Nicotine Replacement Medications					
Medication	What It Does	How To Take It	How Long to Use It	Precautions/ Contraindications	Other Things to Consider
Nicotine gum*	improves absorption of	gum. If <25 cigarettes per day, use 2 mg gum. For best absorption, careful chewing technique is advised: chew until taste appears, then park gum in the cheek until taste disappears. Repeat for 30 minutes.		Tends to adhere to dental work more than regular gum and may not be suitable for people with braces, dentures, bridges, or significant dental restorations; also not recommended for patients with temporomandibular joint disease (TMJ).	Gum may be a good option for people who desire oral stimulation during cessation, identify boredom as a trigger for smoking, or are concerned about weight gain after quitting.
Nicotine lozenge*	Works similar to nicotine gum, providing nicotine in a tablet that is dissolved in the mouth and absorbed through the lining of the mouth.	If you smoke within 30 minutes of awakening, use 4 mg lozenges. Other smokers use 2 mg lozenges. Place lozenge in mouth and allow it to dissolve for 30 minutes. May use 1 to 2 lozenges per hour (up to 20 per day) in response to the urge to smoke.	Continue up to 12 weeks. Use for 6 weeks; then reduce dose over the second 6 weeks.		Providing nicotine in a lozenge makes it easier to use and it can be used with dental appliances.
Nicotine patch*	Delivers a continuous low level of nicotine across the skin during a 24-hour period.	Place patch on a non-hairy area. Change patch daily, rotating placement to avoid skin irritation. If you weigh less than 45 kg, or smoke fewer than 10 cigarettes/day, start at 14 mg/day. Otherwise, start at 21 mg/day for 4 to 6 weeks, gradually tapering to 14 mg/day and then 7 mg/day over 2 to 4 weeks.		People with skin conditions (psoriasis, eczema, atopic dermatitis) should consider other products.	The patch may be a good option for most smokers to start with, and can be used along with other nicotine-replacement medications as needed in response to the urge to smoke (called the "patch plus" option.)
Nicotine nasal spray	Delivers an water-based solution of nicotine to the lining of the nose. It produces a more rapid rise in nicotine than orally-absorbed replacement products (gum, lozenge, inhaler); therefore, it produces a peak nicotine concentration in the blood within 10 minutes.		Continue up to 3 months.	Many people have poor tolerance to the spray due to nasal and throat irritation, rhinitis, sneezing, and tearing, although it typically goes away after the first week of use.	
Nicotine inhaler	A nicotine-containing cartridge is attached to a mouthpiece. When inhaled, nicotine vapor is released and absorbed through the mucosa of the mouth and throat. The vapor does not reach the lungs; instead the inhaler acts similarly to gum or lozenges.	cartridges per day for the first 6 to 12 weeks. Then gradually decrease dose over the next 6 to 12 weeks.	Continue up to 12 or 24 weeks, decreasing dose gradually after 6 to 12 weeks.	Irritation of the mouth and throat during early stages of use, which sometimes persists. Inhaled nicotine may cause bronchospasm, so it is not recommended for people with a history of severe airway reactivity.	