

Tobacco 101: The New Nicotine Lozenge

by Jonathan Foulds, MA, MAppSci, PhD

In November 2002, GlaxoSmithKline launched a new nicotine replacement therapy in the United States in the form of a nicotine lozenge under the brand name "Commit". The Commit lozenge is available over the counter in both 2mg and 4mg doses. The main efficacy data for the lozenge is based on a large (n=1818) placebo-controlled, double-blind randomized trial published by Saul Shiffman and colleagues in June 2002.

One interesting aspect of the study and of the dosing instructions for the new product is that smokers are advised to dose according to the time in the morning prior to their first cigarette. Those who don't normally smoke within 30 minutes of waking are advised to use the 2mg lozenges, whereas those who smoke within 30 minutes of waking are allocated to the 4mg dose. Dosing instructions with other nicotine replacement therapies (e.g. the gum) have been based on the number of cigarettes typically smoked per day and have generally resulted in under dosing. Other than this, and the instruction to periodically suck on the lozenge (rather than chew), the instructions and contraindications are very similar to those for nicotine gum.

Smokers are instructed to start using the lozenges on the quit date, using 9-15 lozenges per day for 6 weeks before cutting down gradually over a further 6 week period.

The manufacturers believe that the lozenge may be more acceptable than the gum. One advantage is that each lozenge gives around 25% higher blood nicotine concentrations than the comparable dose of nicotine gum (i.e. less than half the peak blood level obtained from smoking a cigarette). In addition, the published trial demonstrated that the nicotine lozenges reduced craving and withdrawal severity during the crucial first two

weeks, and also produced one year abstinence rates that were more than twice as high as those in participants using placebo lozenges. For example, 12 weeks after the quit date, 35% of those allocated 4mg nicotine lozenges remained abstinent, compared with only 14% of those allocated placebo lozenges (15% vs. 6% at one year). The 4mg lozenge also reduced weight gain during the first 12 weeks. The most common side effects related to the nicotine lozenge were nausea, hiccups, coughing and heartburn, all at rates of 5- 10% (compared with 0-5% in the placebo group).



This brand and other nicotine lozenges have been available in Europe for some time. The experience there has been that smokers have welcomed this new aid to cessation and that some find the lozenge easier to use than the gum, nasal spray or inhaler. As with other NRTs, many patients have difficulties because they don't use enough or they cease use too early in their recovery. The one trial so far did not directly compare the 2mg with the 4mg lozenge and it remains possible that the 4mg lozenge would be the most helpful for all but the lightest smokers (smoking less than 10 cigarettes per day). As it is, around 70% of US smokers and over 85% of smokers attending NJ Quitcenters typically smoke their first cigarette of the day within 30 minutes of waking in the morning, and so would be advised by the labeling to use the 4mg rather than 2mg lozenge.

Overall, the nicotine lozenge appears to be a safe and effective product and is certainly a worthwhile addition to the tobacco dependence treatment repertoire.

Reference: Shiffman, et al (2002) Efficacy of a nicotine lozenge for smoking cessation. Arch Intern Med, 162, 1267-1276.

8-Day Tobacco Dependence Treatment Specialist Training Receives Excellent Reviews

by Nancy Speelman, CSW, CADC

In November 2000, the Tobacco Dependence Program initiated our first intensive eight-day training to prepare professionals to treat their client's tobacco dependence. The training was initially developed to train clinicians working at the 15 NJ Quitcenters.

The eight-day training focuses on the methods advocated in the Public Health Service (PHS) Guidelines and the New Jersey Guidelines on Tobacco Dependence Treatment. This specialized training designed for Masters level professionals teaches research-based, state-of-the-art techniques for treating tobacco dependence. The training is facilitated by the Program's multi-disciplinary team of tobacco specialists with backgrounds in internal medicine, addiction psychiatry, psychology, social work, public health and counseling.

Since its inception, this training has consistently received excellent reviews from participants. Almost all the participants in the trainings so far have stated that they found that it enhanced their treatment skills and they would recommend this training to a colleague.

The demand for the training has increased to serve not only the Quitcenter clinicians, but also professionals from various settings in New Jersey and across the U.S. We have trained staff from the

American Cancer Society, New Jersey Breathes, New Jersey Department of Health and Senior Services, NJ Maternal and Child Health Consortium as well as hospitals and treatment facilities that do not currently have a Quitcenter.

The training covers topics such as health effects of tobacco and the PHS Guidelines. Treatment methods covered include: use of medications for withdrawal, group and individual counseling skills, and also the techniques for working with special populations. After completion of the training, clinicians have the necessary skills to appropriately assess and provide treatment based on their client's stage of readiness to change.

The University of Medicine and Dentistry of New Jersey, School of Public Health, Tobacco Dependence Program is one of the few institutions in the country that offers quality, research-based tobacco dependence treatment education provided by highly skilled faculty, researchers and treatment professionals. There is good evidence showing that smokers provided with intensive tobacco dependence treatment (such as the methods taught in the 8-day training) are around 4 times as likely to succeed in quitting, as compared with "usual" medical care without specialist tobacco treatment.