





Electronic cigarettes for smoking cessation

Results from the most recent Cochrane Review update

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June 2021











Acknowledgements and funding

This living systematic review is supported through a Tobacco Advisory Group Cancer Research UK Project Grant. The Cochrane Tobacco Addiction Group is supported through core infrastructure funding from the National Institute for Health Research. The views and opinions expressed herein are those of the authors and do not necessarily reflect those of the Systematic Reviews Programme, NIHR, National Health Service (NHS) or the Department of Health.

I have no conflicts of interest to declare.











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About Cochrane

WHAT?

Gathers and combines the best evidence from research to determine the benefits and risks of treatments/interventions

HOW?

- By systematically reviewing the available evidence, with strong emphasis on quality assessment
- Cochrane methods considered gold-standard



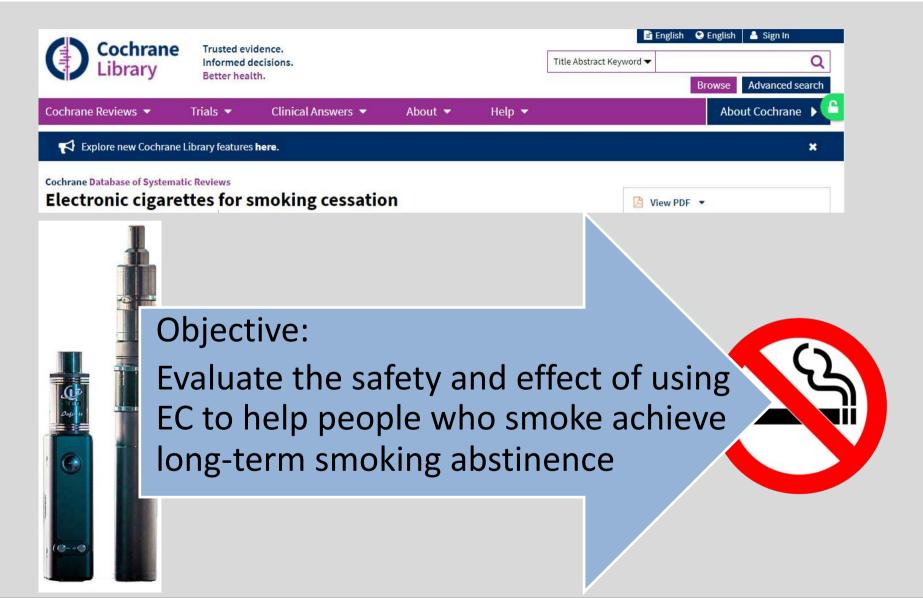
WHY?

To help healthcare providers, patients, carers, researchers, funders, policy makers, guideline developers improve their knowledge and make decisions















Inclusion criteria

Randomized controlled trials

 People who smoke randomized to EC or control

Uncontrolled intervention studies

 Studies in people who smoke where all people in the study offered the same EC intervention Smoking cessation (6m +)

Measures of harm (1 week+)







- Review update published April 2021
- 56 studies in >12,000 participants (6 new at this update)
- 29 included studies were RCTs
- 23 RCTs contributed to cessation analyses







DEVICE TYPES	RISK OF BIAS	FUNDING SOURCE
 26 cartridge devices (only one with high nicotine delivery) 21 refillable devices 3 used both cartridge & refillable devices 1 used a pod device 5 did not report device type 	 5 Low risk 10 Unclear risk 41 High risk (including the 25 non-randomized studies) 	 46 studies reported funding information 32 of these had no EC industry funding or support







Primary comparisons

- Nicotine e-cigarette versus NRT
- Nicotine e-cigarette versus nonnicotine e-cigarette
- Nicotine e-cigarette versus behavioural support only/no-support







Outcomes

Cessation*

- 6 months+
- Intention to treat
- Strictest definition of abstinence
- Biochemically verified where available
- (as per standard Cochrane methods)

Adverse events (AE)*

- One week or longer of EC use
- Defined as any undesirable experience associated with the use of a medical product in a patient

Serious adverse events (SAE)*

- One week or longer of EC use
- Any AE where the patient outcome is death; lifethreatening; hospitalization; disability; birth defect; or requires intervention to prevent any of the above

Changes in relevant biomarkers

- One week or longer of EC use
- Known carcinogens and toxicants
- Exhaled carbon monoxide
- Airway and lung function
- Blood oxygen levels

*primary outcome







Nicotine e-cigarette versus NRT: Quitting at 6+ months

	EC		NRT	Г		Risk Ratio	Risk Ratio
Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Fixed, 95% CI	M-H, Fixed, 95% CI
Bullen 2013	21	289	17	295	27.2%	1.26 [0.68, 2.34]	
Hajek 2019	79	438	44	446	70.6%	1.83 [1.30, 2.58]	
Lee 2018	5	20	1	10	2.2%	2.50 [0.34, 18.63]	
Total (95% CI)		747		751	100.0%	1.69 [1.25, 2.27]	•
Total events	105		62				
Heterogeneity: Chi ² =	1.21, df=	2 (P =	0.04 0.4 4 40 4.00				
Test for overall effect:	Z = 3.46 (P = 0.0	005)				0.01 0.1 1 10 100 100 Favours NRT Favours EC
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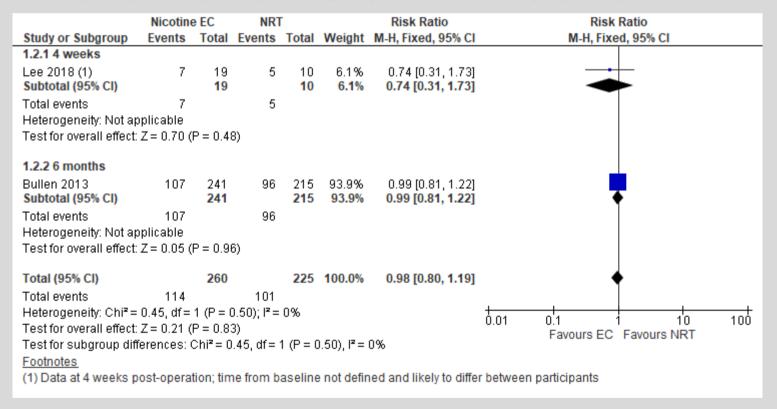
GRADE certainty of evidence: MODERATE (downgraded one level due to imprecision)







Nicotine e-cigarette versus NRT: Adverse events at 1+weeks



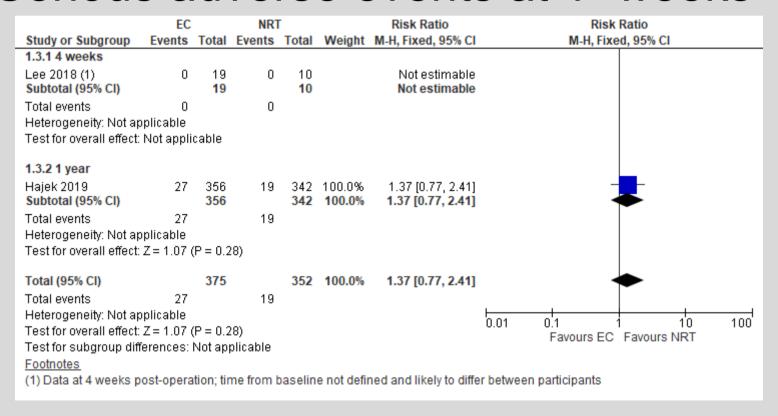
GRADE certainty of evidence: LOW (downgraded two levels due to imprecision)







Nicotine e-cigarette versus NRT: Serious adverse events at 1+weeks



GRADE certainty of evidence: LOW (downgraded two levels due to imprecision)







Nicotine e-cigarette versus non-nicotine e-cigarette: Quitting at 6+ months

	Nicotin	e EC	Non-nico	tine EC		Risk Ratio	Risk Ratio
Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Fixed, 95% CI	M-H, Fixed, 95% CI
Bullen 2013	21	289	3	73	19.8%	1.77 [0.54 , 5.77]	•
Caponnetto 2013a	22	200	4	100	22.1%	2.75 [0.97 , 7.76]	
Eisenberg 2020	5	128	3	127	12.5%	1.65 [0.40, 6.77]	
Lucchiari 2020	13	70	11	70	45.6%	1.18 [0.57 , 2.46]	-
Total (95% CI)		687		370	100.0%	1.70 [1.03 , 2.81]	•
Total events:	61		21				•
Heterogeneity: Chi ² =	1.78, df = 3	P = 0.6	2); I ² = 0%			0.01	0.1 1 10 100
Test for overall effect:	Z = 2.09 (P	= 0.04)				Favours non-r	nicotine EC Favours nicotine EC
Test for subgroup diffe	erences: No	t applical	ble				

