

Pre-cessation patch doubles quit success rate: Researchers call for labeling changes

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Using a nicotine patch before quitting smoking can double success rates, according to Duke University Medical Center researchers. They say their latest data suggest changes should be made to nicotine patch labeling.

"Right now, the nicotine patch is only recommended for use after the quit date," explains Jed Rose, director of the Duke Center for Nicotine and Smoking Research and lead author of the paper that is published online in the current issue of the journal *Nicotine and Tobacco Research*.

The current labeling resulted from concerns that using a patch while smoking could lead to nicotine overdose. However, a literature review found concurrent use of a nicotine patch and cigarette smoking appears to be safe.

"People who use the patch before quitting are likely to spontaneously reduce the number of [cigarettes](#) they smoke because the patch satisfies their need for nicotine and makes the act of smoking less enjoyable," he says. It also decreases withdrawal symptoms.

"Yet people are afraid to try a pre-cessation patch because the current labeling recommends users not smoke while on treatment," Rose says. "That's why our study is so important. It reinforces the findings of previous studies, which show the value of pre-cessation patch therapy, and demonstrates that using a pre-cessation nicotine patch can make a significant difference in a person's ability to quit."

Nearly 25 percent of the population continues to smoke despite the known health risks, according to previously published research. And, up to 90 percent of smokers who receive nicotine replacement therapy relapse within one year.

In an effort to find a successful smoking cessation method, Rose and his colleagues randomized 400 people who smoked an average of slightly more than one pack of cigarettes per day. They were put in four groups who either used a nicotine or placebo patch for two weeks prior to [quitting smoking](#). They were further randomized to smoking their regular brand of cigarettes or a low-tar and nicotine cigarette. Following the quit date, all groups received standard nicotine patch treatment at reduced dosages for a total of 10 weeks.

Twenty-two percent of participants in the pre-cessation nicotine patch groups abstained from smoking continuously for at least 10 weeks, compared to 11 percent in the placebo patch groups.

Although participants who smoked their usual brand fared no better or worse than those who smoked a low-tar cigarette, Rose says switching to a low-tar and nicotine cigarette may circumvent any potential safety or tolerability issues that could occur in some smokers.

Rose also believes similar pre-cessation intervention may work for other drugs used for smoking cessation, but more research is needed to support that hypothesis.

More importantly, Rose says the use of the pre-cessation patch is significant because it helps researchers predict people's subsequent quit success. "People on the patch are more likely to reduce the number of cigarettes they smoke. We found that is a potent predictor of subsequent abstinence. Smokers who did not reduce their smoking on the patch were less likely to succeed."

That's the subject of his new research efforts.

"By monitoring pre-cessation patch smoking levels, we may be able to rescue people who aren't going to succeed. If the smoker is not spontaneously decreasing the number of cigarettes they are [smoking](#), we may be able to find a different treatment that will work for them rather than letting them stay on an ineffective treatment and fail. "

Source: Duke University Medical Center ([news](#) : [web](#))

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