

Quitting services and products

This guide to quitting services and products can help you decide how to quit. Different people have success with different ways of quitting. It is important to choose a way to quit that is safe, proven to help people, and that suits you. Be sceptical of any services or products that promise success without you needing to do anything.

Choosing the best way to quit

Research shows that people who have the best chance of quitting are those who get some support *and* use quitting medications.¹⁻³ The more contact you have with an advice and support service, the better your chances of quitting.²⁻⁴ If you smoke more than 10 cigarettes per day, using a nicotine replacement therapy product or a prescription medicine can help you quit.^{3, 5-8}

Before quitting

Chemicals in cigarettes change the way some medications work.^{9, 10} See your doctor before quitting if you are taking medication. We know that stopping smoking can be stressful. So if you have suffered from depression, anxiety or other mental illness, speak to your doctor before quitting so they can help you work out a plan to quit and manage any other health concerns.^{11, 12}

Do-it-yourself

Making an attempt to quit by yourself is the way most people choose to start and there are self-help materials available which can be helpful.^{13, 14} However, using an advice and support service has been shown to produce better results.^{3, 4, 15}

The Quit website www.quit.org.au provides practical advice to smokers wanting to quit. It is designed to give you the information, support and encouragement you need at the various stages of your quitting journey. It features many useful tips, videos of real-life experiences of people who have successfully quit, tools to build a tailored quitting plan and relaxation exercises.

Quit Victoria also provides a range of printed brochures to help people understand why they smoke and its effects. Our free Quit Pack offers advice and practical strategies on stopping smoking and staying stopped. To order these resources, call the Quitline or visit the Quit website.

More online resources

QuitCoach is a free interactive website that asks you a series of questions about your smoking, and then gives you advice about quitting which is tailored to your situation. To find out more go to www.quitcoach.org.au.

QuitTxt provides regular SMS messages including tips and encouragement to help you keep on track throughout your quit attempt. To begin, all you need to do is register and complete a brief questionnaire at www.quit.org.au/quittxt.

Quitline 13 7848

Quit Specialists offer help with quitting for the cost of a local call (except for mobiles). Your Quit Specialist is trained and experienced and knows how tough quitting can be. They will talk with you about your difficulties with quitting and give you reliable information and support. Your call is confidential. This means you don't have to give your name if you don't want to.

You can talk with your Quit Specialist once or as many times as you find helpful. You can also choose to have a Quit Specialist call you: they will arrange to call you before and after your quit date at times convenient to you. This has been shown to be very effective in helping smokers quit and stay quit.¹⁶

Quitline is available Monday to Friday from 8am to 8pm.

Research has found that using this kind of service can increase your chance of quitting successfully.^{3, 15, 17-19}

Quitline also has tailored services for people with mental health conditions, pregnant women, young people, people with heart disease, people with intellectual disabilities and people from multicultural backgrounds. For callers who would prefer Quitline support in a language other than English, Quit uses the Translating and Interpreting Service. Callers can also ask to speak to an Aboriginal Quit Specialist.

One-on-one advice

Some health professionals have been trained to help people quit. Discussing quitting with your doctor, health educator, psychologist, psychiatrist, or other health professional who has been trained to help people quit can increase the likelihood of your success.^{3, 4, 20} These sessions should be more than 10 minutes long.⁴

Different health professionals may have their own approach but in general they aim to help you understand why you smoke, and provide strategies to help you quit. You may learn skills to help you resist smoking and to cope better without

cigarettes.^{3, 11} They should support and encourage you to quit and you should feel welcome to discuss any problems or worries you have about quitting with them.³

Health professionals have different amounts of expertise and experience. Their fees and the time they can spend with you may not be the same either. Ask your health professional of local health service if they've had training to help people stop smoking, or can refer you to somebody who can help.

