

UW-CTRI News Release

University of Wisconsin Center for Tobacco Research and Intervention

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Contact:
Moira Harrington, (608) 265-4447
mh1@medicine.wisc.edu
Chris Hollenback, (608) 262-3902
ch3@medicine.wisc.edu

Two Medicine Combinations Shown Effective for Quitting Smoking

Smokers trying to quit smoking for the holidays have the best chance for success if they take the nicotine lozenge in combination with either bupropion (a pill) or the nicotine patch, according to researchers at the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI).

Researchers found that one in five smokers visiting their primary-care physician were willing to make a quit attempt using quit-smoking medication made available at their own clinic pharmacy at no cost. In the study, 1,346 patients at 12 primary-care clinics in southeastern Wisconsin were randomized to five medication treatment groups. In addition, counseling was offered through a telephone quit line. This study was funded by a grant from the National Institute on Drug Abuse, part of the National Institutes of Health (NIH).

The findings are published in the December issue of the *Archives of Internal Medicine*. Quit rates at the six month follow-up for the five treatment groups were:

- nicotine lozenge and bupropion combined, 29.9%
- nicotine lozenge and patch combined, 26.9%
- nicotine lozenge, 19.9%
- nicotine patch, 17.7%
- bupropion, 16.8%

(more)

“While there is a small difference between the two combination therapies, the clear message here is that combining the lozenge with the nicotine patch or bupropion gives smokers the best chance to quit,” said Dr. Stevens Smith, lead researcher on the study. “The combination of bupropion and the lozenge was clearly superior to all three of the single-drug treatments.”

In this study, all participants received active medication. The findings are similar to a related NIH/UW-CTRI study published in the November issue of the *Archives of General Psychiatry* that compared the same five active-treatment groups to a placebo. That study, conducted with intensive counseling in a research setting, produced higher quit rates overall, with the combination of the patch and lozenge having the highest quit rates.

“We’re not surprised the quit rates were somewhat lower in our study,” Smith said, “given that we recruited patients in primary-care clinics. That’s the real world. While most patients accepted the medications, only about 40 percent were willing to call the telephone quit line for coaching support. We know smokers stand a much better chance of quitting if they get counseling in addition to medication.”

Smokers looking to quit this holiday season should talk to their doctor for support and medications, researchers said. They can also call the national tobacco quit line at 1-800-QUIT-NOW for free coaching. Many states offer free medication.

Tobacco use is still the leading killer of Americans with 440,000 deaths each year.

UW-CTRI is a nationally recognized research center founded in 1992 and is committed to determining the nature of tobacco dependence and developing evidence-based treatments to assist smokers. For more information, visit www.ctri.wisc.edu. The Center is a part of the University of Wisconsin School of Medicine and Public Health.

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