



Resource Manual for Tobacco Prevention and Cessation

Tobacco Prevention Coalition of Northern Kentucky

C/O Northern Kentucky Health Department

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859.341.4264

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Who We Are

The Tobacco Prevention Coalition of Northern Kentucky was formed in 1997. The coalition is comprised of a variety of individuals, organizations, civic groups, agencies and corporations who have an interest and commitment to reducing tobacco use in Northern Kentucky. Each year, the coalition promotes, coordinates and implements projects throughout the Northern Kentucky service area. This service area includes Boone, Campbell, Grant and Kenton Counties.

Mission

The Tobacco Prevention Coalition of Northern Kentucky's mission is to promote a healthy Northern Kentucky by preventing tobacco use, reducing exposure to secondhand smoke and facilitating tobacco cessation.

Tobacco Burden

Tobacco use is the number one preventable cause of death in the United States. Every year, the Centers for Disease Control and Prevention estimates that 443,000 Americans will die from smoking or exposure to secondhand smoke. With that alarming statistic, we still have 43.4 million U.S. adults that smoke cigarettes.¹

In Kentucky, we are third in the nation for adult tobacco use with 25.2 percent of Kentuckians currently using tobacco.² The economic toll that tobacco use has on Kentucky is huge. The Campaign for Tobacco-Free Kids reports that Kentucky pays \$1.5 billion a year in direct health care costs due to smoking; smoking causes \$2.3 billion in loss of productivity in Kentucky; and the federal and state tax burden from smoking for Kentucky taxpayers is \$984.90 each year.³

These economic statistics do not include health costs due to secondhand smoke exposure. Secondhand smoke exposure has been proven by science to cause the same adverse health effects as first hand smoking. The 2006 Surgeon General's report on secondhand smoke states that there is no safe level of exposure to secondhand smoke.

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Tobacco Prevention Coalition of Northern Kentucky Contact List

	<p>GlaxoSmithKline Consumer Healthcare www.gsk.com</p>
	<p>820 Arnie Risen Blvd. Williamstown, KY 41097 www.grant.kyschools.us</p>
	<p>307 John's Hill Road Highland Heights, KY 41099 859.442.3525 www.kcp.uky.edu</p>
	<p>7075 Industrial Road Florence, KY 41042 859. 283.0952 www.northkey.org</p>
	<p>610 Medical Village Drive Edgewood, KY 41017 859.341.4264 www.nkyhealth.org</p>
	<p>Nunn Drive Highland Heights, KY 41099 859.572.5684 www.nku.edu</p>
	<p>Pfizer www.pfizer.com</p>
	<p>85 N. Grand Ave. Fort Thomas, KY 41075 859.572.3298 www.stelizabeth.com</p>

Benefits of Quitting

Tobacco dependence is a chronic condition that often requires repeated intervention and multiple attempts to quit; however, effective treatments exist that can significantly increase rates of long-term abstinence. It is never too late to stop using tobacco and there are immediate health benefits from quitting; those benefits continue for years after quitting.⁴

- **20 minutes after quitting** the heart rate drops
- **12 hours after quitting** carbon monoxide level in the blood drops to normal
- **2 weeks to 3 months after quitting** heart attack risk begins to drop and lung function begins to improve
- **1 to 9 months after quitting** coughing and shortness of breath decrease
- **1 year after quitting** the risk of coronary heart disease is half that of a smoker
- **5 – 15 years after quitting** the risk of stroke is reduced to that of a nonsmoker
- **10 years after quitting** the lung cancer death rate is about half that of a smoker's
- **15 years after quitting** the risk of coronary heart disease is back to that of a nonsmoker