GRADE certainty of evidence: MODERATE (downgraded one level due to imprecision)

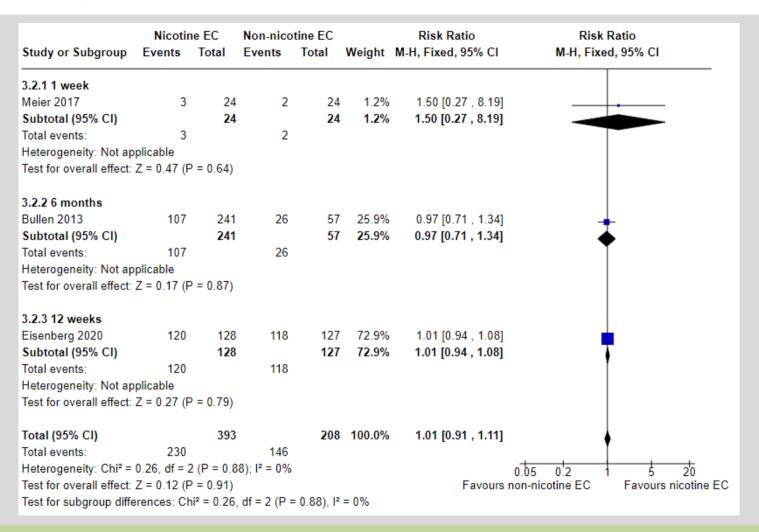






Nicotine e-cigarette versus non-nicotine e-cigarette:

Adverse events at 1+ weeks



GRADE certainty of evidence: MODERATE (downgraded one level due to imprecision)





Nicotine ecigarette versus non-nicotine ecigarette:

Serious adverse events at 1+weeks

GRADE certainty of evidence: LOW (downgraded two levels due to imprecision)

	Nicotin	e EC	Non-nico	tine EC		Risk Ratio	Risk Ratio
Study or Subgroup E	vents	Total	Events	Total	Weight	M-H, Fixed, 95% CI	M-H, Fixed, 95% CI
3.3.1 1 week							
Meier 2017	0	24	0	24		Not estimable	
Subtotal (95% CI)		24		24		Not estimable	
Total events:	0		0				
Heterogeneity: Not appli	cable						
Test for overall effect: No	ot applica	ble					
3.3.2 4 weeks							
George 2019	0	37	0	37		Not estimable	
Subtotal (95% CI)	_	37	_	37		Not estimable	
Total events:	0		0				
Heterogeneity: Not appli	cable						
Test for overall effect: No		ble					
3.3.3 24 weeks							
Eisenberg 2020	3	128	5	127	100.0%	0.60 [0.15 , 2.44]	
Subtotal (95% CI)		128		127	100.0%	0.60 [0.15 , 2.44]	
Total events:	3		5				
Heterogeneity: Not appli	cable						
Test for overall effect: Z	= 0.72 (P	= 0.47)					
3.3.4 1 year							
Caponnetto 2013a	0	72	0	45		Not estimable	
Subtotal (95% CI)	0	72	0	45		Not estimable	
Total events:	0		0	-10		not octimusio	
Heterogeneity: Not appli	_		•				
Test for overall effect: No		ble					
	appou						
Total (95% CI)		261		233	100.0%	0.60 [0.15 , 2.44]	
Total events:	3		5				
Heterogeneity: Not appli	cable						0.01 0.1 1 10 100
Test for overall effect: Z	= 0.72 (P	= 0.47)				Favo	ours nicotine EC Favours non-nic
Test for subgroup differe	nces: No	t applicab	ole				







Nicotine e-cigarette versus behavioural support only/no support: Quitting at 6+ months

	Nicotin	e EC	Usual	care		Risk Ratio	Risk Ratio
Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Fixed, 95% C	M-H, Fixed, 95% CI
Dawkins 2020	3	48	0	32	5.3%	4.71 [0.25 , 88.30	0]
Eisenberg 2020	5	128	1	121	9.2%	4.73 [0.56 , 39.88	3]
Halpern 2018	4	1199	0	813	5.3%	6.11 [0.33 , 113.24	4]
Holliday 2019 (1)	6	40	2	40	17.8%	3.00 [0.64 , 13.98	3]
Lucchiari 2020	13	70	7	70	62.4%	1.86 [0.79 , 4.38	3]
Total (95% CI)		1485		1076	100.0%	2.70 [1.39 , 5.26	5]
Total events:	31		10				•
Heterogeneity: Chi ² = Test for overall effect: Test for subgroup diffe	Z = 2.92 (P	0.003)			F	0.01 0.1 1 10 100 Favours usual care Favours nicotine E

Footnotes

(1) Although participants were given a choice of nicotine concentration including 0 mg, none of the participants chose the non-nicotine e-liq

GRADE certainty of evidence: VERY LOW (downgraded two levels due to risk of bias; one level due to imprecision)



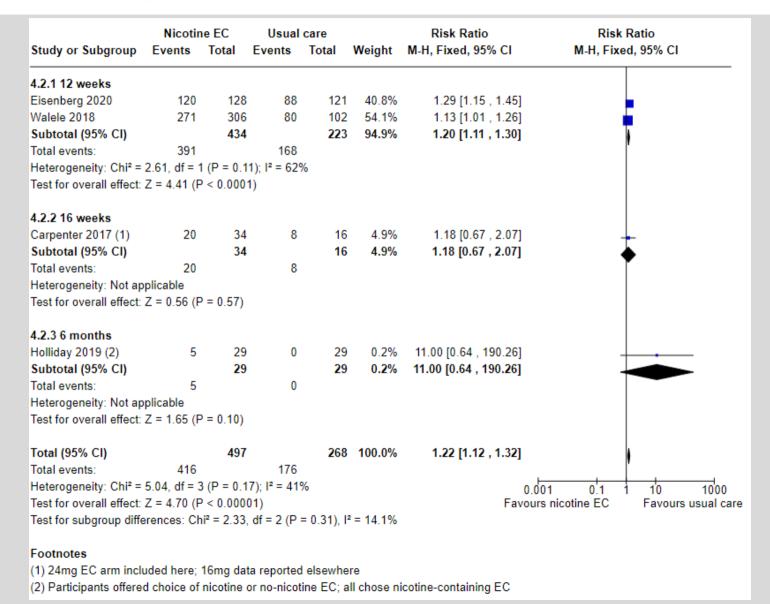




Nicotine ecigarette versus behavioural support only/no support:

Adverse events at 1+weeks

GRADE certainty of evidence: VERY LOW (downgraded due to risk of bias and imprecision)









Nicotine ecigarette versus behavioural support only/no support: Serious adverse events at 1+wks

GRADE certainty of evidence: VERY LOW (downgraded due to risk of bias and imprecision)

	Nicotir	Nicotine EC Usua				Risk Ratio	Risk Ratio	
Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Fixed, 95% CI	M-H, Fixed, 95% CI	
4.3.1 4 to 6 weeks								
George 2019	0	37	0	40		Not estimable		
Pulvers 2020	0	115	0	54		Not estimable		
Subtotal (95% CI)		152		94		Not estimable		
Total events:	0		0					
Heterogeneity: Not ap	plicable							
Test for overall effect:	Not applica	able						
4.3.2 12 weeks								
Walele 2018	5	306	0	102	15.4%	3.69 [0.21 , 66.17]		
Subtotal (95% CI)		306		102	15.4%			
Total events:	5		0					
Heterogeneity: Not ap	plicable							
Test for overall effect:	Z = 0.89 (F	9 = 0.38)						
4.3.3 16 weeks								
Carpenter 2017 (1)	0	34	0	16		Not estimable		
Subtotal (95% CI)		34		16		Not estimable		
Total events:	0		0					
Heterogeneity: Not ap	plicable							
Test for overall effect:	Not applica	able						
4.3.4 6 months								
Eisenberg 2020	3	128	4	121	84.6%	0.71 [0.16 , 3.10]		
Holliday 2019 (2)	0	29	0	29		Not estimable	_	
Subtotal (95% CI)		157		150	84.6%	0.71 [0.16 , 3.10]		
Total events:	3		4				$\overline{}$	
Heterogeneity: Not ap	plicable							
Test for overall effect:	Z = 0.46 (F	P = 0.65)						
Total (95% CI)		649		362	100.0%	1.17 [0.33 , 4.09]		
Total events:	8		4					
Heterogeneity: Chi ² =	1.05, df = 1	1 (P = 0.3	(1); I ² = 5%				0.01 0.1 10	
Test for overall effect:							ours nicotine EC Favours usu	
Test for subgroup diffe	erences: Ch	$1i^2 = 0.99$	df = 1 (P	= 0.32), F	² = 0%			







