

Tips for working with young people experiencing nicotine dependence

This resource is a guide to managing nicotine dependence. It is for workers who support young people who are likely nicotine dependent, through smoking tobacco and/or vaping, and are ready to make changes to their use. The resource should be used as part of a holistic treatment approach.

What is nicotine dependence?

Nicotine dependence is when a person requires nicotine to avoid experiencing withdrawal symptoms. Examples of nicotine withdrawal symptoms include:

- Urges/cravings to smoke and/or vape
- Difficulty sleeping
- Difficulty concentrating
- Feeling irritable or restless
- Changes in appetite
- Feeling anxious, sad, or depressed

A screening tool like the one below can be used to identify if a young person is dependent on nicotine. Answering “yes” to any of the questions indicates a level of nicotine dependence.

1. Have you ever tried to quit smoking and/or vaping, but couldn't?
2. Do you smoke and/or vape now because it is really hard to quit?
3. Have you ever felt like you were addicted to tobacco and/or vapes?
4. Do you ever have strong cravings to smoke and/or vape?
5. Have you ever felt like you really needed a cigarette and/or vape?

When you tried to stop smoking or vaping (or when you haven't used tobacco/vapes for a while):

6. Is it hard to keep from smoking and/or vaping in places where you are not supposed to, like school?
7. Did you find it hard to concentrate because you couldn't smoke or vape?
8. Did you feel more irritable because you couldn't smoke or vape?
9. Did you feel a strong need or urge to smoke or vape?
10. Did you feel nervous, restless or anxious because you couldn't smoke or vape?

(Adapted Hooked on Nicotine Checklist)¹

In this document smoking refers to any tobacco smoking including cigarettes, roll your own (tobacco) and/or when tobacco is mixed with cannabis.

What is the treatment for nicotine dependence in young people?

Behavioural strategies and counselling

It is recommended that treatment for young people starts with behavioural and counselling strategies.² Examples include:

- have a sweet snack when experiencing a craving (e.g. lollypop or jellybean)
- dispose of vapes/tobacco products²
- avoid places where friends smoke and/or vape³
- make a list of reasons to not smoke and/or vape²
- delay first puff of the day⁴
- use distraction techniques (e.g. text a friend)
- explore ways to manage triggers and cravings, and
- develop a quit plan.²

Quitline can provide individualised behavioural strategies and counselling by phone.

Dovetail's [VapeCheck](#) is a brief intervention tool to guide workers, and includes some helpful behavioural tips and strategies.

Nicotine replacement therapy





Nicotine replacement therapy (NRT) are pharmaceutical products available in several forms, strengths and flavours. NRT works by replacing some of the nicotine a person usually gets from smoking and/or vaping. This reduces a person's nicotine withdrawal symptoms, including cravings.

Young people may require more support than adults. Explaining how to use NRT effectively can reduce side-effects, improve NRT absorption, and increase the chances that the young person continues to use NRT.⁵ Ensuring a young person has access to the full range of NRT (forms and flavours) will increase the chances they can find an acceptable treatment regime.⁵

In adults, combination NRT, that is a patch (long acting) plus a form of short-acting NRT (e.g. gum) increases successful quit rates.⁶ For young people, a single product, based on their preference may be adequate. For young people who are smaller (e.g. those less than 45 kg), and those who have lower levels of nicotine dependence, it is recommended starting on a lower dose e.g. use 2mg gum instead of smoking and/or vaping and when cravings and withdrawal symptoms occur throughout the day.² It is important to check that the chew and park method (explained on the next page) is being used. There is no need to calculate the level of nicotine use from smoking and/or vaping. It is recommended NRT be used for 12 weeks.⁷

What does the evidence say?

NRT is proven to improve smoking quit rates for adults and some studies have shown it can also help young people to quit.^{2,9} Evidence regarding vaping is still emerging but preliminary studies suggest NRT can also be effective in helping adults to quit vaping.^{10,11} Given this, and in the absence of evidence-based treatment, experts suggest NRT could be helpful for young people who vape. Therefore, where a young person has been unable to quit smoking or vaping with behavioural support alone, *NRT could be offered in combination with behavioural strategies or counselling.*²

Available NRT products			
Long-acting product	Benefits	Tips	Quit HQs short videos on using NRT
Patches 	<ul style="list-style-type: none"> Long acting – works for up to 24 hours Discreet – good for use at school or work Can be used in combination with short-acting NRT if single product is not adequate 	<ul style="list-style-type: none"> Apply just before bed as nicotine from patches take 6-12 hours to reach peak levels in blood Apply to dry, hairless skin Adhesive can cause skin irritation so change location of patch each day 	Video - How to use nicotine patches
Short-acting products	Can be used alone or in combination with patches, to help with cravings	To maximise nicotine absorption and reduce side-effects like hiccups and sore throat, avoid swallowing nicotine, using strategies outlined below:	
Gum 	<ul style="list-style-type: none"> Available in 2mg and 4mg strengths Available in a range of flavours 	<ul style="list-style-type: none"> Use the chew and park method: Chew briefly until peppery flavour (nicotine) is released, then “park” between cheek and gum; chew briefly when next experiencing cravings 	Video - How to use lozenges and gum
Lozenges 	<ul style="list-style-type: none"> Available in 2mg and 4mg strengths Available in a range of flavours and sizes 	<ul style="list-style-type: none"> Do not chew or swallow Allow to slowly dissolve in mouth e.g. under the tongue 	
Nicotine spray 	<ul style="list-style-type: none"> Quickest acting NRT Can be bought in multi-packs to save money. 	<ul style="list-style-type: none"> Spray under tongue or onto inside of cheek; avoid spraying on lips. Due to intensity of flavour, try an initial taste test on a finger first Hold spray in mouth for 1-2 minutes 	Video - How to use nicotine spray

Who can use NRT?

