

# The Carlat Psychiatry Report

## NICOTROL Nasal Spray Fact Sheet

**Manufacturer:** Pfizer

**Indications:**

- FDA approved in 1996 for smoking cessation.

**Mechanism:** Delivers nicotine intra-nasally without tars or other carcinogenic substances.

**Efficacy:** Quit rates about 20% after one year, or double the rate of placebo.

**Dosing:**

- Supplied as plastic bottles containing 10 mg/mL nicotine. Each bottle contains 10 mL, yielding about 200 sprays (0.5 mg of nicotine/spray), or 100 doses (a “dose” is considered two sprays-- one to each nostril).
- Manufacturer recommends starting with one to two doses per hour as needed for cigarette cravings. The maximum recommended usage is 5 doses per hour, and 40 doses per day.
- Note that heavy smokers may well use the maximum amount, meaning that they would need a new bottle every two to three days. At over \$100/bottle, this adds up quickly.
- Strategies for tapering down use include using half a dose at time (one spray), decreasing frequency of dosing, and simply choosing a quit date after which the spray will not be used at all
- Often used in combination with the nicotine patch, although safety and efficacy data for this approach are lacking.

**Side Effects:**

- Common: hot, peppery feeling in the back of the throat or nose, sneezing, coughing, watery eyes, runny nose. Symptoms of nicotine intoxication possible (especially if patients smoke while using the spray), including dizziness, nausea, diarrhea.

**Pharmacokinetics:**

- Onset of action in about 5 minutes.
- Half-life 1-2 hours.
- Absorption is reduced by about 20% in people with rhinitis due to colds or allergies.

**Drug-drug interactions:**

- Since tobacco induces the metabolism of clozapine, Zyprexa (olanzapine), and caffeine, quitting smoking may cause a rise in levels of these compounds, necessitating a lower dosage.

**Laboratory monitoring:**

- None required.