

GUIDANCE PACK FOR SMOKING CESSATION

**CLINICAL JUDGEMENT SHOULD BE EXERCISED
WHEN FOLLOWING THIS GUIDE, ACCORDING TO
INDIVIDUAL PATIENT CHARACTERISTICS.**

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Contact Number	01698 754 888
Implementation date	October 2024
Version number	2
Review date	January 2026

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QYW PHARMACY SUPPORT TEAM

Quit Your Way Pharmacy Service

Tobacco Control Team
Udston Hospital
Farm Road, Hamilton
ML3 9LA

Helpline: 01698 754 888

Email: PharmacyTobaccoControl@lanarkshire.scot.nhs.uk

To make referral to the specialist service i.e. community, pregnancy, mental health, secondary care then please contact by calling **01698 754 888**.

Community Pharmacy Website:

This website is beneficial as it has a range of useful information stored on here from training links, tips to PCR and contact details. If staff do need any information on smoking cessation, please refer them to this website:

<https://www.communitypharmacy.scot.nhs.uk/nhs-lanarkshire/pages/pharmacy-services/stop-smoking-service/>

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SMOKING CESSATION GUIDANCE

Pharmacy Specifications:

The Community Pharmacy Smoking Cessation Service forms part of the Public Health Service portion of the Pharmacy Contract.

- 13th May 2020 Smoking Cessation Service Delivery during COVID-19 PCA (P) (2020)9

<https://www.publications.scot.nhs.uk/files/pca2020-p-09.pdf>

- 29th August 2017 Community Pharmacy Public Health Service Smoking Cessation Service – Revised Service Specification PCA (P) (2017)7

<https://www.publications.scot.nhs.uk/files/pca2017-p-07.pdf>

- 16th June 2014 Public Health Services (PHS) Smoking Cessation Service Revised Service Specification PCA (P) (2014) 12

<https://www.publications.scot.nhs.uk/files/pca2014-p-12.pdf>

- Current formulary as at May 2024 – top tip search ‘nicotine’ on homepage

<https://rightdecisions.scot.nhs.uk/nhs1-medicines-guidance/>

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Service Outline and Practice

Reminders:

- The service should be delivered from premises that can provide an acceptable level of confidentiality such as a consultation room.
- The service is available to any person aged 12 or over. Consent of a parent or legal guardian is required if the person is under 13 years of age
- The person must be registered with a GP in Scotland
- The service must be available throughout standard opening hours
- All pharmacists and support staff who deliver the service must be trained to nationally recognised standards. This can be found:

1. [NHS Scotland Smoking Cessation service | Turas | Learn](#)

2. [Course: Very brief advice on smoking | PHS Learning](#)

- The service can be publicised using materials made available by Scottish Government, NHS Boards, NHS Public Health Scotland or relevant pharmaceutical companies
- Data about service activity and outcomes is recorded via the Pharmacy Care
- Record (PCR) system. Minimum Data Set (MDS) data is electronically submitted from PCR to the National Smoking Cessation Database (ISD). Data is uploaded from the PCR to ISD once a week overnight from Wednesday to Thursday. It is important that all data be added to the PCR system by close of business on a Wednesday.

You should proactively seek out individuals who would benefit from the service within the pharmacy e.g. patients with cardiac or respiratory disease, pregnant women, young people and lower socio-economic groups

- On the first visit to the pharmacy, the client should be asked to set a provisional quit date (not entered on PCR at this stage) and return to receive their first supply of pharmacotherapy. The return date is flexible, and can be anything from a day to over a week later from the initial contact.
- Assessing readiness to quit is subject to professional judgement. In exceptional circumstances, you may decide to start the quit attempt on the first visit, if the client is sufficiently prepared with their own planning to be able to commence straight away. Indeed, there are some groups you would always want to start straight away e.g. pregnant women, patients who have been started on pharmacotherapy in hospital, patients referred by their GP.

PCR GUIDANCE

PCR Account Set Up:

Any issues with PCR log in or if you require an account to be set up then please contact NHS Lanarkshire IT Facilitator – Delia Bryce/Stephanie Leckie:

NHSLanarkshire.PharmacyFacilitation@lanarkshire.scot.nhs.uk

Telephone: 01698 858 046

PCR password resets:

Telephone: 0131 275 6600

PCR Hints & Tips:

All clients should be entered on to the PCR promptly and MDS submitted at week 1 (quit date set), 4 and 12 to ensure payment for the service. The Smoking Cessation reports should be accessed and actioned at least once a week. This can be found at the bottom left of the homepage when you log in to PCR.

