <u>If you wait longer than 30 minutes</u>, use the 2mg gum. ▪ <u>For best results</u>, start by chewing at least 1 piece of gum every 1-2 hours while awake AND whenever you have the urge to smoke. ▪ <u>Max dose</u>: 24 pieces/day. ▪ <u>Recommended duration of treatment</u>: At least 12 weeks. Gradually taper use over the last 6 weeks. Adjust the schedule below as needed. <ul style="list-style-type: none"> ○ Weeks 1-6: Chew 1 piece of gum every 1-2 hours. To increase chances of quitting, <u>chew at least 9 pieces/day during the first 6 weeks</u>. ○ Weeks 7-9: Chew 1 piece of gum every 2-4 hours. ○ Weeks 10-12: Chew 1 piece of gum every 4-8 hours.
Chewing the gum correctly	<ul style="list-style-type: none"> ▪ Chew the gum until you notice a peppery taste and tingling sensation in your mouth. Then “park” the gum between your cheek and gums. After the tingling and taste have faded, start chewing again until the tingling and taste return. Repeat this procedure until all the taste is gone from the gum (about 30 minutes). ▪ Do not chew the gum too fast, as it will release more nicotine and increase the risk of side effects. ▪ Avoid eating or drinking anything other than water for 30 minutes before or during use, as acidic beverages can decrease the absorption of nicotine.
Cost	\$15 for 51 pieces at Student Health (price subject to change).
Side effects	<ul style="list-style-type: none"> ▪ Mouth irritation, hiccups, excess salivation, sore jaw. ▪ Also see “Side effects common to ALL FORMS OF NRT” on previous page.
See your doctor before using if	You have mouth, teeth, or jaw problems.

(over)

OVER-THE-COUNTER NRT PRODUCTS (continued)

NICOTINE LOZENGE (Brand Names: GoodSense Nicotine, Nicorette, Nicotine Mini, Thrive)	
Description	Nicotine is absorbed through the lining of the mouth. Various flavors available.
Usual dose	<ul style="list-style-type: none"> ▪ <u>If you usually smoke your first cigarette within 30 minutes of waking</u>, use the 4mg lozenge. ▪ <u>If you wait longer than 30 minutes</u>, use the 2mg lozenge. ▪ <u>Max dose</u>: 20 lozenges/day. ▪ <u>Recommended duration of treatment</u>: 12 weeks. Gradually taper use over the last 6 weeks. Adjust the schedule below as needed. <ul style="list-style-type: none"> ○ Weeks 1-6: Use 1 lozenge every 1-2 hours. To increase chances of quitting, use at least 9 pieces/day during the first 6 weeks. ○ Weeks 7-9: Use 1 lozenge every 2-4 hours. ○ Weeks 10-12: Use 1 lozenge every 4-8 hours.
Using the lozenge correctly	<ul style="list-style-type: none"> ▪ Only 1 lozenge should be consumed at a time. ▪ Allow the lozenge to dissolve in your mouth over 30 minutes. ▪ Do not bite, chew, or swallow the lozenge whole. ▪ Avoid eating or drinking anything other than water for 30 minutes before or during use, as acidic beverages can decrease the absorption of nicotine.
Cost	\$20-45 for 72-108 pieces.
Side effects	<ul style="list-style-type: none"> ▪ Mouth irritation, hiccups. ▪ Also see "Side effects common to ALL FORMS OF NRT" in "NRT Overview".

PRESCRIPTION NRT PRODUCTS

NICOTINE INHALER (Brand Name: Nicotrol)	
Description	<ul style="list-style-type: none"> ▪ Consists of a mouthpiece and a plastic nicotine-containing cartridge. Nicotine vapor is inhaled and absorbed through the lining of the mouth. ▪ Mimics behavioral and sensory aspects of smoking.
Usual dose	<ul style="list-style-type: none"> ▪ Use 6-16 cartridges/day for the first 6-12 weeks of treatment. ▪ Gradually reduce use over the next 6-12 weeks. ▪ Use over 6 months is not recommended (has not been studied).
Using the inhaler correctly	<ul style="list-style-type: none"> ▪ Puff in short breaths or inhale into back of throat (not the lungs). ▪ For best results, puff continuously for 20 minutes. Nicotine is used up after 20 minutes of continuous puffing. ▪ Use the cartridge within 24 hours of opening.
Cost	Check with your health insurance. Expensive without insurance.
Side effects	<ul style="list-style-type: none"> ▪ Mouth or throat irritation (more common in early stages of use). ▪ May cause bronchospasm (may not be ideal for asthmatics). ▪ Also see "Side effects common to ALL FORMS OF NRT" in "NRT Overview".
NICOTINE NASAL SPRAY (Brand Name: Nicotrol NS)	
Description	<ul style="list-style-type: none"> ▪ Nicotine is delivered in an aqueous solution to the nasal lining. ▪ Nicotine levels peak in 10 minutes (faster than gum, lozenge, and inhaler).
Usual dose	<ul style="list-style-type: none"> ▪ Use 2 sprays/nostril 1-2 times per hour. ▪ For best results, use at least 16 sprays/day. ▪ <u>Max dose</u>: 10 sprays/hour, up to 80 sprays/day. ▪ <u>Recommended duration of treatment</u>: about 3 months. Gradually taper use over the last 4-6 weeks (though tapering is not necessary). ▪ Use over 6 months is not recommended (has not been studied).
Cost	Check with your health insurance. Expensive without insurance.
Side effects	<ul style="list-style-type: none"> ▪ Nasal/throat irritation (very common), runny nose, sneezing, tearing. ▪ Also see "Side effects common to ALL FORMS OF NRT" in "NRT Overview".