

Adaptation to pharmacotherapy does not up smoking cessation in Black adults

June 27 2023, by Elana Gotkine



For Black adults who smoke, adaptation to varenicline and/or bupropion

plus nicotine patch (NP) does not improve abstinence rates compared with NP monotherapy, according to a study published online June 20 in *JAMA Network Open*.

Nicole L. Nollen, Ph.D., from the University of Kansas School of Medicine in Kansas City, and colleagues examined the efficacy of multiple smoking cessation [pharmacotherapy](#) adaptations based on [treatment response](#) in Black adults who smoke daily in a [randomized clinical trial](#) of adapted therapy (ADT) or enhanced usual care (UC). Both groups received 18 weeks of pharmacotherapy with follow-up through week 26. The ADT group included 196 individuals who received an NP and up to two pharmacotherapy adaptations (varenicline at week two and bupropion at week six if needed), while the UC group included 196 individuals who received NP throughout.

The researchers observed no significant difference in verified seven-day abstinence by treatment group at 12, 18, or 26 weeks. Of the 71.8 percent of the ADT participants who received pharmacotherapy adaptations, 8.1 percent were abstinent at week 12. Controlling for treatment, individuals who responded to treatment and had carbon monoxide-verified abstinence at week two had significantly increased odds of being abstinent at week 12 compared to those who did not respond to treatment (28.7 versus 7.8 percent; odds ratio, 4.6).

"Findings highlight the continued need to identify effective [treatment](#), particularly for those at high risk for cessation failure and those disproportionately impacted by tobacco-related disease," the authors write.

Several authors disclosed financial ties to industry.

More information: Nicole L. Nollen et al, Multiple Pharmacotherapy Adaptations for Smoking Cessation Based on Treatment Response in

Black Adults Who Smoke, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.17895](https://doi.org/10.1001/jamanetworkopen.2023.17895)

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