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CiQuit quickly explained

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CiQuit®

The gradual **reconditioning**
of tobacco dependence 
achieves motivating, health-promoting **partial successes**
and maximizes **abstinence success.**

1. Differentiation: "Covered need" vs. "CiQuit"

The problem

There is a lack of a practical **reduction program** that leads to complete smoke-free status.

The offering must drastically reduce the physical and mental dependence on **cigarettes**.

Quit smoking "now"!

Many offers of help = **Crowded market**



One goal

Abstinence: Yes or No
Desirable

Switch: Yes or No
Criticism: Harmful to health,
dual smoking, protection of minors,
banned in some countries.*

Only - **around 10%** - of smokers attempt to quit smoking each year or try switching to alternative products.*

There are many support options available for the **desirable complete smoking cessation**, such as nicotine replacement therapy, medication, courses, hypnosis, acupuncture, apps, and more. **Despite all the offers of help, the relapse rates are immense!****

= **Covered need**

Smoke "less" first!

The enormous healthcare gap



Several goals:

- Significant reduction
- Improvement of life quality as a smoker
- **Building motivation and optimal preparation for quitting smoking**

The majority of smokers - **around 60%** - want to reduce their consumption before quitting smoking.

From a medical perspective, the program must not only enable a significant reduction but also specifically prepare the body and mind for smoking cessation.

It must reactivate the ability to abstain and effectively motivate towards quitting smoking.

= **Uncovered need**

What addiction experts say!

"Reduction treatments ...

... are aimed at people who are willing to change but are unable or unwilling to lead an abstinent lifestyle. Various field studies, randomised control group studies and meta-analyses have shown

that significantly more people are willing to reduce than to abstain ..."¹

*Prof. Dr. Joachim Körkel u. Matthias Nanz,
The paradigm of open-ended addiction work, 2016,*

USP:

Smoke "less" first!

Reaches smokers!

- > **Psychological background: Rubicon model**
See Worth knowing:
7. CiQuit - Rubicon model: The quick decision to use

*see Worth knowing: 8. Tobacco heaters (IQOS & Co.) - Germany as an example

**see Worth knowing: 9. Success rates in tobacco cessation

1) Source: <https://docplayer.org/45668034-4-1-das-paradigma-zieloffener-suchtarbeit.html> | S. 198

2. Our offer for the majority of smokers!

The solution

Stepwise **reconditioning** of smoking behavior by unlearning the mental and physical dependency.

Using a proven **milestone approach** towards a **smoke free life**.



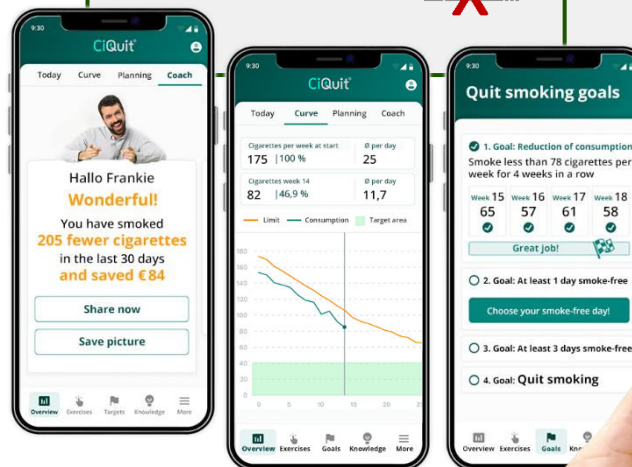
What addiction experts say!

"Smokers who are addicted to tobacco can hardly imagine quitting smoking immediately.

They can only imagine quitting smoking by reducing the cigarette consumption step by step."

*Prof. Dr. Robert Olbrich,
Otto Selz Institute for Applied Psychology*

Reconditioning with CiQuit-Box and CiQuit-App



6 months (Basic setting)
Or adaptation to the progress of weaning.



CiQuit®
Reconditioning



For a detailed explanation see:
www.luna-medical.com/en/scientific



The reduction of smoking ...

- ... increases the likelihood of a future attempt to stop smoking.
- ... strengthens the patient's confidence in their ability to stop smoking completely and increase the number of quit attempts per year.
- ... ***reduces at least some of the risks associated with smoking.**¹

1) Source: https://ensp.network/wp-content/uploads/2020/10/guidelines_2020_english_forprint.pdf | S. 91 ff
2) Source: <https://www.google.com/search?q=20.+t%C3%BCbinger+suchttherapie+2015+suchttherapie+im+wandel+der+letzten+zwei+jahrzehnte+client>

3. Large uncovered need

Smoke "less" first! = An easy way to start changing your behaviour

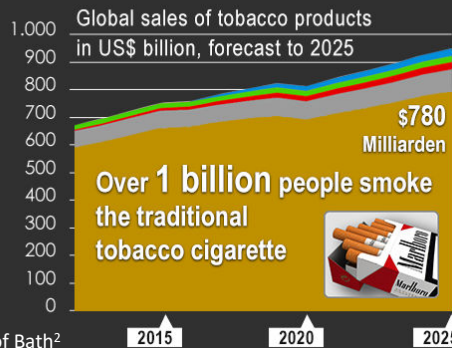
That's what science says!

"Glasgow et al. estimate that an additional 22% - 39% of smokers could be reached by a reduction offer.

This includes smokers who are willing to change their smoking behaviour but do not feel confident (initially) about quitting immediately, as well as smokers who currently do not wish to attempt quitting.¹

Competitors focus on switching to substitute products or quitting smoking immediately

World Health Organization
Around 1.3 billion tobacco consumers



Enormous healthcare gap

- Uncovered need
- No need
- Covered need

Covered need =

Offers designed to help replace tobacco cigarettes ~~X~~



Tobacco heater



Key-companies: Philip Morris International, British American Tobacco, Japan Tobacco, Imperial Brands, Altria, China tobacco, Korea Tobacco & Ginseng Corporation, American electronic cigarette company, VMR Products

Global sales | Forecast 2030

US\$ 98,7 billion³



E-cigarettes



Key-companies: Altria Group, British American Tobacco, Imperial Brands, International Vapor Group, Japan Tobacco, International, NicQuit, JUUL Labs, Philip Morris International Inc, R.J. Reynolds Vapor Company, Shenzhen IVPS Technology Co., Ltd.,

Global sales | Forecast 2030

US\$ 63,4 billion⁴



Offers designed to support the **desirable complete smoking cessation.** ~~X~~



e.g.: Nicotine Replacement Therapy



Global sales | Forecast 2030

US\$ 3,9 billion⁵



1) Source: Quelle: https://edoc.ub.uni-muenchen.de/22126/1/Kiss_Alexa.pdf

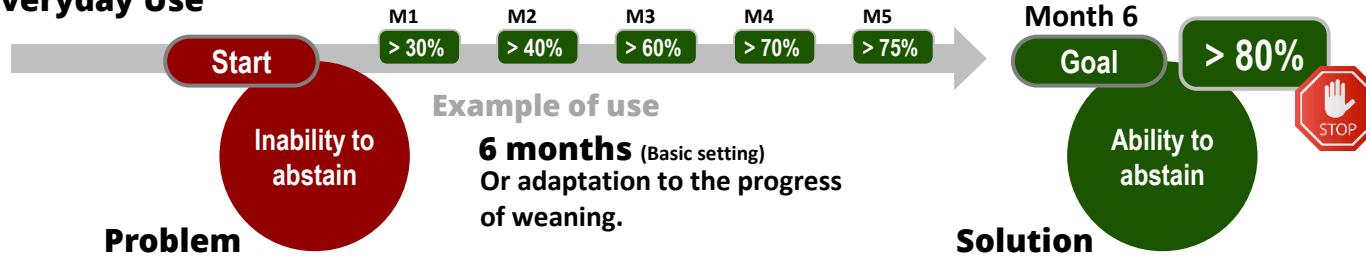
2) Source: <https://www.van-grunsteyn.com/sectoranalyse-tabak-resilienz-durch-anpassung>

3) Source: <https://www.verifiedmarketreports.com/product/heated-tobacco-products-https-market-size-and-forecast/>
4) Source: <https://www.verifiedmarketreports.com/product/e-cigarette-and-vaping-market/>
5) Source: <https://www.researchandmarkets.com/reports/4968933/global-smoking-cessation-and-nicotine-de-addiction>

4. The product and the path to abstinence

Unlearn smoking - relearn non-smoking!