Tobacco Cessation Resources

Cessation Resource	Description	Contact for More Information	Audience	Cost
The Cooper Clayton Method to Stop Smoking	Smoking cessation program that meets one hour/week for 13 weeks. Includes group support and educational videos. Program participants are encouraged to use nicotine replacement products.	Northern Kentucky Health Department 859.363.2093 or visit www.nkyhealth.org	Adult smokers	Free (does not include nicotine replacement products)
Self-Help Cooper Clayton Method to Stop Smoking	Includes participant book to assist the smoker in choosing the appropriate nicotine replacement product and a DVD with 13 segments; one for each week.	Available at Boone, Campbell, Kenton and Grant County public libraries for check-out. Call Northern Kentucky Health Department for questions 859.363.2093	Adult smokers	Free (must have library card to check-out)
Kentucky's Tobacco Quit Line	Statewide telephone service that provides brief intervention and support for people who want to stop smoking or using other tobacco products.	1.800.QUIT.NOW 9 a.m.-9 p.m. Monday-Friday	Adult smokers Adult spit tobacco users Pregnant tobacco users	Free
Freedom from Smoking Online	Free online cessation program from American Lung Association consisting of seven modules.	American Lung Association: www.ffsonline.org/	Adults	Free (must register on Web site)
Make Yours A Fresh Start Family	The program is intended to raise awareness about the risks of tobacco and secondhand smoke by targeting pregnant women and mothers of young children.	Northern Kentucky Health Department (available at all health center locations) 859.341.4264 Boone Co. 859.363.2060 Campbell Co. 859.431.1704 Kenton Co. 859.431.3345 Grant Co. 859.824.5074	Pregnant women that use tobacco and mothers of young children that use tobacco	Free

Quit Kits	Quit kits containing smoking cessation resources and intervention props.	Northern Kentucky University Health Counseling and Prevention Office: 859.572.5650	Northern Kentucky University faculty, staff and students	Free
Smoking Cessation Class for Pregnant Women	A class for the pregnant mom who has the desire to stop smoking. Class topics include the addiction of cigarettes, the effects of smoking on the fetus, the pregnancy, secondhand smoke and SIDS.	St. Elizabeth Healthcare The Family Birth Place 859.301.2229	Pregnant women that use tobacco	Call for cost
ASPIRE	Web based version of the school curriculum designed for youth looking to quit smoking, or youth that are non-smokers and wish to remain that way.	www2.mdanderson.org/depts/aspire/site.html Contact Northern Kentucky Health Department for additional information: 859.341.4264	Middle and high school students	Free
Kids Now	Case management services and prevention education for pregnant women at risk of or using alcohol, tobacco and/or drugs.	NorthKey 859.283.0952	Pregnant women	Call for cost

Tobacco Trainings and Workplace Resources

Cessation Resource	Description	Contact for More Information	Audience	Cost
Cooper Clayton Facilitator Training	Stop smoking facilitator trainings for organizations and businesses wanting the flexibility of providing classes in their workplaces.	Kentucky Cancer Program: 859.442.3525	Non-tobacco users	Free (does not include facilitator materials)
Technical Assistance with Tobacco Policies	Help for workplaces in creating, implementing and enforcing tobacco policies.	Northern Kentucky Health Department: 859.341.4264	Workplaces	Free
TAP/TEG Training	Learn to implement Intervening with Teen Tobacco Users (TEG) and Helping Teens Stop Using Tobacco (TAP)	Northern Kentucky Health Department: 859.341.4264	Schools and community organizations working with youth in grades 7-12	Train the trainer- Free
St. Elizabeth Business Health Center	Offers Cooper Clayton smoking cessation for the worksite.	St. Elizabeth Business Health Services: 859.301.2574	Workplaces	Call for cost
FreshStart	Employer based program to help tobacco users quit smoking; consists of four one-hour sessions during a two-week period.	American Cancer Society: 859.647.2226	Workplaces	Call for cost

Tobacco Cessation Methods

Behavioral Therapy

Two types of counseling and behavioral therapies result in higher abstinence rates: (1) providing smokers with practical counseling (problem solving skills/skills training); (2) providing social support as part of treatment. All programs provided in this guide incorporate these components. It has been shown that the more sessions of counseling a participant attends, while also combining the use of effective medication, the higher the likelihood of successful smoking cessation.⁵

Medication

When used correctly, nicotine replacement products can help relieve the withdrawal symptoms people experience when they quit using tobacco. There are several nicotine replacement products currently available over-the-counter, including: nicotine patches, nicotine gum and nicotine lozenges. There are also medications that are available through a physician by prescription only which include: nicotine nasal spray, nicotine inhaler, Zyban or Wellbutrin (Bupropin) and Chantix (Varenicline). Zyban, Wellbutrin and Chantix do not contain nicotine but are effective in helping individuals quit smoking.

