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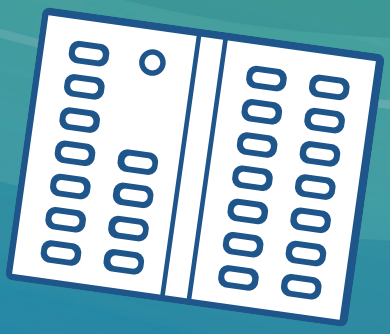
FACT SHEET

Varenicline (CHAMPIX®)



Varenicline is a prescription medicine intended to support tobacco cessation. It is supplied as an oral tablet.

How does it work?

Varenicline binds to the same receptors in the brain as nicotine. It has two effects:

- It will cause a modest activation of the 'reward system' in the brain. This helps reduce or prevent nicotine cravings and other withdrawal symptoms.
- It prevents nicotine from binding to the receptor. If someone uses tobacco while on varenicline, they will not experience the same 'benefits' from nicotine.

How is it taken?

- Varenicline should be started before the quit date – typically 7-10 days, but may be longer if the individual wishes. The dose is increased gradually over 7 days.

0.5 mg daily X 3 days	0.5 mg
0.5 mg twice daily X 4 days	0.5 mg, 0.5 mg
1 mg twice daily for the duration of therapy	1 mg, 1 mg

- Individuals with severe kidney dysfunction should receive a reduced dose (0.5 mg twice daily).
- Duration of therapy is typically 12 weeks, but individuals who have been successful may benefit from continued therapy.
- Varenicline should be taken after eating with a full glass of water (to decrease potential nausea).
- Nicotine replacement therapy can safely be used with varenicline and may increase chances of being successful.

What is covered by the Non-Insured Health Benefits (NIHB) Program?

330 tablets per year (6 month supply).

What are the potential adverse effects?

- **Nausea (20-40%)**
  Generally occurs early in therapy and often goes away. If persistent, can try reducing dose to 0.5 mg twice daily.
- **Vivid dreams (10%)**
  If the dreams are distressing or disturbing to sleep, may try reducing dose to 0.5 mg twice daily.
- **Psychiatric Effects**
  Agitation, depression and suicidal thoughts have been RARELY reported. People with a pre-existing mental health condition should be monitored.
- **Headache** and **insomnia** may also occur. If persistent, try a reduced dose (0.5 mg twice daily).

References
For a list of references, email tobacco@gov.nu.ca

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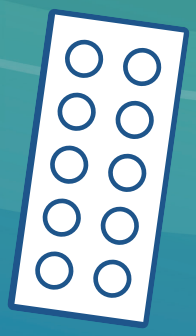
FACT SHEET

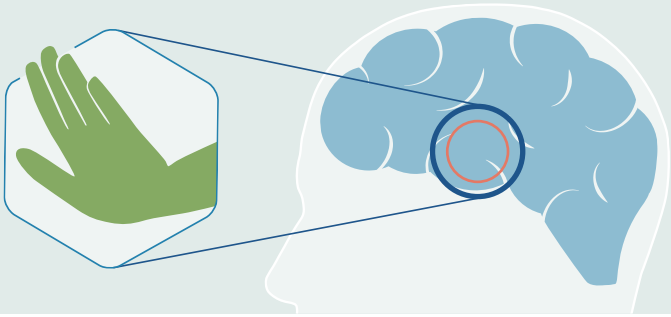
Bupropion SR (ZYBAN®)



Bupropion is a prescription medicine intended to support tobacco cessation.
It is supplied as an oral tablet. **Note:** Bupropion is also used as an antidepressant.

How does it work?

It is not fully understood, but is thought to be related to increased dopamine and norepinephrine within key areas of the brain. This can reduce or prevent cravings and other withdrawal symptoms associated with tobacco cessation.



How is it taken?

- Bupropion SR should be started before the quit date – typically 7-10 days. The dose is increased gradually over the first few days.

150 mg daily X 3 days	☀
150 twice daily for the duration of therapy (morning and early evening)	☀ ☾

- Duration of therapy is typically 12 weeks, but individuals who have been successful may benefit from continued therapy.
- Bupropion SR can be taken with or without food. The tablets should not be crushed or chewed.
- Bupropion SR can be used in combination with nicotine replacement therapy. Monitor for emergent hypertension.

What is covered by the Non-Insured Health Benefits (NIHB) Program?

360 tablets per year (6 month supply).

What are the potential adverse effects?

- May cause **dizziness** or **insomnia** (10-20%); **headache** (30%); **sweats, nausea, dry mouth or blurred vision** (all less than 20%); if these effects are persistent and/or intolerable – consider discontinuation of therapy.
- May cause **weight loss** (only a concern if weight loss is not desirable in the individual).
- **Psychiatric Effects** – Agitation, depression and suicidal thoughts have been RARELY reported. People with a pre-existing mental health condition should be monitored.
- Individuals predisposed to **seizures** should not receive bupropion SR (e.g. primary seizure disorder, alcohol withdrawal, head injury, post-stroke, anorexia).

References
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