- Digital
- Suitable for Everyday Use
- Step by Step



CiQuit-Box = **Reconditioning**

- The box accompanies 24/7 and enables **unlearning smoking** at the exact moment of craving!

CiQuit-App = **Relearning Smoke-Free**

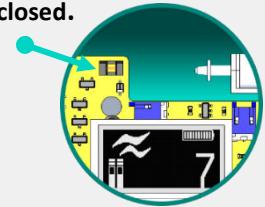
- The app - Permanent **maintenance of motivation** and AI-supported roadmap to abstinence!

Behaviour control

| | |
|-----------------|---|
| Smoked today | 2 |
| Just available | 3 |
| Available later | 8 |

- 1 **Behaviour control** via the display directly on the cigarette pack.
- 2 **Access delay** via therapy-controlled locking directly on the cigarette pack.
- 3 **Hierarchical reduction** AI-generated therapy adjustments are transmitted from the app to the box.

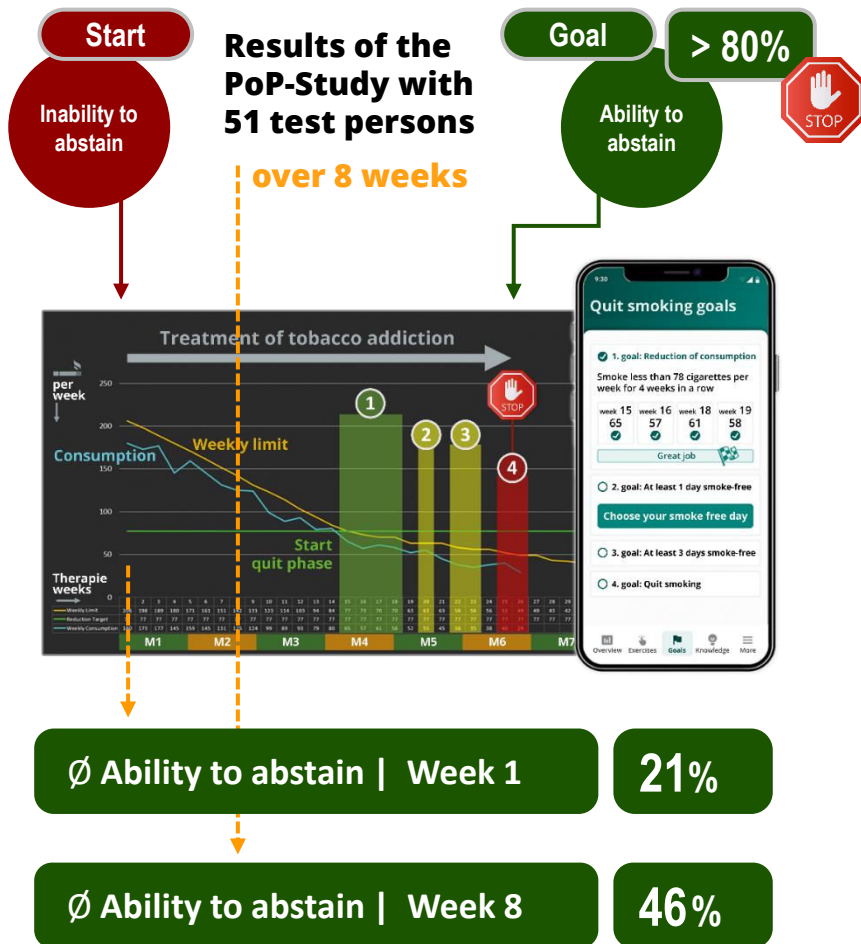
- 4 **Data measurement** All necessary data are measured via a light barrier when the lid is opened and closed.