Implications for practice

- ➤ Evidence suggesting nicotine EC can aid in smoking cessation is consistent across several comparisons. There was moderate certainty evidence, limited by imprecision, that EC with nicotine increased quit rates at six months or longer compared to non-nicotine EC and compared to NRT. There was very low certainty evidence that EC with nicotine increased quit rates compared to behavioural support only or no support.
- > The effect of nicotine EC when added to NRT was unclear.
- None of the included studies (short- to mid-term, up to two years) detected serious adverse events considered possibly related to EC use.
- ➤ The most commonly reported adverse effects were throat/mouth irritation, headache, cough, and nausea, which tended to dissipate over time.
- In some studies, reductions in biomarkers were observed in people who smoked who switched to vaping consistent with reductions seen in smoking cessation.







Implications for research

Further trials should:

- Measure cessation at six months or longer.
- Use active comparators
- Assess safety profile for as long as possible
- Be powered to detect differences in safety outcomes
- Present safety in both absolute and relative risk terms (in comparison to the risks of continuing to smoke tobacco).
- Offer recent devices to participants, to be most representative of what will be on the market at the time results are released. Data on pod type EC are particularly lacking. Protocols and statistical analysis plans should be registered in advance and openly available.
- Provide EC in a way that would be used in real-world settings.

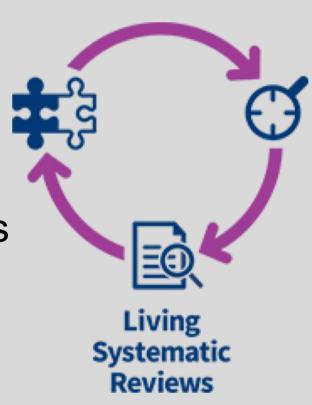






Living systematic review (LSR)

- Search for new evidence monthly
- Publish links to new evidence monthly
- Update full review when new data emerges that changes, strengthens, or weakens existing conclusions, or relates to new comparisons or outcomes









Also as part of the living systematic review project...



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Can electronic cigarettes (EC) help people stop smoking and are they safe to use for this purpose?

Cochrane December 2020 briefing docur

This briefing document brings you the most up to date information of cigarettes (ECs) to help people who smoke achieve long-term smomost recent Cochrane review of EC for quitting smoking. Cochrane available evidence on a particular topic. Our findings help people to

Key findings

- Our review showed more people probably stop smoking for at least six months using nicotine e-cigarettes than using nicotine replacement therapy, or nicotine-free e-cigarettes.
- Nicotine e-cigarettes may work better than no support for quitting smoking, or than behavioural support alone.
- Nicotine e-cigarettes may not be associated with serious unwanted effects.
- The unwanted effects reported most often with nicotine e-cigarettes were throat or mouth irritation, headache, cough and



Can electronic cigarettes (EC) help people stop smok to use for this purpose?

Findings from the most recent Cochrane review December 2020

This briefing document brings you the most up to date information on the effe electronic cigarettes (ECs) to help people who smoke achieve long-term smo

Key findings

Findings across the main comparisons consistently favoured Lord and an experience compared to: non-nicotine EC; to nicotine replacement therapy (NRT) and to behavioural support only or no support.









See full review for

- More detail on everything that's been presented
- Secondary outcomes
- Other comparisons
- Data from uncontrolled studies
- Comparison with other reviews

Updates to and information on the living systematic review: https://www.cebm.ox.ac.uk/research/electronic-cigarettes-for-smoking-cessation-cochrane-living-systematic-review-1