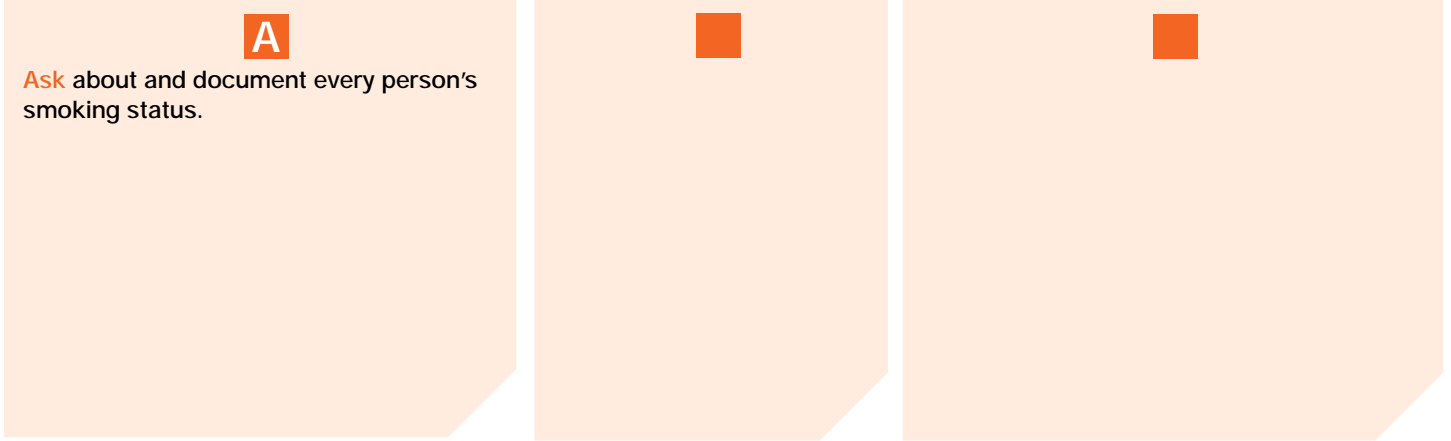


**ASK ABOUT THE
ELEPHANT**

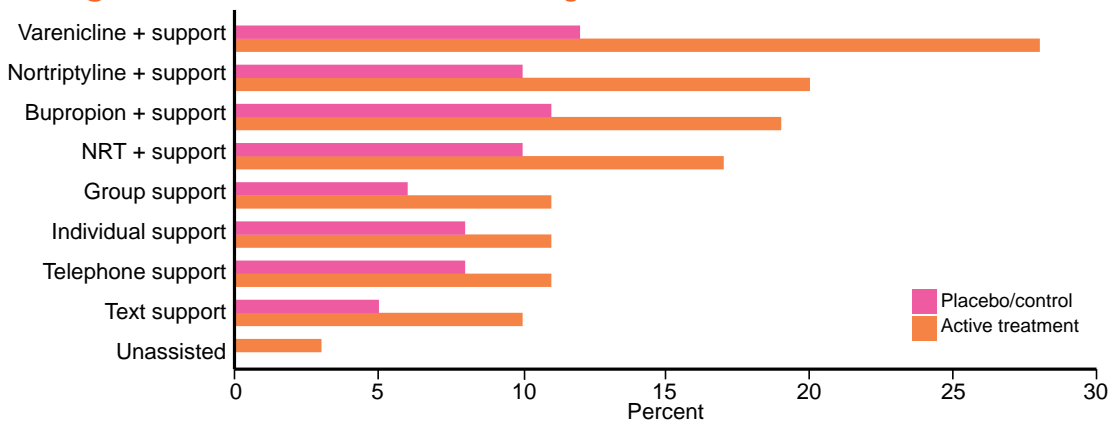
Part 2 – All health care workers

As a health care worker, you're in a good position to ask about and document every person's smoking status. This is the first step in the ABC pathway for helping people to stop smoking.

