

Bupropion (Zyban) supply disruption: update and guidance on alternatives for clients

GSK has conducted testing on the drug bupropion (Zyban) and the results indicate that there is the potential for the presence of nitrosamine impurities. As a result, on 1st December 2022 GSK placed an immediate hold on the batch release and distribution of Zyban 150 mg prolonged release tablets. GSK has initiated a root cause investigation to determine the best course of action and will provide an update when available.

We understand that at this point it's not possible to provide an indication of timings due to the complexity of the investigation.

New clients

Any new clients starting a quit attempt and interested in using Zyban should be advised to use an alternative stop smoking product rather than begin a course of Zyban at this time. Nicotine replacement therapy (NRT), specifically combination NRT, and nicotine-containing vapes (ecigarettes), are effective quit aids.

Clients who used Zyban in the past

Some ex-clients who used Zyban as part of their quit attempt in the past may contact you with concerns over nitrosamines.

Zyban was withdrawn because batches of the medication were found to have possible nitrosamine impurities present. Some nitrosamines may increase the risk of cancer if people are exposed to them above acceptable levels and over long periods of time. It is likely that the increased cancer risk from Zyban containing these nitrosamine impurities is very low given the limited time that someone would take Zyban.

Volatile (harmful) nitrosamines have been detected in some cured meat (primarily bacon), beer, cheeses and cosmetics. It is also worth remembering that **tobacco smoke contains high levels of nitrosamines called Tobacco-Specific Nitrosamines (TNAs) that are very potent carcinogens**.

Clients currently using or continuing to use Zyban

There may be clients currently using Zyban in their quit attempt, and also possibly a small number of clients who are still using Zyban to help them maintain abstinence (i.e. they are using it long term), who will need help to use an alternative stop smoking medication. Some of these clients may no longer be receiving support from you but may get in contact once they become aware that there are no further supplies of Zyban available to them.

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There is little research evidence on switching from Zyban to an alternative stop smoking aid, but many stop smoking practitioners will have been through this process with clients who have experienced side effects with Zyban and have wanted to use nicotine replacement therapy (NRT) or a nicotine-containing vape instead.

NRT is a good alternative that can offer almost immediate relief of withdrawal symptoms and urges to smoke. NRT treatment may be with a single product or in the form of a patch in combination with a faster-acting product such as the nicotine lozenge, nasal spray or mouth spray. This switch can be done immediately without any safety issues, in fact Zyban and NRT can be taken together in the short term. This is important because Zyban can take a few days to be eliminated (clear) from the body; clients should start NRT immediately upon stopping Zyban, or shortly before their supply runs out so as to familiarise themselves with their NRT. Clients should be encouraged to use enough NRT to maintain abstinence from smoking. They should be reassured that NRT is an evidence-based stop smoking medication and that the change of treatment plan should in no way disadvantage them in their attempt to quit smoking. In fact, combination NRT is more effective as a stop smoking medication than Zyban.

Some clients may choose to try **vaping** (either alone or in combination with NRT) as an alternative to Zyban and if this is the case, they should be encouraged to see this as supportive of their attempt to maintain abstinence. **Nicotine-containing vapes are more effective as a stop smoking aid than Zyban**.

This could be an opportunity to try direct supply of vapes (either as a one-off starter kit with the client purchasing further supplies for themselves, or as a longer course). A number of Stop Smoking Services already do this, with good results, and advice is available should you want to explore this option. As with NRT, **clients should use enough nicotine to prevent relapse to smoking** and should buy a product from a reputable retailer, taking advice on what to buy and how to use it. If they remain smokefree, they can be counted as a quit on your monitoring system. It is important to code this correctly so that the use of an Unlicensed Nicotine-Containing Product, with or without NRT, can be reflected in national data collection.

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