Courses

Some people find attending a quit course helpful. More effective programs are run by a trained leader, and offer you support when trying to quit. Research shows that on average, group courses can increase your chance of quitting successfully, compared to quitting without any help.²¹ However, the success rates of programs vary widely.^{21, 22}

Some quit courses promise very high success rates. But for meaningful quit rates, the course should provide evidence of success rates based on all participants at least six months after the end of the course.²²

For people who quit without any help from counselling or quitting medications, between three to seven per cent will still be quit ten months later.¹³ Typical rates of successful quitting for group courses in the long-term are around 14%.³ Be wary of claims that far exceed this. Check the experience and training of those running the course and whether a reputable organisation is responsible for the program. You should not feel under pressure to attend.

Nicotine replacement therapy products

All nicotine replacement therapy (NRT) products - the patch, lozenges, mouth spray, gum and inhalator - are sold at pharmacies without prescription. Some are also sold in supermarkets and other shops.

Research shows that people who use NRT products are more likely to quit and stayed stopped.^{5, 8} NRT products work best for people who smoke more than 10 cigarettes per day and who want to quit.^{3, 5} They help reduce nicotine withdrawal symptoms while you focus on breaking your smoking habits and learn to live without cigarettes.²³ You can discuss with your pharmacist, doctor or Quit Specialist which product would best suit you.

NRT products are much safer than cigarettes.²⁴ They do not contain cancer-causing substances, carbon monoxide or other dangerous chemicals found in tobacco smoke.²⁴ If you slip-up and have a cigarette, it is safe to continue using your NRT product and to keep trying to quit.²⁵

NRT products are designed to be less addictive than cigarettes: you absorb less nicotine, at a slower rate than smoking.²⁶ The nicotine lozenge, mouth spray, gum and inhalator work best when taken every one to two hours throughout the day.²³ It may take up to several minutes before they start to ease your cravings; the mouth spray is fastest.^{23, 27}

Using a NRT product will still increase your chances of quitting even if it does not completely control cravings.²⁸ Combination therapy (using the patch with another NRT product) is better at suppressing cravings than a single NRT product.²⁹ Some experts advise that most addicted smokers would benefit from using combination therapy.¹²

If you feel unready or unable to quit, the “cut down then quit” method allows you to use the nicotine lozenge, mouth spray, inhalator or gum while cutting down the number of cigarettes you smoke over six months before stopping completely.³⁰⁻³⁵

If you have any medical conditions, are taking any medicines (including non-prescription ones), or are pregnant or breastfeeding, you should talk to your pharmacist or doctor before using NRT products.^{12, 36} If you are aged 12 to 17 years, you may use NRT products to quit, with support from your doctor or counselling service.¹²

Nicotine patches

Nicotine patches are available through the Pharmaceutical Benefits Scheme, which means they are much cheaper than the other products. To buy them this way, you must have a prescription from your doctor and you must take part in a support program, such as that provided by the Quitline.

There are two different types of patches. There are 24 hour patches that come in three strengths of 21 mg, 14 mg and 7 mg of nicotine. There are also 16 hour patch that you wear only during the day time, which come in three strengths of 25 mg, 15 mg and 10 mg of nicotine. The patch is worn on the skin, and you slowly absorb nicotine from it. Some people may find patches easier to use than other nicotine products.²³

If you usually smoke 15 or more cigarettes per day, you may also use a patch for two weeks leading up to your quit day.^{37, 38} This increases your chance of success over starting use of the patch after you stop smoking.⁵

If you have cravings or trouble quitting using only a single nicotine product, you can use the patch plus another nicotine replacement therapy product at the same time.^{37, 38} You should talk to your doctor or pharmacist first before doing this.

Nicotine lozenges and mini lozenges

Nicotine lozenges and mini lozenges are tablets which dissolve in your mouth. They slowly release nicotine, which is absorbed through the lining of your mouth over 10 to 20 minutes. The mini lozenge dissolves faster than the lozenge. The 4 mg lozenge and 4 mg mini lozenge are recommended for those who usually smoke more than 20 cigarettes per day. The 4 mg lozenge is also suitable for those who smoke within 30 minutes of waking up in the morning. The 2 mg lozenge and 1.5 mg mini lozenges are suitable for lighter smokers.^{33, 35}

Nicotine mouth spray (QuickMist)