The ABC pathway for helping people to stop smoking



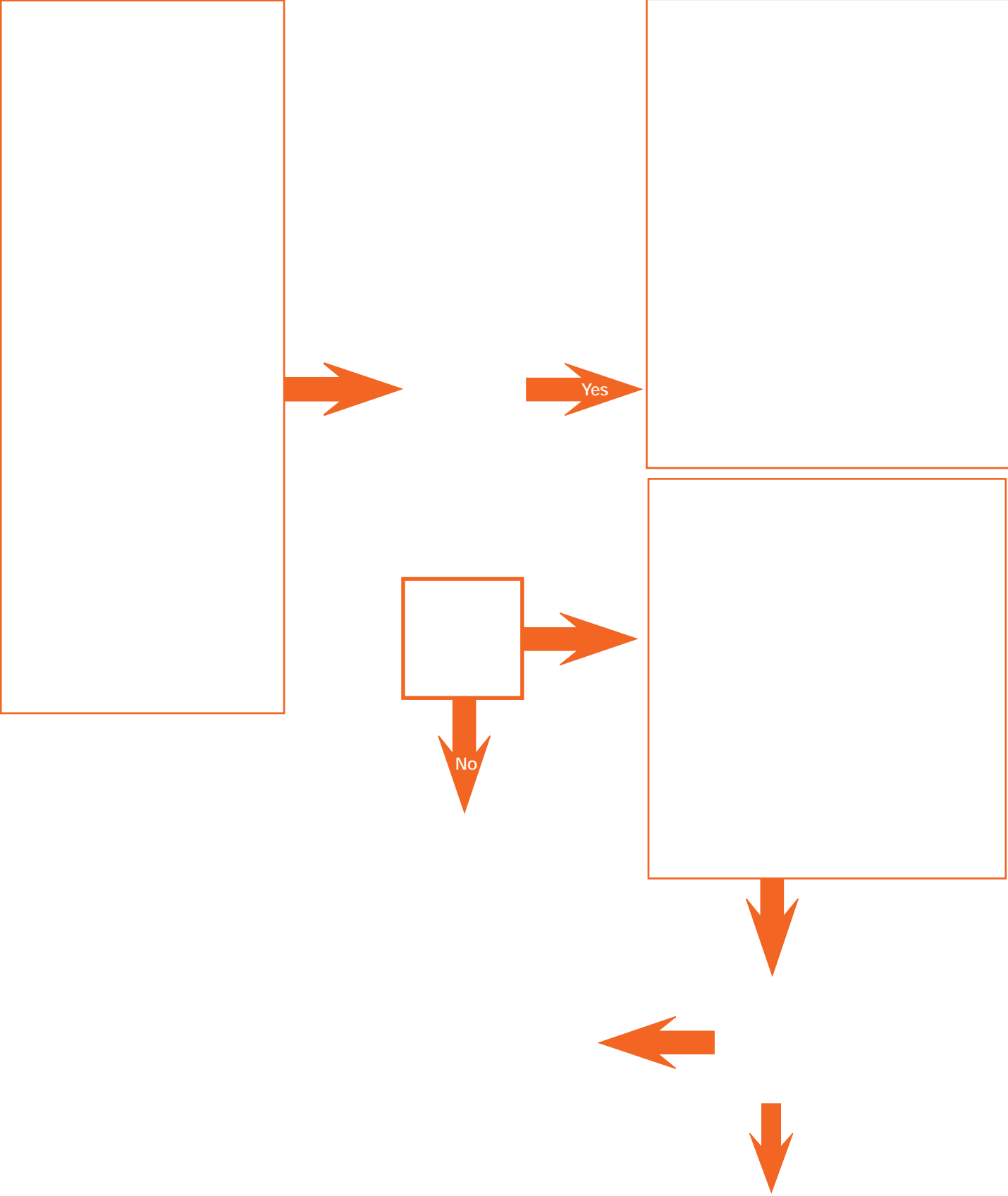
Long-term abstinence rates by treatment method



Notes:

- Abstinence rates estimated using data from the Cochrane Library of Systematic Reviews.
- Long-term abstinence rates refer to periods of abstinence of 6 months or more.
- 'Support' refers to behavioural support and includes techniques outlined in Part 3.

