

[ScienceWatch Home](#)[Inside This Month...](#)[Interviews](#)[Featured Interviews](#)[Author Commentaries](#)[Institutional Interviews](#)[Journal Interviews](#)[Podcasts](#)[Analyses](#)[Featured Analyses](#)[What's Hot In...](#)[Special Topics](#)[Data & Rankings](#)[Sci-Bytes](#)[Fast Breaking Papers](#)[New Hot Papers](#)[Emerging Research Fronts](#)[Fast Moving Fronts](#)[Research Front Maps](#)[Current Classics](#)[Top Topics](#)[Rising Stars](#)[New Entrants](#)[Country Profiles](#)[About Science Watch](#)[Methodology](#)[Archives](#)[Contact Us](#)[RSS Feeds](#)

scienceWATCH[®].com

TRACKING TRENDS & PERFORMANCE IN BASIC RESEARCH

[Interviews](#)[Analyses](#)[Data & Rankings](#)

2008 : November 2008 - Fast Moving Fronts : John R. Hughes

FAST MOVING FRONTS - 2008

November 2008



John R. Hughes talks with *ScienceWatch.com* and answers a few questions about this month's Fast Moving Front in the field of Social Sciences, general.



Article: A meta-analysis of the efficacy of over-the-counter, nicotine replacement

Authors: Hughes, JR;Shiffman, S;Callas, P;Zhang, J

Journal: TOB CONTROL, 12 (1): 21-27 MAR 2003

Addresses: Univ Vermont, Dept Psychiat, 38 Fletcher Pl, Burlington, VT 05401 USA.

Univ Vermont, Dept Psychiat, Burlington, VT 05401 USA.

Pinney Associates, Pittsburgh, PA USA.

Univ Pittsburgh, Pittsburgh, PA USA.

SW: Why do you think your paper is highly cited?

Many clinicians believe counseling essential to overcoming a drug dependency or for a medication treatment to work; however, studies showed that requiring counseling to obtain nicotine replacement therapy (NRT)—i.e., nicotine gum, patch, etc.—was a major barrier for most smokers. Thus, several studies were undertaken to see if over-the-counter (OTC) NRT would still be effective. The paper showed that NRT medications used for self-treatment as OTCs were not only effective, but equally effective as getting NRT by prescription from a doctor.

SW: Does it describe a new discovery, methodology, or synthesis of knowledge?

The paper uses a well-accepted statistical method (meta-analysis) to collate results across studies of whether OTC NRT is more effective than OTC placebo and as effective as NRT plus brief counseling. The studies examined were relatively novel "real-world" simulations; i.e., smokers obtained NRT from a storefront and were given no advice at all.

SW: Would you summarize the significance of your paper in layman's terms?

The analysis showed that counseling is not essential for the NRT to work. OTC NRT was not less effective than NRT plus brief counseling from MDs (probably because such counseling was very minimal). The implication is that smokers can look to NRT to help them quit, even if they do not participate in counseling. However, counseling adds further benefit, so smokers are advised to avail themselves of counseling as well.

SW: How did you become involved in this research and were there any particular

"The research encourages national and global treatment policies to promote the use of OTC NRT in non-medical settings."

problems encountered along the way?

The initiative to establish the viability of OTC NRT was driven by being discouraged at the low rates of use of NRT and looking for ways to make it easier to obtain NRT. Demonstrating that NRT could work on its own in real-world settings required studies that had minimal requirements but could still be valid.

SW: Where do you see your research leading in the future?

We and others are looking at novel ways to use NRT to help smokers; e.g., to reduce the total number cigarettes-per-day among smokers not able to quit, to reduce first and then quit, to use NRT prior to quitting, to use NRT to decrease craving and withdrawal when smokers cannot smoke, and combining different NRT products. Others are examining new nicotine products; e.g., a nicotine product that delivers a rapid bolus of nicotine to the lung as do cigarettes.

SW: Do you foresee any social or political implications for your research?

The research encourages national and global treatment policies to promote the use of OTC NRT in non-medical settings. Our finding that OTC NRT is effective has been challenged by correlational survey studies in "real world" settings which concluded that OTC NRT does not work. These studies found that smokers who choose to use OTC NRT do worse than those who choose to quit without NRT.

Our recent work suggests OTC NRT looks worse, not because it is not effective, but because those who feel the need to use OTC NRT to quit are more addicted to nicotine, have failed more in the past, etc. Our analysis in this paper shows that OTC NRT can help people quit smoking, which suggests that public health authorities should promote quitting with NRT, even when smokers are not willing to enter counseling.

John Hughes, M.D.
Professor
Department of Psychiatry
University of Vermont
University Health Center
Burlington, VT, USA

Keywords: nicotine replacement therapy, a well-accepted statistical method, meta-analysis, real-world settings.



[back to top](#) 

2008 : November 2008 - Fast Moving Fronts : John R. Hughes

[Scientific Home](#) | [About Scientific](#) | [Site Search](#) | [Site Map](#)

[Copyright Notices](#) | [Terms of Use](#) | [Privacy Statement](#)