MCR registered patients with initial stage 1 medication review NOT completed	[0]	High Risk Medicines	
MCR registered Patients with Annual Stage 1 Medication Review Due/Overdue	[0]	All	[0]
		Open	[0]
		Warfarin	[0]
		Methotrexate	[0]
		Lithium	[0]

Smoking Cessation	
Mandatory progress report	
Expiring within the next 7 Days	[0]
No quit date set	[1]
Awaiting 4 or 12 week followup	[0]
Assessments	
No interactions in the last 7 days	[6]
Open Smoking Cessation assessments	[7]
Start	[5]
4 Week	[1]
12 Week	[0]

Payment for delivery of the QYW Smoking Cessation Service are made to a pharmacy if PCR entries are correctly submitted at Quit date (£30), 4 (£15) and 12 (£35) but no later than weeks 1, 6, 14 (respectively). No further payment is made if support to the client is made beyond week 12.

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PCR Hints & Tips continued:

Prescribed pharmacotherapy is remunerated via successful submission of Universal Claim Forms (UCFs) prescriptions.

- Expiring within the next seven days should be actioned as a priority. Every effort should be made to follow up with these clients and release and submit their 4 or 12 week MDS. If the 4 week MDS is not submitted within the required timescales, the quit attempt cannot proceed on the PCR and you will not be paid.
- Awaiting 4 or 12 week follow up highlights those patients due to have these reviews done and represent a significant milestone on their journey to stop smoking for good.
- A CO reading must be taken at these points to confirm the quit unless the follow up is not carried out face to face, in which case there is an option to select that when you are submitting the data.
- Report - No quit date set if a patient has had their initial consultation but not returned to the pharmacy to set a quit date, they will appear on this report. Actioning this report will allow you to encourage the client back to the pharmacy where you can support them to set a quit date.

In addition:

- Always enter the patients contact number on their record and never the pharmacy telephone number. If this happens, the record will not be processed. It creates an error record when uploaded from PCR to the Health Board database called ISD. If the patient does not have a contact number, enter "Unknown." Every effort must be made to obtain this information as follow up is a vital part of the service.
- Shared care between Pharmacy & non-pharmacy services – only tick YES, if the community or hospital e.g. patient has recently been discharged from hospital and set quit date whilst there.
- Pharmaceutical usage and number of weeks used MUST be updated at the time of the 4 week & 12-week submission. Initial data can only be updated at this time once the quit date is set.

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PCR Hints & Tips continued:

- Every client setting a quit date MUST be followed up at 4 weeks whether they have attended or not. You have until week 6 after the quit date to submit the follow up. Three attempts should be made to contact the patient. If unable to contact them, enter “Lost to follow up” then complete the assessment. This will ensure payment for the pharmacy.
- If the 4-week submission is missed and the client is not smoking, you will be unable to submit the 12-week data.
- The 12 week follow up submission should be made between week 12 and 14. If you are unable to contact the patient, the record should be closed as ‘Lost to follow up’ once record closed let the QYW Pharmacy Support Team know and they will then attempt contact.
- Close the quit attempt the when the client has been contacted at 4 weeks and is a smoker or lost to follow up or when the 12-week submission has been made.
- To ensure follow ups are not being missed, best practice would be to make one or two staff members responsible for checking the reports section of PCR at a set time each week for follow ups due or contacts to be made.
- If a patient has smoked in the two weeks prior to the 4 week, follow up they must be entered as unsuccessful and the record closed. If assessed as still motivated to stop, you will be required to make a new record with a new quit date. It is preferable that this is made the following week as the system cannot differentiate between the old record closing and the new record starting and this will cause an error to occur.
- If a patient has smoked less than 5 cigarettes between the 4-week and 12 week, follow up this is still counted as a successful quit at 12 weeks.
- Celebrate success with the client. NHS Lanarkshire Quit Your Way Pharmacy Support Team have certificates of achievement for clients who reach 4 and 12 weeks’ success. Certificates are available by contacting **01698 754 888** or emailing **PharmacyTobaccoControl@lanarkshire.scot.nhs.uk**

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PCR Visual Aid:

Week 0	Pre Quit Assessment Readiness and Motivation/ Quit Date/Products/ Withdrawal Symptoms/ CO Monitoring/commitment	Recording PCR Initial Data Capture Record new client on PCR Do not record Quit Date until client returns for Wk1	
Week 1	Quit Date Readiness and Motivation/Products/Withdrawa ls/managing cravings/changing routines/high risk situations/CO Monitoring/commitment IMPORTANT Do not set Quit Dates more than 14days in advance on PCR	Quit Date Set (QDS) Submit between Wk0-Wk1	Remuneration 1st Payment £30
Week 2/3	Post Quit Date Support Follow up client progress/ Withdrawals/cravings/coping strategies and difficult situations/high risk situations/'not a puff rule'/commitment	Record weekly contact on PCR (telephone/face to face)	
Week 4 ** IMPORTANT**	Post Quit Date Support Follow up client progress/ Withdrawals/cravings/coping strategies and difficult situations/high risk situations/'not a puff rule'/commitment	Submit 4 Week MDS <i>(including product type & No. of weeks used)</i> IMPORTANT Please follow up clients (minimum 3 attempts) and submit no later than <u>week 6</u> from QDS	Remuneration 2nd Payment £15
Week 5/6	Post Quit Date Support Follow up client progress/ Withdrawals/cravings/coping strategies and difficult situations/high risk situations/'not a puff rule'/commitment		

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Week 7 – Week 11	Post Quit Date Support Follow up client progress/ Withdrawals/cravings s/coping strategies and difficult situations/high risk situations/'not a puff rule'/commitment	Record weekly contact on PCR (telephone/face to face)	
Week 12 ** IMPORTANT **	Final Post Quit Session Check client progress/ Withdrawals/cravings s/coping strategies and difficult situations/high risk situations/'not a puff rule'/commitment/on going support available	SUBMIT 12 Week MDS (including product type & No. of weeks used) IMPORTANT Please follow up clients (minimum 3 attempts) and submit no later than <u>week 14</u> from QDS* * failed quit attempts can be submitted from week 10*	Remuneration 3rd Payment £35

IMPORTANT!

- Please update PCR weekly. All data from the PCR is uploaded on a Wednesday evening to the national ISD Database where information is processed for payments to be made and data/statistics updated.
- Pharmaceutical usage and number of weeks used MUST be updated at the time of the 4 week & 12 week submission.
- Do NOT put pharmacy phone number as client contact as this generates an error, if you do not know the telephone number please put 'unknown'.
- Nicotinell NRT is NHS Lanarkshire's first line formulary stop smoking product. See link for details: <https://nhs.uk/guidelines/scot.nhs.uk/medicines-guidance/joint-adult-formulary/chapter-4-central-nervous-system/drugs-used-in-substance-dependence/nicotine-dependence/>

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PCR Webcast & Step by step guide:

<https://www.youtube.com/watch?v=QF4SsPIwht8>

This link does not show the recent changes to the PCR i.e. Minimum Data Set (MDS) now referred to as Pre Quit Registration but will still show systematically the process to follow when completing the PCR accurately. This training tool webcast was produced by Community Pharmacy Scotland.

Printable PDF document for a more detailed screenshot step-by-step guide to using pharmacy care record for smoking cessation can be found here:

<https://www.communitypharmacy.scot.nhs.uk/nhs-lanarkshire/pages/pharmacy-services/stop-smoking-service/>



PCR SCREENSHOT GUIDE

INTRODUCTION

This guide provides a visual step-by-step demonstration on how to set up a new client or review a client's current quit, making it easier to understand for those who use or are new to the PCR system.

Before starting a new assessment, check the following:

- Does the patient consent to Follow Up? – If No, do not proceed.
- If yes, inform the patient that NHS Scotland representatives may contact them for a follow up.

Selecting the patient:

- It may be necessary to create a record for the patient
- A CHI look up function is available (CHI is mandatory)
- The mandatory patient information for smoking cessation patients differs from the normal PCR requirements. It is necessary to record the following additional information:

*Address

*Post Code – Submission will be rejected if the client's postcode is not entered correctly.

*Phone Number – IMPORTANT: Pharmacy telephone number must NOT be used, as the record will be rejected. If the client does not have or know the telephone number, please write UNKNOWN. Client follow up is an important part of the programme and obtaining a correct contact number is necessary.

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PHARMACOTHERAPY

Nicotine replacement therapy (NRT) and Varenicline are equal first line choice.

NRT or varenicline can only be prescribed to those solely smoking tobacco or dual user (vaping & smoking tobacco). Anyone who is solely vaping can receive a how to stop vaping leaflet. This can be found on the Community Pharmacy Website:

<https://www.communitypharmacy.scot.nhs.uk/nhs-lanarkshire/pages/pharmacy-services/stop-smoking-service/>

Varenicline:

Question and Answer session on varenicline:

<https://www.youtube.com/watch?v=IL3dynTNjOs>

Varenicline: Simple dosing guide

Varenicline reduces the reward of smoking and the craving to smoke.¹

Stopping smoking can be difficult. Taking varenicline is simple but it's important to know that the dose increases over a typical 12-week course.¹

Three-step increase in dose:

