



Frequently Asked Questions

Switching from varenicline (Champix) to an alternative stop smoking medication

It is worth remembering that we simply don't have scientific evidence for this clinical situation, we're making a best judgement call in response to most questions.

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1. Is a generic version of Champix available in the UK?

No. Pfizer's patent for varenicline expired in September 2021 but at the moment no direct alternatives are available.

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2. Can new clients who have yet to make a quit attempt start a course of bupropion (Zyban)?

Yes. Bupropion (Zyban) is a treatment option as well as nicotine replacement therapy (NRT) and vaping that were mentioned in the NCSCT guidance. For the sake of accuracy, we've now added Zyban to our guidance:

“Given the uncertainty around supply of Champix, any new clients starting a quit attempt at this time should be advised to use an alternative stop smoking product (e.g. NRT, Zyban or a vape) rather than begin a course of Champix.”

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3. If person recently quit smoking using Champix but returned to smoking, how long would they have to wait before they could use Zyban to help them quit again?

You haven't defined 'recently'. This is less of a pharmacological issue and more to do with motivation as we want to avoid people having extended periods of quitting-

relapsing-quitting again in quick succession without chance for reflection and re-boosting motivation.

Pharmacologically speaking, I don't know of any minimum clearance period before commencing bupropion. Although personally speaking, given the side effect profile of bupropion I'd recommend combination NRT.

4. How long does it take for Champix to leave your system once a person has stopped taking it?

The half-life of varenicline is 24 hours and so it will soon be fully eliminated from the body, within four days.

5. Could someone switch to using licenced NRT products instead of Champix mid-way through their quit attempt?

Yes, absolutely. If supplies of varenicline are being as seriously interrupted as we anticipate, then this is likely to need to be done with a number of your patients. See our guidance on switching from Champix.

6. I have said to our practitioners that clients can begin taking NRT as soon as they receive it and straight after stopping Champix. I'm suggesting that they can reduce the dose of Champix to 1mg per day instead of 1mg twice a day, but only if in the last three weeks of the course, so they can eek out whatever tablets they have left.

That's correct, there is no issue with taking NRT immediately after stopping varenicline. In fact, there isn't an issue taking NRT whilst using varenicline.

I'm not sure of the benefit of halving the daily dose of varenicline without complimenting it with NRT as it may reduce its effectiveness and thus put clients at a greater risk of relapse. You may be right, but I'd continue using the full dose of Champix and, if further supplies aren't available, commence combination NRT. Clients could even start to familiarise themselves with their chosen NRT products prior to ceasing varenicline.

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7. I am thinking of advising our practitioners that the dose of NRT that clients switch to from Champix should not be the *high strength* if the person has been quit for several weeks, as they are likely to get nausea and headaches. Moreover, let it be client led and tailored to the individual.

The most important thing is that clients don't 'underdose' with NRT, experience withdrawal symptoms and strong urges to smoke and relapse to smoking.

Nausea and headaches caused by nicotine 'overdose' are easily remedied – simply reduce NRT dose. Relapse to smoking is more difficult to manage and is potentially life threatening. You are right though that it should be client led, but we want people to use enough NRT so that they do not experience withdrawal symptoms and urges to smoke.
