

# THE CURE PROJECT

CURING TOBACCO ADDICTION IN GREATER MANCHESTER



The CURE project is a comprehensive tobacco addiction treatment service that is launching across the hospitals of Greater Manchester. Every member of staff can be part of the CURE project and can help save lives.

Tobacco is the single biggest cause of preventable death, illness, disability and social inequality in our society. **13 people everyday die in Greater Manchester from a smoking related illness.**

Treating tobacco addiction and helping smokers to stop is the single most cost effective intervention the NHS can provide.

All healthcare professionals can help a smoker to stop smoking. **You can save lives!**



## WHAT'S IN A CIGARETTE?



When a cigarette burns it releases a dangerous cocktail of over 5,000 different chemicals - many of which cause cancer



**1,3- BUTADINE**  
Used in rubber manufacturing



**CHROMIUM**  
Used to manufacture dye, paints and alloys



**CADMIUM**  
Used in batteries



**BENZENE**  
An industrial solvent, refined from crude oil



**ARSENIC**  
A poison



**POLYCYCLIC AROMATIC HYDROCARBONS**  
A group of DNA-damaging chemicals, including benzo(a)pyrene



**FORMALDEHYDE**  
Used as a preservative in science laboratories and mortuaries



**POLONIUM-210**  
A highly radioactive element

**BERYLLIUM**  
Used in nuclear reactors

## WHAT DO I NEED TO KNOW ABOUT TOBACCO ADDICTION?

**Tobacco addiction is a disease**

Nicotine causes the release of feel-good and calming hormones in the brain. Smokers must satisfy their cravings for these positive feelings or they suffer negative symptoms and anxiety.

However, nicotine is a relatively harmless substance outside of the brain. It is a very similar drug to **caffeine**. The catastrophic damage to every organ of the body caused by smoking tobacco is due to the **5000 additional chemicals in cigarette smoke.**

## HOSPITALS ARE A PIVOTAL BATTLEGROUND IN THE FIGHT AGAINST TOBACCO ADDICTION.....

Hospitals have a concentrated population of smokers – 25% of all hospital admissions in fact

Being admitted to hospital is a unique teachable moment when the link between illness and smoking is often made by the smoker and motivation to change is very high

Advice and help from a healthcare professional is one of the top reasons a smoker will try to quit smoking.



## WHAT CAN I DO?

All healthcare professionals can offer help to smokers by giving very brief advice

**ASK** - ask every single patient you interact with about their smoking status.

**ADVISE** - advise smokers that the best way to stop smoking is with support and medications, both are readily available at this hospital.

**ACT** - refer smokers to the CURE tobacco addiction specialist team

This is very brief advice and takes less than 30 seconds to do and can save a life! It focuses on a positive message and an offer of help that moves away from the negative message of telling a smoker they must stop.

## FOR HEALTHCARE PROFESSIONALS THAT CAN PRESCRIBE PHARMACOTHERAPY FOR TOBACCO ADDICTION FOLLOW THE CURE PATHWAY:

- C Conversation**  
Have the right conversation every time. Ask every single patient you interact with about their smoking status.  
**Follow the 3 CURE questions**
- U Understand**  
Understand the level of addiction.  
**Follow the 3 CURE questions**
- R Replace**  
Replace nicotine from tobacco with nicotine replacement therapy according to the CURE NRT protocol
- E Experts**  
Refer smokers to the CURE tobacco addiction specialist team

### REMEMBER TO ASK THE 3 CURE QUESTIONS:

1. Do you smoke currently?
2. How many cigarettes do you smoke a day?
3. How long have you been awake before you smoke your first cigarette?

## CURE NICOTINE REPLACEMENT THERAPY PROTOCOL

Low Level Addiction ≤ 10 Cigarettes/day	Moderate Level Addiction 10-19 Cigarettes/day	High Level Addiction ≥ 20 Cigarettes/day
<p><b>First line:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Nicotine lozenges 2mg as required <i>usual maximum 15 in 24 hours</i></li></ul> <p><b>Options if patient would prefer an alternative short acting NRT</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Nicotine inhalator 15mg/cartridge <i>maximum 6 cartridges in 24 hours</i></li><li><input type="checkbox"/> Nicotine microtabs 2mg as required <i>usual maximum 24 in 24 hours</i></li></ul> <p><b>Discuss Varenicline with all smokers - see varenicline section</b></p>	<p><b>Prescribe a long acting nicotine patch AND CONSIDER adding a short acting "reach for" nicotine replacement.</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Nicotine Patches 14mg/24 hour <i>(Smokes within 30 minutes of waking)</i></li><li><input type="checkbox"/> Nicotine Patches 15mg/16 hour <i>(Does NOT smoke within 30 minutes of waking)</i></li><li><input type="checkbox"/> Short acting nicotine replacement <i>(As per low level addiction pathway)</i></li></ul> <p><b>Advice for patients Patches</b></p> <p>Advise patients to use a clean &amp; hairless area of skin to apply the patch. Skin irritation can occur but is generally mild</p> <p>24 hour patches are ideal for patients that smoke within 30 minutes of waking but can cause sleep disturbance.</p> <p><b>Discuss Varenicline with all smokers - see varenicline section</b></p>	<p><b>Prescribe a long acting nicotine patch AND a short acting "reach for" nicotine replacement. Discuss the following options with the patient:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Nicotine Patches 21mg/24 hour <i>(Smokes within 30 minutes of waking)</i></li><li><input type="checkbox"/> Nicotine Patches 25mg/16 hour <i>(Does NOT smoke within 30 minutes of waking)</i></li><li><input type="checkbox"/> Short acting nicotine replacement <i>(As per low level addiction pathway)</i></li></ul> <p><b>Advice for patients Patches</b></p> <p>Advise patients to use a clean &amp; hairless area of skin to apply the patch. Skin irritation can occur but is generally mild</p> <p>24 hour patches are ideal for patients that smoke within 30 minutes of waking but can cause sleep disturbance.</p> <p><b>Discuss Varenicline with all smokers - see varenicline section</b></p>

**Top tip:** Encourage patients to use the short acting nicotine regularly e.g. on the hour every hour. Cravings for nicotine are extremely powerful and nicotine lozenges are weaker than cigarettes. Patients cannot overdose on nicotine except for causing mild symptoms such as light-headedness or nausea. However, under-dosing will affect how well NRT can alleviate cravings!

### PLEASE REMEMBER:

To complete the CURE mandatory training modules and learn more about tobacco addiction

If you able to prescribe then collect your 'CURE prompt card' that fits in your ID badge holder and contains the CURE treatment pathway

### CONTACT THE CURE TEAM: