

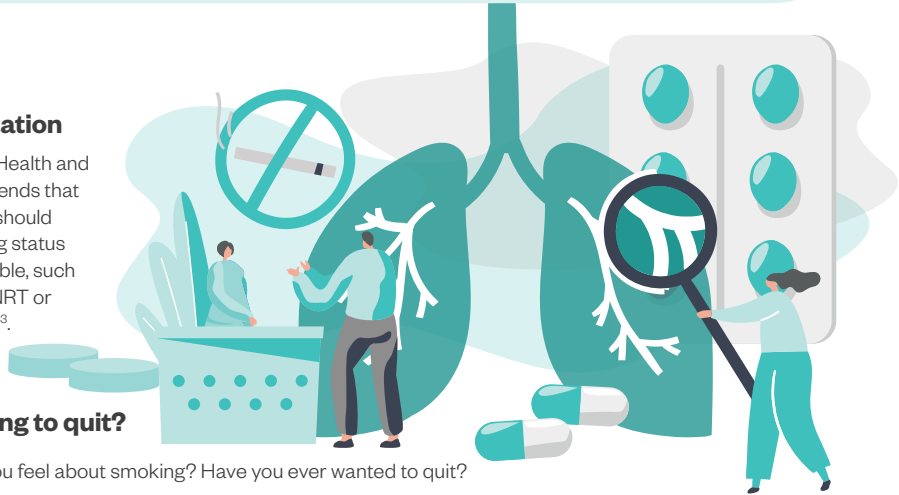
# PHARMACY GUIDE TO SMOKING CESSATION CONSULTATIONS

Smoking is the leading cause of preventable death and disease in England<sup>1</sup>. Smoking increased by 25% among 18 to 34-year-olds in England during the first COVID-19 lockdown<sup>2</sup>. This resource outlines how pharmacists and pharmacy teams can support patients with smoking cessation through effective consultations and advice on nicotine replacement therapy (NRT).

## STEP 1

### Initiate the consultation

The National Institute for Health and Care Excellence recommends that healthcare professionals should enquire about the smoking status of all patients where possible, such as upon the purchase of NRT or during a medicines review<sup>3</sup>.



## STEP 2

### Is the patient willing to quit?



**ASK:** How do you feel about smoking? Have you ever wanted to quit?

If the patient is not receptive, ask if they have any concerns and provide reassurance. If patient is definite in their decision, respect this and tell them they can return to ask questions and signpost them to the NHS website:

[www.nhs.uk/live-well/quit-smoking](http://www.nhs.uk/live-well/quit-smoking)

## STEP 3

### Assess patient history

#### MEDICAL HISTORY



**ASK:** Do you have any medical conditions that increase your risk of tobacco-related harm? Are you currently taking any medications?

Knowing a patient's medical history allows a link to be created between smoking cessation and benefits to their own health.

#### PAST QUITTING ATTEMPTS



**ASK:** Have you tried to quit smoking before? Why do you think this was unsuccessful? Do you have any experience with NRT?

Helping the patient understand why previous attempts have failed can inform decisions when creating a cessation plan.

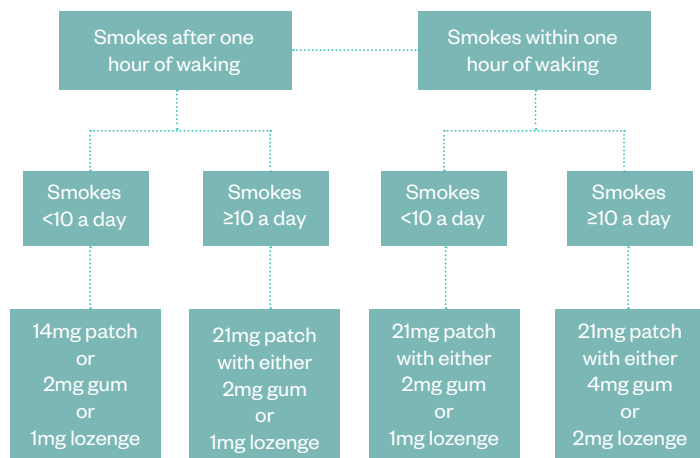
#### SMOKING HABITS



**ASK:** How long have you been smoking for? How many cigarettes do you smoke per day? What time of day you usually smoke?

