



ESTIMATED EFFICACY OF METHODS FOR TREATING TOBACCO USE AND DEPENDENCE

TREATMENT METHOD	Estimated Odds Ratio ^a (95% CI)	Estimated Abstinence Rate ^b (95% CI)
Behavioral interventions		
<i>Advice to quit</i>		
No advice to quit	1.0	7.9
Physician advice to quit	1.3 (1.1–1.6)	10.2 (8.5–12.0)
<i>Clinician intervention</i>		
No counseling by a clinician	1.0	10.2
Counseling by a non-physician	1.7 (1.3–2.1)	15.8 (12.8–18.8)
Counseling by a physician	2.2 (1.5–3.2)	19.9 (13.7–26.2)
<i>Format of smoking cessation counseling</i>		
No format	1.0	10.8
Self-help	1.2 (1.0–1.3)	12.3 (10.9–13.6)
Proactive telephone counseling ^c	1.2 (1.1–1.4)	13.1 (11.4–14.8)
Group counseling	1.3 (1.1–1.6)	13.9 (11.6–16.1)
Individual counseling	1.7 (1.4–2.0)	16.8 (14.7–19.1)
Pharmacotherapy		
Placebo	1.0	13.8
<i>First-line agents</i>		
Bupropion SR	2.0 (1.8–2.2)	24.2 (22.2–26.4)
Nicotine gum (6–14 weeks)	1.5 (1.2–1.7)	19.0 (16.5–21.9)
Nicotine inhaler	2.1 (1.5–2.9)	24.8 (19.1–31.6)
Nicotine lozenge (2 mg)	2.0 (1.4–2.8)	24.2 ^d
Nicotine patch (6–14 weeks)	1.9 (1.7–2.2)	23.4 (21.3–25.8)
Nicotine nasal spray	2.3 (1.7–3.0)	26.7 (21.5–32.7)
Varenicline (2 mg/day)	3.1 (2.5–3.8)	33.2 (28.9–37.8)
<i>Second-line agents^e</i>		
Clonidine	2.1 (1.2–3.7)	25.0 (15.7–37.3)
Nortriptyline	1.8 (1.3–2.6)	22.5 (16.8–29.4)
<i>Combination therapy</i>		
Patch (>14 weeks) + <i>ad lib</i> nicotine (gum or nasal spray)	3.6 (2.5–5.2)	36.5 (28.6–45.3)
Nicotine patch + bupropion SR	2.5 (1.9–3.4)	28.9 (23.5–35.1)
Nicotine patch + nortriptyline	2.3 (1.3–4.2)	27.3 (17.2–40.4)
Nicotine patch + nicotine inhaler	2.2 (1.2–3.6)	25.8 (17.4–36.5)

^a Estimated relative to referent group

^b Abstinence percentages for specified treatment method

^c A quitline that responds to incoming calls and makes outbound followup calls. Following an initial request by the smoker or via a fax-to-quit program, the clinician initiates telephone contact to counsel the patient.

^d One qualifying randomized trial; 95% CI not reported in 2008 Clinical Practice Guideline

^e Not approved by the U.S. Food and Drug Administration as a smoking cessation aid; recommended by the USPHS Guideline as a second-line agent for treating tobacco use and dependence.

Data from: Fiore MC, Jaén CR, Baker TB, et al. (2008). *Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline*. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service.