On July 1, 2009, the U.S. Food and Drug Administration announced that two smoking cessation prescription medications, Chantix and Zyban, will be required to carry a “black box warning,” the agency’s strongest safety warning, because of serious side effects. Wellbutrin already carries this warning. Potential side effects of these medications include the risk of serious mental health events including changes in behavior, depressed mood, hostility and suicidal thoughts. It is strongly recommended that individuals using these products and their family and friends be aware of any behavior changes while on these medications. *These mental health side effects can occur in individuals with no history of mental health problems.* Individuals should use these products under the close care of a physician.⁶

The information on tobacco cessation medications provided in this manual is not intended to replace information provided by health care providers. It is necessary with all types of medication to follow the doctor’s orders and use the products only as prescribed and/or according to labeling. The goal in using tobacco cessation medications is to completely stop using tobacco. If an individual continues to have strong urges to smoke or is struggling to stop smoking completely, he or she should consult a health care provider about additional help.

The combination of counseling and medication is more effective for tobacco cessation than either medication or counseling alone. To be most effective, tobacco cessation products should be used in conjunction with a behavior change program.

Alternative Methods

Although hypnosis and other alternative therapies work for some individuals, the effectiveness of these therapies for the general population is not as strong as using medication, counseling, or medication and counseling combined. The same holds true for quitting cold turkey or without assistance.⁵

All products in the table presented have been approved by the FDA for use in tobacco cessation

UW-CIRI

Quit Tobacco Series: Medication Chart*

#2

See FDA package inserts for more information, including more detailed safety information. Ask your doctor if one of these options is right for you.

Medication	Cautions/Warnings	Side Effects	Dosage	Use	Availability (check insurance)
Bupropion SR 150	<ul style="list-style-type: none"> Not for use if you: <ul style="list-style-type: none"> * Currently use monoamine oxidase (MAO) inhibitor * Use bupropion in any other form * Have a history of seizures * Have a history of eating disorders * Caution with dentures * Do not eat or drink 15 minutes before or during use 	<ul style="list-style-type: none"> * Insomnia * Dry mouth 	<ul style="list-style-type: none"> * Days 1-3: 150 mg each morning * Days 4-end: 150 mg twice daily 	Start 1-2 weeks before quit date; use 2 to 6 months	Prescription Only: <ul style="list-style-type: none"> * Generic * Zyban * Wellbutrin SR
Nicotine Gum (2 mg or 4 mg)	<ul style="list-style-type: none"> * Caution with dentures * Do not eat or drink 15 minutes before or during use 	<ul style="list-style-type: none"> * Mouth soreness * Stomach ache 	<ul style="list-style-type: none"> * 1 piece every 1 to 2 hours * 6-15 pieces per day * If ≤ 24 cigs: 2 mg * If ≥ 25 cigs/day or chewing tobacco: 4 mg 	Up to 12 weeks or as needed	OTC Only: <ul style="list-style-type: none"> * Generic * Nicorette
Nicotine Inhaler	<ul style="list-style-type: none"> * May irritate mouth/throat at first (but improves with use) 	<ul style="list-style-type: none"> * Local irritation of mouth & throat 	<ul style="list-style-type: none"> * 6-16 cartridges/day * Inhale 80 times/cartridge * May save partially-used cartridge for next day 	Up to 6 months; taper at end	Prescription Only: <ul style="list-style-type: none"> * Nicotrol inhaler
Nicotine Lozenge (2 mg or 4 mg)	<ul style="list-style-type: none"> * Do not eat or drink 15 minutes before or during use * One lozenge at a time * Limit 20 in 24 hours 	<ul style="list-style-type: none"> * Hiccups * Cough * Heartburn 	<ul style="list-style-type: none"> * If smoke/chew ≥ 30 minutes after waking: 2 mg * If smoke/chew ≤ 30 minutes after waking: 4 mg * Weeks 1-6: 1 every 1-2 hrs * Wks 7-9: 1 every 2-4 hrs * Wks 10-12: 1 every 4-8 hrs 	3-6 months	OTC Only: <ul style="list-style-type: none"> * Generic * Commit
Nicotine Nasal Spray	<ul style="list-style-type: none"> * Not for patients with asthma * May irritate nose (improves over time) * May cause dependence 	<ul style="list-style-type: none"> * Nasal irritation 	<ul style="list-style-type: none"> * 1 "dose" = 1 squirt per nostril * 1 to 2 doses per hour * 8 to 40 doses per day * Do NOT inhale 	3-6 months; taper at end	Prescription Only: <ul style="list-style-type: none"> * Nicotrol NS
Nicotine Patch	<ul style="list-style-type: none"> Do not use if you have severe eczema or psoriasis 	<ul style="list-style-type: none"> * Local skin reaction * Insomnia 	<ul style="list-style-type: none"> * One patch per day * If ≥ 10 cigs/day: 21 mg 4 wks, 14 mg 2-4 wks, 7 mg 2-4 wks * If <10/day: 14 mg 4 wks, then 7 mg 4 wks 	8-12 weeks	OTC or prescription: <ul style="list-style-type: none"> * Generic * Nicoderm CQ * Nicotrol
Varenicline	<ul style="list-style-type: none"> Use with caution in patients: <ul style="list-style-type: none"> * With significant renal impairment * With serious psychiatric illness * Undergoing dialysis FDA Warning: Varenicline patients have reported depressed mood, agitation, changes in behavior, suicidal ideation and suicide. * Only patch + bupropion is currently FDA-approved. * Follow instructions for individual medications. 	<ul style="list-style-type: none"> * Nausea * Insomnia * Abnormal, vivid or strange dreams 	<ul style="list-style-type: none"> * Days 1-3: 0.5 mg every morning * Days 4-7: 0.5 mg twice daily * Day 8-end: 1 mg twice daily 	Start 1 week before quit date; use 3-6 months	Prescription only: <ul style="list-style-type: none"> * Chantix
Combinations: 1) Patch + bupropion 2) Patch + gum 3) Patch + [lozenge or inhaler]	<ul style="list-style-type: none"> * Only patch + bupropion is currently FDA-approved. * Follow instructions for individual medications. 	<ul style="list-style-type: none"> See individual medications above. 	<ul style="list-style-type: none"> See individual medications above. 	See above.	See above.