Understanding a person's nicotine dependence can help when making suggestions for pharmacotherapy.

More information relating to pharmacotherapy can be found on next page



## STEP 4

**Advise**

Several pharmacological and behavioural therapies can be considered to increase chances of successful smoking cessation. For pharmacotherapy, product strength and dosage may vary between manufacturers. Advise patient to follow specific product instructions for best use.

**NICOTINE REPLACEMENT THERAPY**

First-line therapy that allows patients to receive low levels of nicotine without the other harmful chemicals found in cigarette smoke. NRT aims to reduce desire to consume tobacco products whilst minimising withdrawal symptoms and its use has been shown to **increase the chances of cessation by 50–60%**<sup>4</sup>.

**Nicotine patches**

- Releases nicotine slowly, helping to control background cravings;
- Side effects include skin irritation and trouble sleeping with vivid dreams; some individuals may opt for a shorter wear patch to minimise these.



**Patches can be used in combination with other fast-acting nicotine replacement options to control immediate cravings**

**Lozenges and gum**

- Fast acting and can be used to fulfil a craving or when a craving is anticipated;
- Possible side effects include mouth irritation, nausea, cough, hiccups and sleep disturbance. Gum can also cause excess saliva and an upset stomach. Some people may struggle with gum and find lozenges easier to use.

**Nasal spray**

- Absorbed more rapidly than other NRTs, resulting in a quicker onset of action;
- During first week of use, most will experience irritation of the nasal passage, resulting in sneezing etc.

**Inhaler**

- Inhalers include a plastic mouthpiece and are thought to satisfy the hand-to-mouth ritual of smoking;
- Some common side effects are mouth and throat irritation, including cough and hiccups.

**OTHER PHARMACOLOGICAL TREATMENTS**

Recommended to people that want to take a gradual approach to quitting, some prescription-only medicines (POMs) are available via the patient's GP or a stop smoking service.

Pharmacists and their teams should be aware of the common side effects, including nausea, headaches, trouble sleeping and vivid dreams, associated with their use.

**STOP SMOKING SERVICES**

All patients should be offered referral to a stop smoking service<sup>5</sup>. Engaging with a service can improve a person's chances of quitting by **up to three times** if combined with pharmacotherapy<sup>6</sup>.

Restrictions caused by the COVID-19 pandemic and service closures may mean that many consultations are remote<sup>6</sup>.

These services can supply pharmacotherapy free of charge.

To find a local stop smoking service call the free Smokefree National Helpline on 0300 123 1044 or visit: [www.nhs.uk/live-well/quit-smoking](http://www.nhs.uk/live-well/quit-smoking)

## STEP 5

**Close the consultation**

- Give the patient the opportunity to ask questions or raise concerns;
- If they have chosen to purchase pharmacotherapy, ensure they have an adequate supply and invite them to return if needed;
- Make sure the patient understands how to contact their local stop smoking service and provide them with any relevant resources;
- Thank the patient for their time and congratulate them on taking this important step to becoming smoke free.

**References:**

1. Action on smoking and health. Smoking statistics. 2021. Available at: <https://ash.org.uk/wp-content/uploads/2019/10/SmokingStatistics.pdf>;
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4. Hartmann-Boyce J, Chepkin SC, Ye W *et al*. Nicotine replacement therapy versus control for smoking cessation. *Cochrane Database Syst Rev*. 2018;5(5):CD000146. doi:10.1002/14651858.CD000146;
5. National Centre for Smoking Cessation and Training (NCSCT). Stop smoking services: increased chances of quitting. 2019. Available at: <https://www.ncsct.co.uk/user/pub/Stop%20smoking%20services%20effectiveness.pdf>;
6. Action on smoking and health. Stepping up: The response of stop smoking services in England to the COVID-19 pandemic. 2021. Available at: <https://ash.org.uk/information-and-resources/reports-submissions/reports/steppingup/>