

Nicotine in addictions: The myth that nicotine is benign

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Issues: Comorbid use of nicotine and other substance use is very common. There are myths and misconceptions that nicotine (independent of smoking tobacco) is benign.

Approach: A review of nicotine and other substances such as alcohol, cannabis, amphetamines and others, show a complexity of physiological and pharmacological interactions. This includes the effect of nicotine on the liver metabolism of substances, their elimination and the induction of enzymes that affect the efficacy of pharmacotherapies. The manner in which nicotine is self-administered either smoked, inhaled as vape, chewed or transdermal delivery has a profound hierarchical effect on nicotinic receptor activity, dependence and interaction with other substances in the brain. Inhaled nicotine as vape is currently the most efficient and faster manner of nicotine delivery to the brain such that nicotine receptors, which interact with other substances, are acutely stimulated and upregulated.

Discussions: It is assumed that Electronic cigarettes or Vaping is a safe and benign option for those dependent on nicotine undergoing substance abuse management.

Implications for Practice or Policy: Nicotine is not benign and does have an effect on the management of comorbid substance use. There are current effective and safer strategies to address nicotine dependence that do not require the use of the speedy delivery nicotine.

Disclosure of Interest Statement: Renee Bittoun has no conflicts of interest to declare. This paper is self-funded.