

Cannabinoid type 1 receptor antagonists assist smoking cessation

Clinical question	Are selective type 1 cannabinoid (CB1) receptor antagonists effective in assisting smoking cessation?
Bottom line	From the preliminary trial reports available, selective CB1 receptor antagonists (rimonabant 20 mg) may increase the odds of not smoking at one year approximately 1.5 fold. The evidence for their effectiveness in maintaining abstinence is inconclusive. Higher doses (20 mg versus 5 mg) may moderate weight gain in the long term.
Caveat	Adverse effects include nausea and upper respiratory tract infections; the risk of serious adverse effects is reported to be low. However, there is current concern over rates of depression and suicidal thoughts in people taking selective CB1 receptor antagonists for weight control.
Context	Long-term use of nicotine can upset the brain's endocannabinoid system which controls food intake and energy balance. Selective CB1 receptor antagonists may help smokers quit by rebalancing the system, which then reduces nicotine and food cravings. Rimonabant is now on the market, and is available in two strengths, 20 mg and 5 mg.
Cochrane Systematic Review	Cahill K. et al. Cannabinoid type 1 receptor antagonists (rimonabant) for smoking cessation. Cochrane Reviews 2007, Issue 4. Art No.: CD005353. DOI:10.1002/14651858. CD005353.pub3. This review contains 3 trials involving 3,228 participants.
Pearls No. 62, May 2008, written by Brian R McAvoy	

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.

View PEARLS online at:

- www.cochraneprimarycare.org