



**NEWFOUNDLAND AND LABRADOR
MEDICAL ASSOCIATION**

FACT SHEET- Coverage for NRTs and Tobacco Cessation Medications

NLMA Recommendation:

- The NLMA recommends that the Government of Newfoundland and Labrador improve accessibility to quit smoking therapies by subsidizing the cost of NRTs and tobacco cessation medications for low-income residents who meet the criteria for coverage under the Newfoundland and Labrador Prescription Drug Program (NLPDP).
- Tobacco cessation medications Varenicline and Bupropion should be covered by the NLPDP and be distributed by pharmacies to smokers who meet NLPDP criteria and have a prescription from a physician.
- Smokers who meet NLPDP criteria should also receive a free supply of NRT in a method of their choice (nicotine gum, lozenges, inhalers or patches) for up to 12 consecutive weeks (provided only once in a single calendar year).
- The Smokers' Helpline is an ideal organization to manage the distribution of NRTs to smokers. Once NLPDP approves tobacco cessation therapy for an individual, a Smokers' Helpline CARE Fax Referral will be automatically generated and sent to the Smokers' Helpline.
- A Smokers' Helpline counselor will then follow up with the individual to help them select an NRT product that best suits their needs. The smoker will receive the NRT either by mail or at their local pharmacy once they receive proof of enrolment in the program.
- Government can potentially subsidize the cost of cessation aids for low-income smokers through revenues of increased provincial tobacco sales tax. In 2010-11, the province collected approximately \$135 million from tobacco sales tax revenues.

The Health and financial impact of tobacco use

- Since 1999, the tobacco use rate in Newfoundland and Labrador has fluctuated at around 20% of the population or more than 87,000 people aged 15 and up.
- Tobacco use has been linked to all the major causes of death and disease, including heart disease, cancer, respiratory diseases, and recently Type 2 diabetes. Heart disease is the leading cause of death in the province, while lung cancer is the second leading cause.
- According to the Newfoundland and Labrador Centre for Health Information (NLCHI), approximately 725 Newfoundlanders died in 2009 due to smoking-related illness.
- There were approximately 4,702 acute care hospitalizations in the province in 2010/11 which were directly attributable to smoking.
- In 2006, the Canadian Centre on Substance Abuse determined the overall health care cost (2002\$) attributable to tobacco use in the province was \$95,217,802, higher than the health care costs from alcohol abuse and illegal drug use combined.

Smoking Cessation Therapies

- Nicotine replacement therapies (NRTs) have been proven to double the chances of long-term cessation. Quit rates increase when NRTs are used in combination with other therapies like counseling and cessation medications.
- NRTs can be obtained over the counter and include nicotine gums, lozenges, patches and inhalers. They provide nicotine to the body in controlled doses to lessen exposure to cigarettes and ease withdrawal.
- Prescription tobacco cessation medications include bupropion and varenicline. They do not contain nicotine but control nicotine receptors in the brain to lessen cravings and withdrawal.
- The use of NRT and bupropion generally doubles the odds of a smoker quitting successfully. The use of varenicline can increase the odds of quitting by between twofold and threefold.

Barriers to accessing smoking cessation therapies

- Smokers with a lower socioeconomic status, as measured by education and income, have higher smoking rates, are less likely to try to quit, and achieve lower abstinence rates when they do.
- According to Statistics Canada, 30% of Newfoundlanders and Labradorians earning less than \$20,000 a year use tobacco daily, compared to 18% among those earning \$60,000 or more.
- The 2011 Canadian Tobacco Use Monitoring Survey (CTUMS) indicates that those with less than high school education are twice as likely to smoke as those who complete post-secondary.
- Research suggests that two of the major barriers that prevent low-income smokers from using tobacco cessation therapies like NRTs and prescription medications, are availability and cost.
- Private health insurance plans rarely cover the cost of NRTs. In addition, tobacco cessation medications are considered “lifestyle” drugs and are excluded from most health insurance plans.
- Newfoundland and Labrador and New Brunswick are the only provinces in Canada that do not offer some form of financial assistance for NRTs or cessation medications as part of their provincial drug programs (see Position Paper Appendix).

Cost-effectiveness of subsidized smoking cessation

- The average cost of NRTs varies from \$2.50 per day to \$4.50 or between \$210 and \$370 for 12 weeks. The approximate cost for bupropion is \$1.60 per day or \$134.40 for the 12-week therapy, while varenicline costs about \$3.37 per day or \$278.03 for the 12-weeks.
- In 2012, Thinkwell Research conducted a survey of 1,053 Atlantic Canadians and found that 71.2% of Newfoundlanders and Labradorians support more provincial spending on tobacco cessation. A majority of 59.2% of respondents from Newfoundland and Labrador, more than any other province, said government should fund tobacco cessation by raising tobacco taxes.
- If just 10% of the province’s smokers quit, they would over their lifetimes save the provincial economy more than \$594 million (2001\$) in avoided medical care costs and productivity losses.