0.5 mg once daily
Day 1-3

0.5 mg twice daily
Day 4-7

1 mg twice daily
Day 8+
till end of treatment

- Varenicline 0.5 mg is a white oval tablet
- Varenicline 1 mg is a light blue oval tablet
- Tablets to be swallowed whole with water - with or without food
- Ideally, tablets should be taken at the same time each day

Dosing timetable:

When you begin taking varenicline, set a smoking stop day within week 2

	Week 1							Week 2						
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
	0.5 mg	0.5 mg	0.5 mg	0.5 mg	0.5 mg	0.5 mg	0.5 mg	1 mg	1 mg	1 mg	1 mg	1 mg	1 mg	1 mg
	X	X	X	0.5 mg	0.5 mg	0.5 mg	0.5 mg	1 mg	1 mg	1 mg	1 mg	1 mg	1 mg	1 mg

Patient repeats for weeks 3-12

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Single VS Dual Therapy:

For clients smoking **less than 20 cigarettes** per day a suitable NRT patch would usually be recommended in the first instance (although suitable gum, lozenges or mini-lozenges may be more appropriate in a very light or weekend smoker).

Dual NRT therapy (when two NRT products are used in combination) may be used:

- where clients smoke **more than 20 cigarettes a day** (except in pregnancy/breastfeeding as per below).
- for up to **12 weeks**.

Formulary Products:

<https://rightdecisions.scot.nhs.uk/nhs1-medicines-guidance/joint-adult-formulary/chapter-4-central-nervous-system/drugs-used-in-substance-dependence/nicotine-dependence/?searchTerm=Smoking%20cessation>

Please see first and second line products according to NHS Lanarkshire's Formulary below:

	Dose	Usual number of packs to be supplied
Nicotinell® Patches	Nicotinell® Patch (21mg, 14mg or 7mg) 24-hour patch (one per day)	1 pack of 7 patches
Nicotinell® Gum	Nicotinell® (2mg and 4mg) Gum, mint, fruit, liquorice.	1 pack of 96 pieces
Nicotinell® Lozenge	Nicotinell® (1mg and 2mg) Lozenges, mint	1 pack 96 lozenges
NiQuitin® Minis Lozenge	NiQuitin® (1.5mg & 4mg) Minis Lozenges, mint or orange	2 x 60 pack size.
NiQuitin and Nicorette products are non-formulary in NHS Lanarkshire, with the exception of NiQuitin minis lozenge		

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Formulary Products:

Nicotine Replacement Therapy (NRT) Information sheet for Pharmacy staff



This guide is for pharmacy staff supporting people to quit smoking using NRT. It covers information on how to use patches, lozenges and gum, so you can talk through each relevant product with your client.

Should you need any further advice or information from the Quit Your Way service, please contact the team on PharmacyTobaccoControl@lanarkshire.scot.nhs.uk or call the helpline on 01698 754 888. If no-one is available, please leave a message – we aim to respond within 24 hours.



Scan the QR code to watch a short video of how to use NRT

Patches

- Remove from the pouch.
- Remove the large side of the silver backing on the patch (try not to touch the sticky side).
- Stick the patch to a clear, dry and hairless part of skin.
- It can be put on your upper arm, back or hip.
- **The patch can be worn for 24 hours.**
- If the patch affects your sleep, take it off an hour before bed.
- Put on a new patch each day (remove old patch).
- Put it on a different part of your skin each day.

Continues over page

Formulary Products:

Mini Lozenges

Steps for use

1. Place the mini lozenge in mouth.
2. Allow to dissolve fully. Avoid crushing/chewing or swallowing the mini lozenge.
3. After 10 minutes spit the mini lozenge out and put in bin.

Tips

- Do not eat or drink whilst using the mini lozenge as will affect absorption.
- Mini lozenges provide fast relief for cravings, have a lozenge when you have an urge to smoke. One mini lozenge can be used every 1–2 hours to prevent or deal with a craving.
- Mini lozenges will last about 10 minutes.
- 15 mini lozenges can be used in 24 hours (each day).
- Do not take if you are allergic to soya or peanut (product contains soya oil).

Common side effects

- If you get a sore throat, mouth irritation, hiccups, heartburn or wind try resting the mini lozenge at your cheek for longer. This will slow down how quickly the nicotine is released from the mini lozenge.



Lozenges and Gum

- It is best to avoid drinking coffee, fizzy drinks or acidic fruit juices 15 minutes before using lozenges or gum.
- Don't eat or drink while using the lozenge or gum.
- One lozenge or piece of gum can be used every 1 to 2 hours to prevent or deal with a craving.
- 12 lozenges or gum pieces can be used in 24hrs (each day).

