

Drug Interactions With Tobacco Smoking

Drugs that have clinically significant interactions with tobacco smoking;

	Clinical Relevance
Aminophylline	HIGH
Theophylline	HIGH
◆ Clozapine	HIGH
 ◆ Erlotinib 	HIGH
 ◆ Olanzapine 	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/