

FOR CLINICIANS

## Smoking Cessation Treatment Options

**Always reinforce to women that if they do not succeed with behavioral change on the first or second try, they shouldn't stop trying.**

### **Nicotine Replacement Therapy**

The FDA has classified nicotine as a pregnancy category D: "There is positive evidence of human fetal risk based on adverse reaction data from investigational or marketing experience or studies in humans, but potential benefits may warrant use of the drug in pregnant women despite potential risks"

- Accordingly, none of the Nicotine Replacement Therapy (NRT) formulations have received FDA approval for use in pregnancy.
- Examples of NRT such as nicotine gum, patches, and lozenges can be purchased without a prescription. If women are unable to quit on their own or with counseling, nicotine replacement therapy products can be considered during pregnancy and breastfeeding, but women should discuss with their health care provider the risk and benefits of taking such medications.

If behavioral counseling fails, discuss the risks/benefits of NRT.

If NRT is warranted, it is prudent to prescribe doses at the low end of the effective dose range and consider the use of formulations that yield intermittent rather than continuous drug exposure. Some examples of intermittent NRT include: the gum, nasal spray, or inhaler.

**Some women may ask about Electronic cigarettes (E-cigarettes) which are not a form of NRT.**

### **Electronic cigarettes (E-cigarettes)**

Consumers may perceive tobacco products that don't burn to be safer than smoking cigarettes. The use of electronic cigarettes —also referred to as e-pens, e-hookah, tanks, or vape pens— is increasing rapidly among youth and adults.

- Electronic cigarettes are **not regulated and have not been shown to be a safe and effective cessation aid in smokers.** E-cigarettes have not been fully studied, so providers and consumers currently don't know the potential risks. The amount of nicotine or other potentially harmful chemicals that are being inhaled during use, or whether there are any benefits associated with using e-cigarettes, are unknown. It is not known whether e-cigarettes may lead consumers to try other tobacco products.

### **Complementary Therapies for Smoking Cessation**

There is not a great deal of evidence-based information regarding the prevalence of use and interest in complementary and alternative medicine (CAM) for tobacco cessation among smokers.<sup>1</sup>

Exercise, such as yoga, has shown promise as an aid to smoking cessation because it reduces weight gain and weight concerns, improves affect, and reduces nicotine withdrawal symptoms and cigarette craving. Pregnant women should develop an exercise program under supervision of their provider.

#### **Yoga**

Studies have shown that the practice of yoga improves weight control and reduces perceived stress. Yoga practice also includes regulation of breathing and focused attention, both of which may enhance stress reduction and improve mood and well-being, and may improve cessation outcomes.

#### **Hypnotherapy**

There are different ways to utilize hypnotherapy for smoking cessation: weaken the desire to smoke, strengthen the drive to quit, or help an individual concentrate on a cessation program. There is no definite evidence to evaluate the effectiveness of hypnotherapy on smoking cessation.

#### **Mindfulness Meditation**

This mind-body practice uses an individual's abilities to keep focused and maintain clear attention. The idea is to develop an increased awareness of the present. Some research has demonstrated that mindfulness-based approaches may help reduce symptoms of anxiety, depression, and chronic pain.

### **References**

1. <http://nccam.nih.gov/health/providers/digest/smoking-science>

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