EMBARGOED FOR RELEASE: 11 A.M. (ET) TUESDAY, FEBRUARY 17, 2015
Media Advisory: To contact Jon O. Ebbert, M.D., M.Sc., email Kelley Luckstein at luckstein.kelley@mayo.edu.

For Smokers Unable to Quit Abruptly, Medication Helps With Gradual Reduction and Improves Smoking Cessation

Among cigarette smokers not willing or able to quit smoking in the next month but willing to reduce with the goal of quitting in the next 3 months, use of the nicotine addiction medication varenicline for 24 weeks compared with placebo produced greater reductions in smoking prior to quitting and increased smoking cessation rates at the end of treatment and at 1 year, according to a study in the February 17 issue of *JAMA.*

In a telephone survey of 1,000 current daily cigarette smokers, 44 percent reported a preference to quit through reduction in the number of cigarettes smoked, and 68 percent would consider using a medication to facilitate smoking reduction. However, U.S. clinical practice guidelines recommend that smokers quit abruptly even though only 8 percent of smokers report being ready to quit in the next month. Developing effective interventions to achieve tobacco abstinence through gradual reduction could engage more smokers in quitting, according to background information in the study.

Jon O. Ebbert, M.D., M.Sc., of the Mayo Clinic, Rochester, Minn., and colleagues randomly assigned 1,510 cigarette smokers to 24 weeks of varenicline or placebo with a reduction target of 50 percent or more in number of cigarettes smoked by 4 weeks, 75 percent or more by 8 weeks, and a quit attempt by 12 weeks. The study was conducted at 61 centers in 10 countries. The participants were smokers who were not willing or able to quit smoking within the next month but willing to reduce smoking and make a quit attempt within the next 3 months.

The varenicline group (n = 760) had significantly higher continuous abstinence rates during weeks 15 through 24 than the placebo group (n = 750) (32.1 percent vs 6.9 percent) and during weeks 21 through 24 (37.8 percent vs 12.5 percent) and weeks 21 through 52 (27.0 percent vs 9.9 percent).

At week 4, 47.1 percent of participants treated with varenicline reduced the number of cigarettes smoked per day compared with baseline by 50 percent or more or abstained completely compared with 31.1 percent of participants treated with placebo; after 8 weeks, 26.3 percent participants in the varenicline

group reduced smoking by 75 percent or more from baseline or abstained compared with 15.1 percent participants in the placebo group.

Serious adverse events occurred in 3.7 percent of the varenicline group and 2.2 percent of the placebo group. Varenicline was not associated with significant increases in treatment discontinuations due to adverse events.

"The U.S. Public Health Service and other guidelines recommend smokers set a quit date in the near future and quit abruptly. However, many smokers may be unwilling to commit to a quit date at a clinic visit. Because most clinicians are likely to see smokers at times when a quit date in the next month is not planned, the current study indicates that prescription of varenicline with a recommendation to reduce the number of cigarettes smoked per day with the eventual goal of quitting could be a useful therapeutic option for this population of smokers. The approach of reduction with the goal of quitting increases the options for a clinician caring for a smoker," the authors write.
(doi:10.1001/jama.2015.280; Available pre-embargo to the media at http://media.jamanetwork.com)

Editor's Note: This study was funded by Pfizer. Please see the article for additional information, including other authors, author contributions and affiliations, financial disclosures, etc.

# # #