Alternative Smoking Cessation Aids: A Meta-analysis of Randomized Controlled Trials

Conclusion: Acupuncture and hypnotherapy both appear useful in smoking cessation. Additional evidence is needed to determine whether alternative interventions are as efficacious as pharmacologic therapies.

Summary: Smoking is estimated to cost the U.S. economy $210 billion each year and is the most preventable cause of morbidity and mortality in North America (Chandler MA, Renard SI, Chest 2010;137: 428-35; Rehm J et al, Stud Alcohol Drugs 2007;68:886-95). There are 51 million smokers in North America, and each year half of them attempt to quit at least for 1 day. (MMWR 2009;58:1227-32). Less than 50% of smokers attempting smoking cessation use pharmacologic aids such as nicotine replacement therapy, bupropion, or varenicline. Alternative methods of smoking cessation include acupuncture, stimulating specific acupoints on the ear, hypnotherapy, inducing an altered state of consciousness broadly enabling adherence to smoking cessation, aversive smoking and aversion smoking therapy consisting of rapidly taking a large number of pills in a short period of time. Between 30% and 40% of smokers have reported an interest in trying acupuncture as an alternative therapy, but these alternative aids are costly, with the total price of each therapy ranging from $400 to $1000 (Sood A et al, N Engl J Med 2011;364:1054-64). Between 30% and 40% of smokers have reported an interest in trying acupuncture as an alternative therapy, but these alternative aids are costly, with the total price of each therapy ranging from $400 to $1000 (Sood A et al, N Engl J Med 2011;364:1054-64)

Aspirin for Preventing the Recurrence of Venous Thromboembolism

Conclusion: In patients with unprovoked venous thromboembolism (VTE), who discontinue anticoagulation treatment, aspirin reduces risk of VTE recurrence without an increased risk of major bleeding.

Summary: Patients with unprovoked VTE who discontinue anticoagulation therapy with vitamin K antagonists have about a 20% incidence of VTE recurrence within 2 years (Schulman S, N Engl J Med 1995;332: 1661-5; and Prandoni P, Ann Intern Med 1996;125:1-7). In studies of prophylactic use of VTE, aspirin has been associated with a relative risk reduction ranging from 20% to 50% (Antithrombotic Trials' Collaborative, BMJ 1994; 308:235-46). One small randomized trial of 39 patients has previously suggested a benefit of aspirin in reducing recurrence of venous thrombus (Steele P, Lancet 1980;2:1328-9). The present study, the aspirin for the prevention of recurrent VTE (the Warfarin and Aspirin study [WARFASA]), was to assess the potential benefit of aspirin to prevent recurrence of VTE after discontinuation of a vitamin K antagonist therapy. This was a multicenter investigator-initiated double-blind study. Patients included in the study had a first-ever unprovoked VTE and had completed 6 to 18 months of vitamin K antagonist therapy after diagnosis. They were then randomly assigned to aspirin (100 mg daily) or placebo for 2 years. There was an option to extend study treatment. Primary efficacy outcome was recurrence of VTE. The primary safety outcome was major bleeding. VTE recurred in 28 of 205 patients who received aspirin and in 48 of 197 patients who received placebo (6.6% vs 11.2% per year; hazard ratio, 0.58: 95% confidence interval, 0.36-0.92; median study period, 24.6 months). With a median treatment of 23.9 months, 23 patients taking aspirin and 39 taking placebo had VTE recurrence (5.9% vs 11.0% per year: hazard ratio, 0.55; 95% confidence interval, 0.33-0.92). One major bleeding episode occurred in each group, and adverse events were similar in the aspirin-treated and placebo-treated groups.

Comment: There is currently intense interest in the use of aspirin to prevent VTE. Patients at low to moderate risk of bleeding, based on the best available evidence, derive the greatest overall benefit from extending anticoagulation therapy. The use of aspirin to reduce VTE events, however, is not as intriguing as many believe. Acupuncture and hypnotherapy, inducing an altered state of consciousness broadly enabling adherence to smoking cessation, aversive smoking and aversion smoking therapy consisting of rapidly taking a large number of pills in a short period of time. Between 30% and 40% of smokers have reported an interest in trying acupuncture as an alternative therapy, but these alternative aids are costly, with the total price of each therapy ranging from $400 to $1000 (Sood A et al, N Engl J Med 2011;364:1054-64). Between 30% and 40% of smokers have reported an interest in trying acupuncture as an alternative therapy, but these alternative aids are costly, with the total price of each therapy ranging from $400 to $1000 (Sood A et al, N Engl J Med 2011;364:1054-64).