



December 11, 2019

Addressing Tobacco and E-cigarette/Vaping Use in OASAS Certified Programs

Since 2008, 14 NYCRR 856 has required all OASAS certified providers to have policies and procedures to ensure a tobacco-free environment. Tobacco-free is defined as “prohibiting the use of all tobacco products in facilities, on grounds and in vehicles owned or operated by the service.” Policies and procedures are required to prohibit all patients from bringing tobacco products and paraphernalia to the program. Staff, volunteers, and others may not use tobacco or have tobacco products visible while on the property. *This includes electronic cigarettes and “vaping” products, used in the community for any reason or indication.*

A tobacco-and-vaping-free environment produces multiple benefits for individuals recovering from addiction, including a healthier, smoke-and-substance-free environment, as well as an incentive to stop using tobacco and/or vaping products. Given the fact that tobacco use is the single largest cause of preventable morbidity and mortality in the United States, these benefits are significant. However, given that Tobacco Use Disorder (TUD)/Nicotine Dependence is an addiction, and that continued use of tobacco and/or vaping products is a symptom of this addiction, it is important to strive to address tobacco and vaping use by individuals served within treatment settings in a person-centered and therapeutic manner.

OASAS certified programs should have policies and procedures to address tobacco/nicotine product use that align with the following principles:

1. ***Eliminate nicotine withdrawal.*** Like withdrawal from most drugs, nicotine withdrawal is extremely uncomfortable, and creates strong impulses to use tobacco and/or vaping products, even when it breaks program rules. Therefore, providers should use nicotine replacement therapy (NRT) in a robust manner to help all individuals who use tobacco or vaping products with their nicotine withdrawal when and where they are unable to use tobacco/vape, even when they have no interest in stopping tobacco use/vaping long-term. This usually involves using a combination of long-acting (e.g., patch) and short-acting products (e.g., gum, lozenge, inhaler, nasal spray) in doses high and frequent enough to eliminate signs of nicotine withdrawal. While research on treating nicotine withdrawal from vaping products is preliminary, there is no reason to believe that NRT would not be just as effective for this indication. Providers should note that some vaping products deliver higher nicotine doses than tobacco products, so higher doses of NRT may be necessary to address nicotine withdrawal.
2. ***Provide non-judgmental support.*** Individuals should be supported in their attempt to use NRT rather than tobacco/vaping products while at the treatment program, regardless of their interest in stopping tobacco use/vaping long-term. Psychosocial interventions that do not explicitly reference cessation should be available to assist with this goal. OASAS will be identifying and adapting tools to help providers with this work.
3. ***Be therapeutic rather than punitive.*** When individuals do use tobacco and/or bring tobacco-or-vaping-related contraband into the program, it should be treated as a symptom of TUD/Nicotine Dependence

and addressed in a person-centered way within the therapeutic process, rather than simply as a violation of program rules, as much as is possible and reasonable.

4. ***Set an example.*** Providers should have a low tolerance for staff use of tobacco/vaping products at the program, and especially use with individuals served by the program.
5. ***Treat Tobacco Use Disorder.*** For those individuals who express a willingness to stop using tobacco and/or vaping products, TUD/Nicotine Dependence should be treated with medications and psychosocial interventions as robustly as any other addiction being treated in the program. In addition to NRT, bupropion and/or varenicline should be considered and offered, as appropriate, to individuals who wish to stop using tobacco or other nicotine-containing products.

If you need further assistance or support or would like to discuss your approach to tobacco/nicotine product use with OASAS, please contact PICM@oasas.ny.gov or AddictionMedicine@oasas.ny.gov.