



Three PBS-funded pharmacotherapies — nicotine replacement (NRT), varenicline (Champix) and bupropion (Zyban). All are Authority Required (Streamlined) and all require the patient to be enrolled in a support program (e.g. Quitline 13 78 48) with a stated quit date. Pharmacotherapy plus brief GP advice plus Quitline gives the best quit rates.

PBS AUTHORITY — WHAT'S REQUIRED

- ✓ **Support program enrolled** Quitline (13 78 48) or in-clinic/other comprehensive counselling support — required for all three agents.
- ✓ **Quit date set** Patient has stated an intention to quit and set a quit date.
- ✓ **Annual quantity limits** NRT: 12 weeks per course, max 2 courses/year. Varenicline: up to 24 weeks/year. Bupropion: up to 9 weeks/year.
- ✓ **Authority type** Streamlined for all three — no prior approval call needed if criteria are met; confirm current codes at pbs.gov.au.

WHICH AGENT

Agent	Efficacy / PBS duration	Key caution
NRT (patch + PRN)	First-line; combination NRT (patch + gum/lozenge/spray) more effective than patch alone. 12 wk/course, max 2/year	Generally safe in cardiovascular disease
Varenicline (Champix)	Often the most effective single agent. Up to 24 wk/year	Now considered safe in stable mental illness (EAGLES, 2016); had a nitrosamine-related supply disruption in recent years — check current pharmacy stock
Bupropion (Zyban)	Roughly similar to NRT monotherapy. Up to 9 wk/year	Lowers seizure threshold — avoid in seizure disorder or eating disorder; caution with recent MI/unstable angina

VERIFY AT PBS

Combination NRT (patch + PRN gum/lozenge/spray) is often under-used and more effective than monotherapy — patches can start 1–2 weeks before the quit date. Nicotine vaping products are **not** PBS-subsidised — they sit on a separate TGA prescription (or pharmacist-only under 20 mg/mL) pathway, not this Authority framework.

■ SAFETY

- Bupropion: absolute contraindication in seizure disorder or eating disorder — both raise seizure risk
- Bupropion + MAOI within 14 days — serotonin syndrome risk
- Pregnancy: NRT preferred if quitting otherwise fails; avoid varenicline and bupropion

◆ CHECK / EXCLUDE

- Cardiovascular disease: NRT and varenicline generally safe; avoid bupropion if recent MI or unstable angina
- Confirm current PBS Streamlined codes and quantity limits at pbs.gov.au before prescribing
- Vaping is not PBS-funded and not first-line — consider only if other PBS options have failed, via the separate TGA pathway