The nicotine mouth spray comes in a small pump that sprays a fine mist onto the side of your cheek or under your tongue. You absorb the nicotine through the lining of your mouth. Most people find that it starts to relieve cravings within five minutes of use.³⁹ Do not breathe in while using the spray to avoid irritating your throat.³⁴

Nicotine chewing gum

Nicotine gum comes as 2 mg and 4 mg pellets. After chewing the gum a few times to get a peppery taste, you rest it in the side of your mouth. You absorb nicotine from the gum through the lining of your mouth. You may “chew and rest” the gum several times before discarding it. The 4 mg gum is used by people who smoke more than 20 cigarettes per day or who cannot quit using the 2mg gum.^{30, 32}

Nicotine inhalator

The nicotine inhalator is a plastic tube with a plug loaded with nicotine, which is inserted into a mouthpiece. When you draw air through the inhalator, it releases nicotine from the plug, which is absorbed through the lining of your mouth. The nicotine dose from the inhalator is similar to the 2 mg gum.³¹

Prescription medicines

In Australia, there are two prescription only medications used for quitting smoking: bupropion (brand names Zyban and Prexaton) and varenicline (brand name Champix). These medications do not contain nicotine. They must be prescribed by a doctor, as they are not suitable for all people. Both are subsidised by the Pharmaceutical Benefits Scheme (PBS).¹² To get the PBS subsidy you must also be receiving counselling for quitting smoking from your doctor or a support service such as the Quitline.

Bupropion is sold under the brand names Zyban SR, and Prexaton. It is also used in certain anti-depressant medicines. Using bupropion can reduce some nicotine withdrawal symptoms and, together with counselling, can increase your chances of quitting successfully.^{6, 40}

Varenicline, sold under the brand name Champix, works by reducing cravings and negative moods, and by reducing the rewarding effects of smoking (if you slip-up while quitting using this medication). People who use varenicline together with counselling are more than twice as likely to quit and stayed stopped.⁷

The risk of serious side effects of these medications is low.^{6, 7} Your doctor should discuss these effects before prescribing it to you, and check if you have any health conditions that increase your risk. It is also important that you read all of the Consumer Medicine Information (CMI) that comes with the tablets and talk to your doctor about any symptoms that concern you. The CMI is printed for you at the pharmacy when the prescription is being filled.

Exercise

Research on the effects of exercise while quitting smoking is still in its early stages, but it shows some promise. Light to moderate exercise, for example five to 10 minutes of brisk walking, can help reduce cravings and withdrawal symptoms for short periods.⁴¹ Vigorous exercise appears to increase withdrawal symptoms, but still lower cravings.⁴² One study found that vigorous exercise can increase the chance of quitting, but more studies are needed.⁴¹ Research also suggests that moderate or vigorous exercise may help reduce the weight gain that can occur in the first year after quitting.⁴³ Moderate exercise includes activities such as brisk walking, slow jogging, cycling, hiking, dancing and lawn mowing.⁴⁴

Unproven methods and products

Herbal preparations

These can be available as drops, mouth spray and herbal cigarettes. There is little evidence that these have any benefit other than a placebo effect (no physical effect but may improve some people's confidence at quitting).^{45, 46}

Some herbal cigarettes are blended with tobacco. Even herbal cigarettes which contain no tobacco or nicotine have levels of tar and other substances similar to cigarettes and may be harmful to your health.⁴⁷⁻⁴⁹

Acupuncture

This involves treatment by applying needles or surgical staples to the skin of the ear or other parts of the body. Related treatments include acupressure, laser therapy, and electrostimulation. To date, there is no clear evidence to support the use of acupuncture or related treatments in their own right as a quitting aid. Acupuncture may have a small short-term effect, but research has not shown that increases the chance of quitting in the long-term. More research is needed.⁵⁰ Nicotine replacement products work better than acupuncture.

