

**Table 16.1.** Tobacco Products Consumed in the United States

Pyrolytic (Combustion)	Nonpyrolytic (Unburned)
1. Cigarettes (95% of U.S. tobacco consumed)	1. Smokeless (spit) (topical) tobacco
2. Cigars	2. Chewing tobacco
3. Pipes	3. Moist snuff
	4. Dry snuff (powdered)

**Table 16.2.** Adverse Interactions between Alcohol and Medications Used in Dentistry

Medication	Drug Interaction with Alcohol	Dentist's Guidance
<b>Analgesics</b>		
Aspirin	Excessive bleeding may occur because of aspirin-induced prolongation of bleeding time.	Counsel patient to discontinue alcohol use during analgesic therapy.
Ibuprofen	Increased risk of gastric mucosal ulceration; renal toxicity has been reported in association with binge drinking.	Counsel patient to discontinue alcohol use during analgesic therapy.
<b>Antibiotics</b>		
Cephalosporins Metronidazole Augmentin	A disulfiram effect may occur, permitting the accumulation of acetaldehyde, leading to facial flushing, headache, palpitations, and nausea.	Counsel patient to discontinue alcohol use during antibiotic therapy. Do not prescribe to active alcohol user.
Erythromycin	Decreased absorption of erythromycin with a resultant decrease in effectiveness.	Counsel patient to discontinue alcohol use during erythromycin therapy.
Tetracycline	Increased absorption and increased plasma concentration in normal subjects after acute ingestion of ethanol; diminished effectiveness in chronic alcoholism because of induction of metabolizing enzymes.	Counsel patient to discontinue alcohol use during tetracycline therapy.
<b>Antifungals</b>		
Ketoconazole	May increase risk of liver toxicity.	Counsel patient to discontinue alcohol during use of ketoconazole treatment.
<b>Barbiturates</b>		
Pentobarbital Secobarbital	Concurrent use may increase CNS depressant effects; diminished effectiveness in people with chronic alcoholism because of cellular tolerance to CNS depression, increased metabolism, or both.	Advise patients to never drink alcohol when taking barbiturates.
<b>Benzodiazopines</b>		
Diazepam Lorazepam	Concurrent use may increase CNS depressant effects; diminished effectiveness in people with chronic alcoholism because of cellular tolerance to CNS depression, increased metabolism, or both.	Initially decrease the usual dose of medication and observe for CNS depression; counsel patient to discontinue alcohol use during treatment.
<b>Other medications</b>		
Chloral hydrate	Concurrent use may significantly increase CNS depressant effects.	Initially decrease the usual dose of medication and observe for CNS depression; counsel patient to discontinue alcohol use during treatment.
Opioids	Sedative side effects are markedly increased.	Initially decrease the dose of medication and observe for CNS depression; counsel patient to discontinue alcohol use during treatment.

CNS, central nervous system.  
Adapted from Friedlander et al.<sup>14</sup>

**Table 16.3.** Tobacco Cessation Therapies and Drug Actions/Interactions

<b>Pharmacotherapy</b>	<b>Method of Delivery</b>	<b>Precautions/Contraindications</b>	<b>Adverse Effects</b>	<b>Dosage</b>	<b>Duration</b>	<b>Availability</b>	<b>Cost per Day</b>
First line Sustained release Bupropion Hydrochloride Zyban® (non-nicotine)	Tablet by mouth	History of seizure  History of eating disorders	Insomnia  Dry mouth	150 mg every morning for 3 days then 150 mg twice daily (begin treatment 1–2 weeks prequit)	7–12 weeks maintenance Up to 6 months	Prescription only	\$3.33
Nicotine gum Nicorette® (polarcrillex)	Transmucosal	Do not use tobacco	Mouth soreness  Dyspepsia	1–24 cigarettes/d; 2 mg gum (up to 24 pieces/d) ≥25 cigarettes/d; 4 mg gum (up to 24 pieces/d)	Up to 12 weeks	OTC only	\$6.25 for ten 2-mg pieces  \$6.87 for ten 4-mg pieces
Nicotine inhaler	Oral cavity		Local irritation of mouth and throat	6–16 cartridges/d	Up to 6 months	Prescription only	\$10.94 for 10 cartridges
Nicotine nasal spray	Nasal cavity		Nasal irritation	8–40 doses/d	3–6 months	Prescription only	\$5.40 for 12 doses
Nicotine patch	Transdermal	Do not use tobacco	Local skin reaction  Insomnia	21 mg/24 h 14 mg/24 h 7 mg/24 h 15 mg/16 h	4 weeks Then 2 weeks Then 2 weeks	Prescription and OTC	\$4.22  \$4.51
Second line Clonidine		Rebound hypertension	Dry mouth Drowsiness Dizziness Sedation	0.15–0.75 mg/d	3–10 weeks	Prescription only (oral formulation and patch)	\$0.24 for 0.2 mg \$3.50
Nortriptyline		Risk of arrhythmias	Sedation Dry mouth	75–100 mg/d	12 weeks	Prescription only	\$0.74 for 75 mg

d, day; mg, milligrams; h, hour; OTC, over the counter.