Steps for use

1. Suck the lozenge or chew the gum until the taste is strong.
2. Then move it to the side of your mouth.
3. Let it rest between your cheek and gums.
4. Rest it here until the taste fades.
5. Repeat steps 1–4 for up to 30 minutes.
6. After 30 minutes spit the gum out (or spit out lozenge if it hasn't dissolved) and put it in a bin.

Rest between
cheek and gum



Repeat for
30 minutes

Common side effects

If you get a sore throat, hiccups, heartburn or wind try resting the lozenge or gum at your cheek for longer. This will slow down how quickly the nicotine is released from lozenge or gum.

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MOTIVATIONAL INTERVIEWING

Motivational Support and Behaviour Change:

- Remember the 5 A's

ASK each client what their smoking status is, how long they have been smoking and how many they smoked. Find out about their previous quit attempts and what they have thought about stopping.

ADVISE clients that stop smoking service is here to help and that they are twice as likely to quit with support and use of stop smoking products.

ASSESS their motivation to stop using a scale from one to ten saying how interested they are in quitting and secondly how confident they feel about quitting.

ASSIST clients by preparing them for what to expect. Explain any likely withdrawal symptoms they may experience and how these can be reduced with a stop product.

ARRANGE for the client to read the literature and set a quit date. Sign the client up to come back to the pharmacy on a weekly basis for support and NRT. If they are not ready to quit, make sure you encourage them to come back in for a chat if they change their mind at a later date.

Questions for clients:

Closed Question	Open Question
So you are here because you are concerned about your smoking, correct?	Tell me, what is it that brings you here today?
Do you agree that it would be a good idea for you to stop smoking?	What do you think about the possibility of stopping smoking?
Do you like to smoke?	What are some of the things you like about smoking?
How has your smoking been this week, compared to last: more, less, or about the same?	What has your smoking been like during the past week?
Do you think you smoke too often?	In what ways are, you concerned about your smoking?
How long ago did you have your last cigarette?	Tell me about the last time you had a smoke?
When do you plan to quit smoking?	So what do you think you want to do about your smoking?

CARBON MONOXIDE MONITORING

Useful short clip on how to use monitor

<https://www.youtube.com/watch?v=0zFfC1UjFww>

The CO monitor belongs to NHS Lanarkshire, if you have any issues or require a replacement monitor, mouthpieces etc. then please contact the QYW Pharmacy Support Team on **01698 754 888**.

The following procedure is common to all monitors:

1. Both the client and the stop smoking practitioner should use sanitiser gel on their hands before the test. Hand sanitiser must be alcohol free to avoid damaging the sensor and giving a false reading.
2. Attach a clean, disposable, mouthpiece (a fresh one for each client) to the monitor.
3. Turn the machine on
4. Ask the client to take a deep breath
5. The monitor will count down 15 seconds and beep during the last 3 seconds
6. The client needs to blow slowly into the mouthpiece aiming to empty their lungs completely
7. The parts per million (ppm) of carbon monoxide in the lungs will be displayed on the screen
8. The mouthpiece should be removed by the client (for infection control reasons)
9. The CO monitor should be cleaned between tests using a non-alcoholic wipe

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For readings below 10 ppm, advise client this is classed as that of a non-smoker (although the normal range for a non-smoker is between 1 and 5 ppm).

If reading was 10 ppm or above, advise client this shows a level indicating a smoker.

Although Carbon Monoxide (CO) readings must be taken at weeks 1, 4 and 12 of the quit attempt, it is good practice for them to be taken each week. Many clients have found weekly CO readings to be an effective motivator to return to receive weekly pharmacy support and ultimately quit.

All CO readings must be entered on the PCR at weeks 1, 4 and 12.



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Co monitor Chart:



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USEFUL INFORMATION

Resource Order Form:



QYW RESOURCE ORDER FORM

To order resources, please email your completed form to
the Smoking Cessation Pharmacy Improvement Project Team:
PharmacyTobaccoControl@lanarkshire.scot.nhs.uk
OR call Helpdesk 01698 754 888

Contractor Code	Pharmacy Address	Contact Name
Resources Title	Quantity Required	Quantity Supplied
Steribreath Mouthpieces/Straws (box = 250)		
D-Piece Mouthpiece Adaptors with filter (box = 12)		
Pico Smokerlyser Carbon Monoxide (CO) Monitor		
Wipes – alcohol free (box =100)		
How to Stop Smoking and Stay Stopped Booklets		
Electronic Cigarette Booklets		
NHS Lanarkshire Vaping Information Leaflet		
QYW Service Tri-fold Leaflets		
QYW Tear-Off Slips (1 pad = 30 slips)		
QYW 4week success certificate		
QYW 12week success certificate		
Tar Jar (borrow item only)		

