

THE CURE PROJECT

CURING TOBACCO ADDICTION IN GREATER MANCHESTER

Name of Doctor Completing form:

Bleep Number:

Date of form completion:

Name:

NHS Number: Date of Birth:

Address:

CONVERSATION - UNDERSTAND - REPLACE - EXPERTS AND EVIDENCE-BASE

Greater Manchester Tobacco Addiction Treatment Pathway

(Tick all boxes when action completed)

C The right **conversation** every time

Do you smoke?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
How many years have you smoked for?		
Do you want to stop smoking?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

- Provide very brief advice about stopping smoking to all smokers
- Inform patients about the smoke free NHS policy

U **Understand** the level of addiction

How many do you smoke in a day?	≤10 <input type="checkbox"/>	10-19 <input type="checkbox"/>	≥ 20 <input type="checkbox"/>
How long have you been awake before you have your first cigarette?	≤ 30 mins <input type="checkbox"/>	≥ 30 mins <input type="checkbox"/>	

R **Replace** nicotine to prevent withdrawal

Patient choice is an important part of cessation as it increases commitment to the quit attempt. Please offer patients a choice of the options overleaf in accordance with their level.

E **Experts** & the best **Evidence-based** Treatment

- Refer to the hospitals smoking cessation service (4x increased chance of long term quit)
- Discuss and offer Varenicline (Champix) with patients motivated to stop smoking (alongside NRT for first 7-14 days)
 - 0.5mg once daily day 1-3
 - 0.5mg twice daily day 4-7
 - 1mg twice daily day 8 - end of treatment (12 weeks)

One third of patients suffer nausea - minimise with having varenicline with a glass of water and food. Patients can suffer strange dreams but there are no risks of psychological harm & no drug interactions

THE CURE PROJECT

CURING TOBACCO ADDICTION IN GREATER MANCHESTER



Low level addiction

≤10 Cigarettes/day → Prescribe a short acting nicotine replacement (“reach for” nicotine)

Discuss the following options with the patient (tick which one prescribed):

- Nicotine Inhalator 15mg (max 6 capsules/24h)
- Nicotine gum 2mg (max 15 pieces/24h)
- Nicotine lozenge 2mg (max 15/24h)

Moderate level addiction

10-19 Cigarettes/day → Prescribe a short acting nicotine replacement (“reach for” nicotine) and a long acting nicotine patch

Discuss the following options with the patient (tick which one prescribed):

- Nicotine Inhalator 15mg (max 6 capsules/24h)
- Nicotine gum 2mg (max 15 pieces/24h)
- Nicotine lozenge 2mg (max 15/24h)
- Nicotine Patches 14mg/24hour (smokes within 30 minutes of waking)
- Nicotine Patches 15mg/16hour (does NOT smoke within 30 minutes of walking)

24 hour patches are ideal for patients that smoke within 30 minutes of waking but can cause sleep disturbance. Discuss options, preferences and previous experiences with patient.

High level addiction

≥20 Cigarettes/day → Prescribe a short acting nicotine replacement (“reach for” nicotine) and a long acting nicotine patch

Discuss the following options with the patient (tick which one prescribed):

- Nicotine Inhalator 15mg (max 6 capsules/24h)
- Nicotine gum 4mg (max 7 pieces/24h)
- Nicotine lozenge 4mg (max 7/24h)
- Nicotine Patches 21mg/24hour (smokes within 30 minutes of walking)
- Nicotine Patches 24mg/16hour (does NOT smoke within 30 minutes of walking)

24 hour patches are ideal for patients that smoke within 30 minutes of walking but can cause sleep disturbance. Discuss options, preferences and previous experiences with patient.

Note: Stopping smoking can increase plasma levels of theophylline, clozapine and olanzepine and patients should be advised to monitor for signs of toxicity. This is due to components of cigarette smoke that stimulate cytochrome P450. Doses may need to be adjusted. Seek specialist advice.