

Three major smoking cessation therapies pose no serious heart risks

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Three major types of smoking cessation therapies don't increase the risk of heart attack, stroke or heart-related death, according to research published in the American Heart Association journal *Circulation*.

In recent years, there has been concern that some [smoking cessation](#) products may have serious cardiovascular risks. But in the largest analysis of side effects (63 clinical trials and 30,508 people), serious heart events didn't increase with nicotine replacement gums and patches or the nicotine addiction treatment varenicline (Chantix), and the antidepressant bupropion (Wellbutrin) protected against serious heart events.

"Undoubtedly, the benefits of quitting smoking outweigh any potential risks from smoking cessation therapies," said Edward J. Mills, Ph.D., M.Sc., study co-author and associate professor of medicine at Stanford University and Canada Research Chair at the University of Ottawa.

Smoking cessation is associated with improved cardiovascular health, increased life expectancy, improved quality of life and reduced healthcare costs for smoking-associated conditions.

Nicotine replacement therapy via patch or gum increased the risk of minor heart symptoms such as a rapid or irregular heartbeat, researchers said.

"These more minor risks are well known to clinicians and usually pass with time," Mills said. "They occur most often when people are taking [nicotine replacement therapy](#) and smoking at the same time, which is a bad idea."

Previously, the researchers found that combination [nicotine replacement](#) therapy—wearing a patch and using [nicotine gum](#) when there is the urge to smoke—may be more effective but lead to more side effects than the gum or patch alone.

Most patients in the analysis were relatively healthy, so the results may not be true for everyone.

"It's possible that the risk factors might be different in people with multiple diseases," Mills said. "Patients should discuss with their healthcare provider any potential risk factors that they may have developed from their smoking history. For patients who have chronic lung disease or other associated cardiovascular risks, clinicians should determine which smoking cessation aid to use by their risk profiles."

Provided by American Heart Association

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