Making an offer of cessation support



Providing behavioural support

All stop-smoking services should be operated and monitored in accordance with the Ministry of Health's Tier One Service Specification.

When delivering behavioural support, evidence suggests that people need at least four follow-up contacts to have their best chance of stopping smoking. The following techniques should be used during those contacts to help people during their quit attempt.²

- Develop, build and maintain rapport.
- Give information about your treatment programme (addressing both positive and realistic expectations).
- Assess smoking history and past experience with stopping,

Symptoms of tobacco withdrawal

- Withdrawal symptoms are common, but not every person gets every symptom.
- Most withdrawal symptoms disappear within four weeks.
- Withdrawal symptoms can be eased by using stop-smoking medicines and behavioural strategies.

Symptoms	Duration
Irritability	Less than 4 weeks
Depression	Less than 4 weeks
Restlessness	Less than 4 weeks
Poor concentration	Less than 2 weeks
Increased appetite	More than 10 weeks
Sleep disturbance	Less than 1 week
Urges to smoke	More than 2 weeks

Stop-smoking medicines

Nicotine replacement therapy (NRT)

- NRT provides some of the nicotine that a person would have otherwise received from tobacco, and in doing so reduces the person's urge to smoke.
- There are five different NRT products available in New Zealand, including the patch, gum, lozenges, inhalator and mouth spray.
- All NRT products roughly double a person's chance of stopping compared with a placebo.
- People should use NRT for at least eight weeks.
- Using two NRT products (for example, patches and gum) is more effective than using one.
- People who need NRT for longer than 12 weeks can continue to use it.
- If the person is not ready to stop smoking straight away, NRT can be used to help reduce their smoking before they stop.

Note: The patch, gum and lozenges are subsidised if supplied on prescription or via the Quit Card Programme. Otherwise, all NRT products (including the inhalator and mouth spray) can be purchased over the counter from supermarkets or pharmacies for the normal retail price.

Nortriptyline

- Nortriptyline is an antidepressant medicine that also helps people stop smoking.
- Nortriptyline reduces the severity of tobacco withdrawal symptoms and roughly doubles a person's chance of stopping smoking long term.
- Nortriptyline is a fully funded stop-smoking medicine and is available on prescription without Special Authority.
- People should start nortriptyline at least one week before their quit date and use it for 12 weeks. The dose should be tapered at the end of treatment to avoid withdrawal symptoms that may occur.
- Before prescribing or recommending nortriptyline, check the contraindications and cautions that apply.
- Pregnant or breastfeeding women and people under the age of 18 cannot use nortriptyline.
- Common adverse effects include drowsiness and dry mouth.

Bupropion (also known as Zyban)

- Bupropion is an atypical antidepressant that reduces the severity of tobacco withdrawal and approximately doubles a person's chance of stopping smoking.
- Bupropion is a fully funded stop-smoking medicine and is available on prescription without Special Authority.
- People should start bupropion at least one week before their quit date and use it for at least seven weeks.
- Before prescribing or recommending bupropion, check the contraindications and cautions that apply.
- Pregnant or breastfeeding women and people under the age of 18 cannot use bupropion.
- Common adverse effects include dry mouth, insomnia and headache. Seizure has been rarely reported and depression has been reported in some people.

Varenicline (also known as Champix)

- Varenicline reduces a person's urge to smoke, as well as the 'reward' they get from smoking, and at least doubles a person's chance of stopping smoking.
- Varenicline is fully funded (subject to Special Authority criteria) for people who have already tried to stop twice with NRT, or once with bupropion or nortriptyline.
- People should start varenicline at least one week before their quit date and use it for 12 weeks.
- Before prescribing or recommending varenicline, check the contraindications and cautions that apply.
- Pregnant or breastfeeding women and people under the age of 18 cannot use varenicline.
- Common adverse effects include nausea, abnormal dreams and sleep disturbance. More serious adverse events – such as cardiovascular events, depression, suicidal ideation and suicide – have been reported, although these are uncommon.
- If someone using varenicline experiences changes in mood or behaviour, advise them to stop taking varenicline and contact a health care worker immediately.