Hypnosis

The aim of hypnotherapy for supporting quitting is to put suggestions in people's non-conscious mind to weaken the desire to smoke, or strengthen their will to stop, or improve their ability to carry through a treatment program. It has not been shown that hypnotherapy itself increases long term quitting rates. Although hypnotherapy could be helpful as a counselling treatment, more evidence is needed to confirm this. Hypnotherapy has been poorly studied and better research is needed.⁵¹

Switching to weaker tasting cigarettes

Research shows that smokers who choose to switch to weaker tasting or less harsh cigarettes (previously branded "low tar") inhale just as much disease causing chemicals from each cigarette as they did from their previous brand.⁵² These cigarettes are designed to make it easy for smokers to get the amount of nicotine that they are used to.⁵² There is no evidence that switching to a weaker tasting cigarette reduces addiction or helps smokers to quit.⁵² Smokers of these cigarettes do **not** have lower risks for smoking related diseases such as lung cancer, heart disease and emphysema, than smokers of regular cigarettes.⁵²⁻⁵⁴

Electronic cigarettes

Electronic cigarettes are designed to simulate the act of smoking, delivering chemicals to the user via an aerosol vapour. Some devices contain nicotine and others are non-nicotine products.⁵⁵ These electronic products may also be called e-shisha, e-cigars, e-pipes, e-Hookas, hookah-pens, vape-pipes and e-cigs.

Currently, there is little independent research into whether non-nicotine or nicotine-containing electronic cigarettes can help people quit.⁵⁵ As at September 2017, no electronic cigarette product has been approved by the Therapeutic Goods Administration as an aid to quitting smoking.⁵⁶ Products involving delivery of chemicals to the lung are normally only approved after they are extensively tested for safety and how well they work.⁵⁷ Products currently on the market in Australia have not passed through this process and so their safety cannot be guaranteed.⁵⁶

E-cigarettes are not likely to be risk free and expose users to chemicals and toxins that potentially have harmful effects when inhaled. Chemicals in e-cigarettes vapour may affect the lungs and circulation system in both users and the people around them.⁵⁸⁻⁶⁰ Globally, there are reports where e-cigarettes have overheated, caught fire or exploded, in some cases causing serious injury.^{58, 61} Calls to poisons centres reporting nicotine poisonings associated with e-cigarettes and e-liquids have increased sharply in recent years in the United Kingdom, United States and Australia.⁶¹⁻⁶³ Symptoms of nicotine poisoning range from eye and skin irritation, vomiting and nausea to life-threatening illness.^{58, 64} Young children are at particular risk if they drink nicotine e-liquid or absorb it through their skin.⁶⁴

Under Victorian poisons laws, the sale, possession and use of nicotine in the form of an electronic cigarette is currently against the law, except where a user imports them for personal use under the Therapeutic Goods Administration personal importation scheme, which requires a medical prescription. This is because nicotine that has not been medically prescribed is considered a 'dangerous poison' under drugs and poisons laws.⁶⁵

Research on electronic cigarette safety and their use as quitting aids is continuing to evolve and we will monitor developments and update this information accordingly.

Filters and filter blockers

Filters and filter blocking products (such as drops) are used to help people gradually reduce the amount of smoke they inhale from each cigarette. However, some smokers may compensate for the drop in nicotine by inhaling the smoke more deeply or smoking more cigarettes. There is not enough evidence to recommend these products as quitting aids.⁶⁶⁻⁶⁸

Aversion methods

Aversion methods include rapid smoking, covert sensitisation (smoking while imagining unpleasant associations), smoke-holding, electric shocks, silver acetate, or pairing smoking or urges to smoke with other unpleasant methods or products. More research is needed to determine if rapid smoking has a benefit.⁶⁹ It may have serious side effects in older persons or persons with heart or cardiovascular disease.⁶⁸ There is no evidence to support the other methods.^{3, 69, 70}

Other products and methods

Other methods and products are often marketed as quitting aids, such as homeopathic cures, pills, potions, lobeline, glucose tablets, magnets, lasers, and motivational secrets. Some have not been found to help quitting and many have not been studied.^{67, 71, 72} Be sceptical of unsupported claims.

Where can I get more information?

Visit the Quit website quit.org.au for more detailed *Fact Sheets* on each nicotine replacement therapy product and prescription medicine.

Call the Quitline 13 7848 (13QUIT) for a free Quit Pack or to speak to a Quit Specialist.

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