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QUIT YOUR WAY
with our support

You've stopped smoking for 4 weeks

Date / /

Adviser _____



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QUIT YOUR WAY

with our support

12 week

QUIT YOUR WAY

with our support

Well done

You've stopped smoking for 12 weeks

Presented to

Date / /

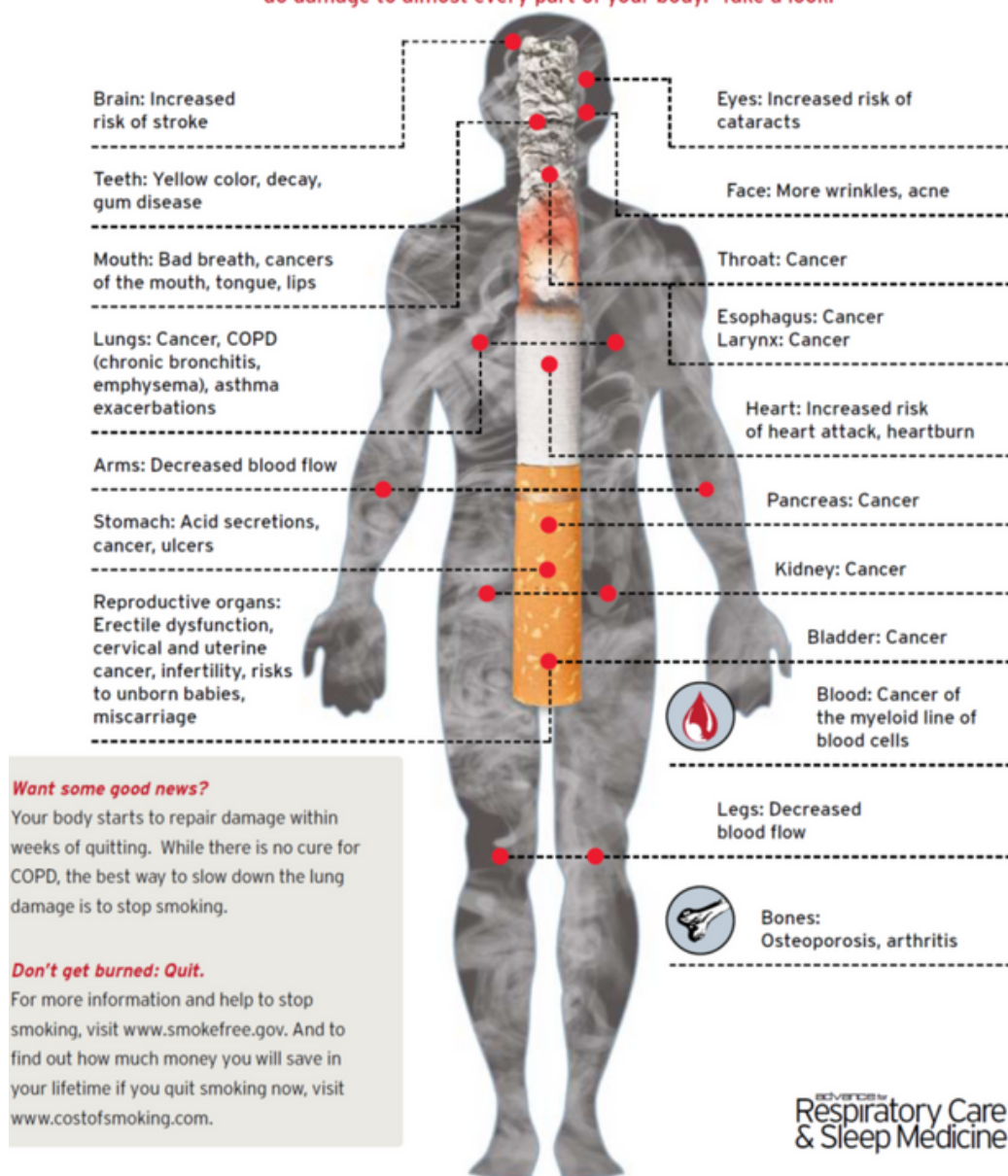
Adviser _____

How smoking harms the body:

CIGARETTE SMOKING'S EFFECT ON YOUR BODY:

