

## Drug Interactions With Tobacco Smoking

## Drugs that have clinically significant interactions with tobacco smoking;

	<b>Clinical Relevance</b>
Aminophylline	HIGH
Theophylline	HIGH
◆ Clozapine	HIGH
<ul> <li>◆ Erlotinib</li> </ul>	HIGH
<ul> <li>◆ Olanzapine</li> </ul>	HIGH
◆ Riociguat	HIGH
Chlorpromazine	Moderate
◆ Flecainide	Moderate
◆ Methadone	Moderate
◆ Warfarin	Moderate

High: Documented pharmacokinetic interaction with clinically important effects in a number of patients.

Moderate: Documented pharmacokinetic interaction with minor clinical effects, or isolated reports of clinically important effects.

The above list does not include drugs which have a low risk.

It does not consider interactions with pharmacological agents used for smoking cessation, nicotine replacement therapy, or pharmacodynamics interactions.

## Most interactions between drugs and tobacco smoking are not clinically significant.

- When giving smoking cessation advice, be aware of a small number of drugs, in particular aminophylline, theophylline, clozapine, erlotinib, olanzapine and riociguat, which may require dose adjustment or increased monitoring when smoking status is altered.
- Close monitoring of plasma levels (where useful), clinical progress and adverse effect occurrence and severity is essential when patients change their smoking status.
- Patients taking narrow-therapeutic-index drugs should be monitored closely when any lifestyle modification is made.
- If the affected drug is prescribed under the supervision of a specialist, their input should be sought if the patient changes their smoking status.
- Since most interactions are due to components of tobacco smoke and not due to nicotine, these interactions are not expected to occur with nicotine replacement therapy or e-cigarettes (vapes).

Follow the link below for more comprehensive information:

https://www.sps.nhs.uk/articles/what-are-the-clinicallysignificant-drug-interactions-with-tobacco-smoking/