

Fine-Tune Smoking Cessation for Patients With Cardiovascular Disease

Questions will come up about **how to help patients with CV disease quit smoking**...due to new guidance from the Am College of Cardiology.

Smoking is responsible for up to a third of deaths from CV disease.

Ask patients if they smoke...and advise them to quit. Explain that counseling PLUS smoking cessation meds works better than either one alone.

Suggest free services, such as calling 800-QUIT-NOW...or texting "QUIT" to 47848 to use SmokefreeTXT. In-person behavioral support and counseling with specialists is most effective...but may not be practical.

Continue to motivate...it often takes multiple attempts to succeed.

Which smoking cessation meds are okay to use in CV disease? Don't hold back from recommending nicotine replacement therapy (NRT), varenicline (*Chantix*), or bupropion SR (*Zyban*) in stable CV patients...including those with heart disease, heart failure, atrial fib, etc.

Point out that the risks of smoking far outweigh any potential CV risks with meds. It's even okay to use NRT in patients hospitalized for an acute CV event...and early use may improve quit rates after discharge.

Which smoking cessation regimens are preferred in CV disease? In general, recommend starting with a nicotine patch for long-acting control PLUS a short-acting form (gum, lozenge, etc) for breakthrough cravings...or *Chantix* alone. These work better than a single NRT or bupropion alone.

But lean toward bupropion if patients also have depression.

If patients don't fully succeed with combo NRT or one oral med alone, consider other options...NRT plus *Chantix* OR bupropion, or possibly *Chantix* plus bupropion. Some early evidence suggests these combos MIGHT help. Tailor the choice based on preference, past quit attempts, etc.

What is the role of e-cigarettes for smoking cessation? Explain there's some evidence that e-cigs help patients quit smoking...but we don't have long-term cardiovascular or other safety data.

Plus about 60% of patients who use e-cigs are "dual users"...and continue to smoke cigarettes. Emphasize the goal of quitting completely...smoking just one regular cigarette per day increases CV risk.

Steer patients to proven therapies. But don't stand in the way of a quit attempt...e-cigs may be the lesser of two evils in some cases.

Learn more about e-cigs in our chart, *E-Cigarette and Vaping FAQs*...and compare meds with our chart, *Smoking Cessation Drug Therapy*.

Key References:

- J Am Coll Cardiol 2018;72(25):3332-65
- JAMA Int Med 2018;178(5):622-31
- J Am Heart Assoc 2018;7(18):e009424
- N Engl J Med 2019 Jan 30. doi: 10.1056/NEJMoA1808779

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