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*Based on the 2008 Clinical Practice Guideline: Treating Tobacco Use and Dependence, U.S. Public Health Service, May 2008.

Resources

1. Centers for Disease Control and Prevention. (2009, January 29). Tobacco Use: Targeting the Nation's Leading Killer. Retrieved October 8, 2009, from Centers for Disease Control and Prevention: <http://www.cdc.gov/nccdphp/publications/aag/osh.htm>
2. Centers for Disease Control and Prevention. (2009, May 15). Prevalence and Trends Data: Tobacco Use 2008. Retrieved October 8, 2009, from Behavioral Risk Factor Surveillance System: <http://www.cdc.gov/nccdphp/publications/aag/osh.htm>
3. Campaign for Tobacco Free Kids. (2008, November 18). Research Center Fact Sheets. Retrieved October 8, 2009, from Campaign for Tobacco Free Kids: <http://www.tobaccofreekids.org/research/factsheets/pdf/0178.pdf>
4. Centers for Disease Control and Prevention. (2009, May 29). Smoking and Tobacco Use- Within 20 minutes of quitting. Retrieved October 12, 2009, from Centers for Disease Control and Prevention: http://www.cdc.gov/tobacco/data_statistics/sgr/2004/posters/20mins/index.htm
5. U.S. Department of Health and Human Services. (2008). Treating Tobacco Use and Dependence.
6. U.S. Food and Drug Administration. (2009, July 1). Information for Healthcare Professionals: Varenicline (marketed as Chantix) and Bupropion (marketed as Zyban, Wellbutrin, and generics). Retrieved October 12, 2009, from U.S. Food and Drug Administration: <http://www.fda.gov/Drugs/DrugSafety/PostmarketDrugSafetyInformationforPatientsandProviders/DrugSafetyInformationforHealthcareProfessionals/ucm169986.htm>

* For additional resources visit www.nkyhealth.org