It Burns You Up

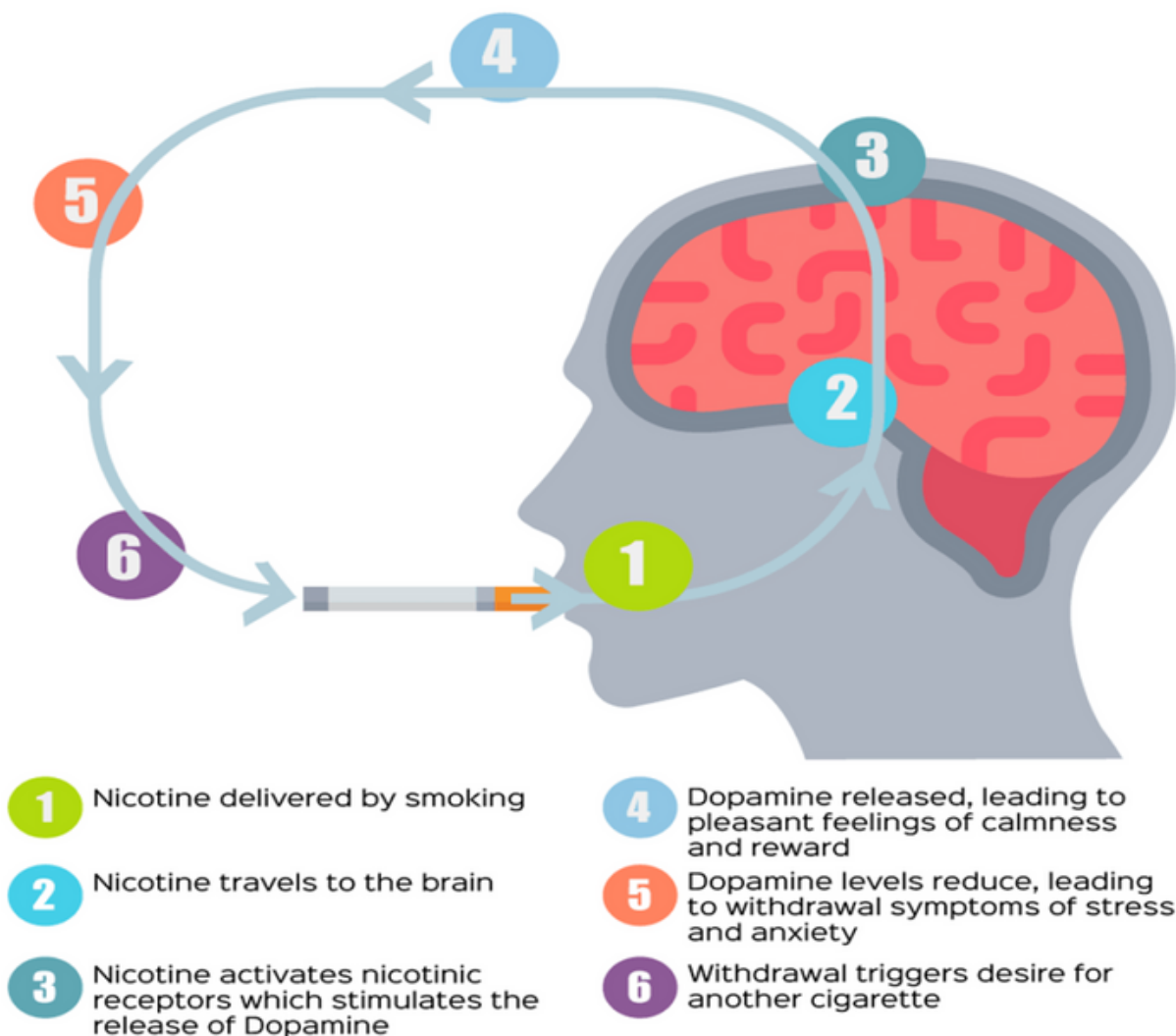
When you smoke, it's not just your lungs that suffer. Chemicals from cigarettes do damage to almost every part of your body. Take a look:



Information adapted from the Centers for Disease Control and Prevention.

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What happens when we smoke:



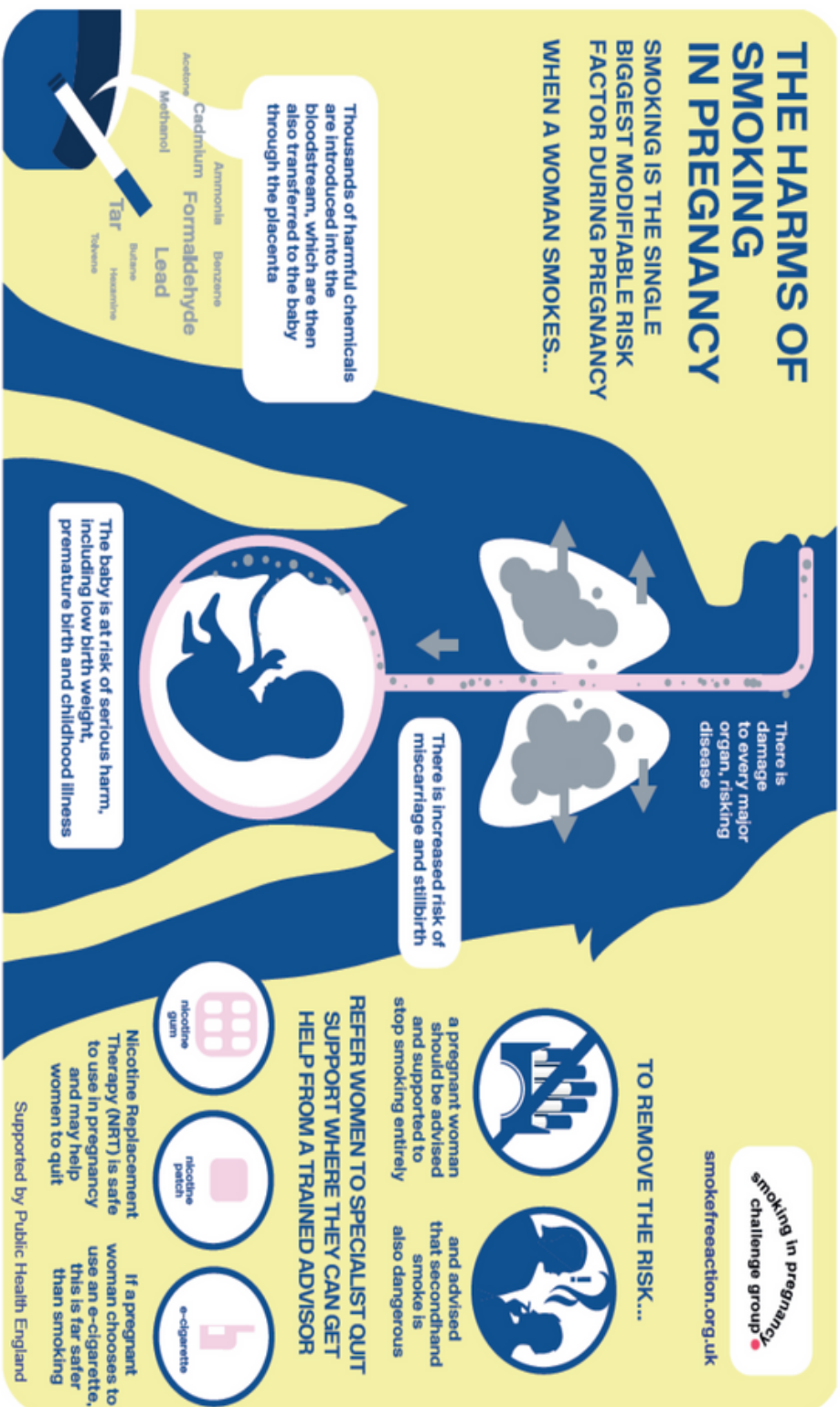
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Benefits of stopping smoking:



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Harms of smoking during pregnancy:



How smoking interactions with medication:

Information re the interactions with mental health medication and smoking can be found her:

<https://www.sps.nhs.uk/articles/considering-drug-interactions-with-smoking/#:%7E:text=clinically%20significant%20drug%20interactions%20tobacco%20smoking>

A useful document by ASH Scotland was created which give an insight in to the impact on certain medication. Please check using the link above before prescribing.



Psychotropic drugs affected by smoking status

Drug	Effect of smoking on plasma levels	Action to be taken on stopping smoking	Action to be taken on (re)starting smoking
Benzodiazepines	 0 – 50% Plasma levels reduced by 0-50%, dependent on drug and smoking status	• Monitor closely • Consider reducing dose by up to 25% over one week	• Monitor closely • Consider re-starting 'normal' smoking dose
Carbamazepine	 Unclear, but smoking may reduce carbamazepine plasma levels to a small extent	• Monitor for changes in severity of adverse effects	• Monitor plasma levels
Chlorpromazine	 Plasma levels reduced. Varied estimates of exact effect	• Monitor closely • Consider dose reduction	• Monitor closely • Consider re-starting previous smoking dose
Clozapine	 up to 50% Reduces plasma levels by up to 50%. Plasma level reduction may be greater in those receiving valproate	• Take plasma level before stopping • On stopping, reduce dose gradually (over a week) until around 75% of original dose reached (i.e. reduce by 25%) • Repeat plasma level one week after stopping • Anticipate further dose reductions	• Take plasma level before re-starting • Increase dose to previous smoking dose over one week • Repeat plasma level

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