NRT is safe and can be used by anyone who is nicotine dependent.⁶ The Royal Australian College of General Practitioners guideline recommends NRT use for young people 12 years and over.⁶ NRT use in children younger than 12 years requires closer medical supervision.⁷ NRT may also be used as a harm reduction strategy,⁶ to manage cravings. For example, to assist a young person to get through the school day without smoking and/or vaping (thereby reducing risk of education-related consequences such as school exclusion).¹²

How to access NRT for a young person?

All forms of NRT are available over the counter in pharmacies and supermarkets. Additionally, patches are available on the Pharmaceutical Benefit Scheme (PBS) when prescribed by a doctor as part of a quit plan. Patches may be free when prescribed under the Closing the Gap scheme for Aboriginal and Torres Strait Islander people.⁶ In Queensland, Quitline may provide a course of NRT for young people if engaged in their smoking and/or vaping cessation program.

Can someone vape and/or smoke while using NRT?

Vaping and/or smoking while wearing a patch is safe¹³ – there is no need to remove it. Keeping a patch on helps prevent a lapse from becoming a full relapse.¹³ Encourage young people to consider using an oral NRT before vaping and/or smoking. There is some evidence that the use of patches prior to quitting, can improve quit rates.¹⁴

Other medications

Varenicline or Bupropion are smoking cessation medications but are not approved for young people under 18 years old.⁶

Vapes

Vapes are available in pharmacies for the treatment of nicotine dependence. For more information about accessing therapeutic vapes, please see Dovetail's [Nicotine Vaping Products and the Law](#) or the [Therapeutic Goods Association Vaping Hub](#)

Where to find more resources for workers

- Dovetail's [Vaping Toolkit](#)
- Insight's [Coping with cravings](#) handout
- Insight's eLearning: [Screening and Brief Interventions for Smoking](#)

Resources for young people

- MyQuitbuddy app for smoking and/or vaping
- Quitline: access to NRT, counselling, behavioural strategies, and tips on using NRT effectively Ph 137848 (*Tip: It can be helpful for the worker to call during session with a young person*)
- QuitHQ Videos – [Quit tips](#)

References

1. Chaffee BW, Halpern-Felsher B, Jacob P 3rd, St Helen G. Biomarkers of nicotine exposure correlate with the Hooked on Nicotine Checklist among adolescents in California, United States. *Addict Behav.* 2022 May;128: 107-235. doi: 10.1016/j.addbeh.2022.107235.
2. Rosen, J.B. & Sockrider, M. (2023). *UptoDate: Management of smoking and vaping cessation in adolescents.* Wolters Kluwer.
3. Tran DD, Prince MA, Fitzke RE, Ring C, Barrington-Trimis J, Pedersen ER. Preliminary development of the protective behavioral strategies for vaping scale. *Addict Behav.* 2023 Sep;144:107728. doi: 10.1016/j.addbeh.2023.107728. Epub 2023 Apr 17. PMID: 37121086.
4. Wilson, H.H.K. & Zwar, N. (2024). Assisting young people aged 12-25 years to cease e-cigarette use in general practice. *Australian Journal of General Practice*, 53(5). <https://www1.racgp.org.au/ajgp/2024/may/assisting-young-people-aged-12-25-years-to-cease-e>
5. Mendelsohn, C.P. (2013). Optimising nicotine replacement therapy in clinical practice, *Australian Family Physician*, Volume 42, issue 5 May 2013.
6. RACGP. (2021). Supporting smoking cessation: A guide for health professionals
7. State of Queensland (Queensland Health). (2021). Smoking Cessation Clinical Pathway. Queensland Government.
8. Lindson et al., (2023). Pharmacological and electronic cigarette interventions for smoking cessation in adults: component network meta-analyses. *Cochrane Database Systematic Review* 12(9); doi: 10.1002/14651858.CD015226.pub2.
9. Myung SK, Park JY. Efficacy of Pharmacotherapy for Smoking Cessation in Adolescent Smokers: A Meta-analysis of Randomized Controlled Trials. *Nicotine Tob Res.* 2019 Oct 26;21(11):1473-1479. doi: 10.1093/ntr/nty180.
10. Palmer AM, Carpenter MJ, Rojewski AM, Haire K, Baker NL, Toll BA. (2023). Nicotine replacement therapy for vaping cessation among mono and dual users: A mixed methods preliminary study. *Addict Behav.* 139:107579. doi: 10.1016/j.addbeh.2022.107579.
11. Webb, J., Lin, Y., Ang, A., Michero, D., Majeed, A., Eisingerich, A. & Glasner, S. (2023). Feasibility and Preliminary Outcome of a Mobile Intervention Combining Cognitive Behavioral Therapy, Virtual Coaching and Nicotine Replacement Therapy for Nicotine Vaping Cessation. *Telemedicine Reports*, 4(1). <https://doi.org/10.1089/tmr.2023.0009>
12. Dovetail. (2022). Effective responses to vaping in schools. Available from www.insight.qld.gov.au/dovetail
13. Bullen, C., Howe, C., Lin, R. B., Grigg, M., Laugesen, M., McRobbie, H., Glover, M., Walker, N., Wallace-Bell, M., Whittaker, R., & Rodgers, A. (2010). Pre-cessation nicotine replacement therapy: pragmatic randomized trial. *Addiction* (Abingdon, England), 105(8), 1474–1483. <https://doi.org/10.1111/j.1360-0443.2010.02989.x>
14. Stead LF, Perera R, Bullen C, et al. Nicotine replacement therapy for smoking cessation. *Cochrane Database Syst Rev* 2012, Issue 11. Art. No.: CD000146. DOI: 10.1002/14651858.CD000146.pub4.