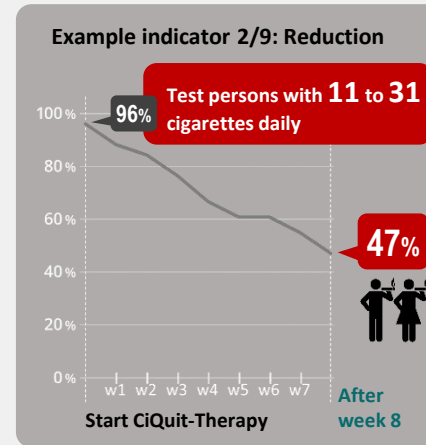
- 5 **Suitable for everyday use**
 - No smoker would enter data into an app or keep a tally for every cigarette over an extended period of time.
 - Should the box be forgotten, smoked cigarettes can alternatively be recorded in the app.

5. Proof-of-Principle Study (PoP-Study)

The successful study

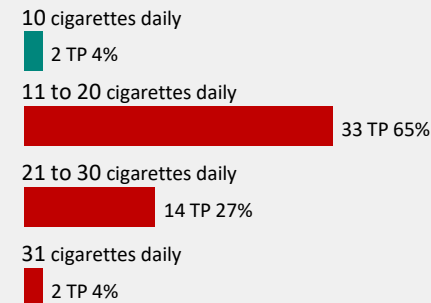


Significant improvements were observed in all 9 indicators of ability to abstain after just 8 weeks!



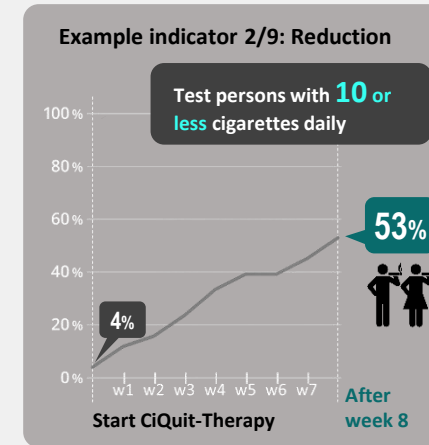
51 test persons (TP)

Start



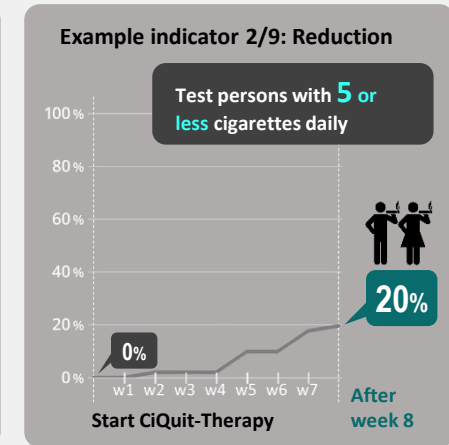
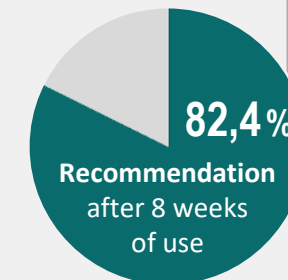
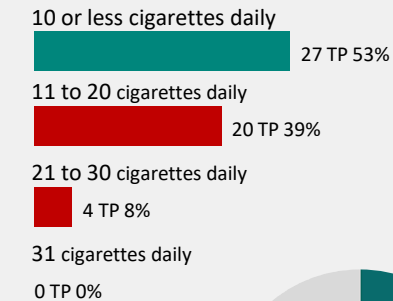
Proof-of-Principle Study

All results at www.luna-medical.com/en/pop-study/



51 test persons (TP)

Week 8



Example indicator 3/9: Motivation



6. Primary problem and solution

From **reconditioning** to **abstinence**!



For a detailed explanation see:
www.luna-medical.com/en/scientific

Previous treatment approach

- Medical help



Weaken the effects of nicotine withdrawal

- Psychological help



- Hypnosis
- Acupuncture
- Books
- Apps
- Online courses and much more

Overcome the effects of nicotine withdrawal

For a detailed explanation see:
www.luna-medical.com/en/covered-need

> Worth knowing
9. Status quo ...

Problem
Quit smoking with inability to abstain

Inability to abstain



Psychological (mental) **dependence** +
Physical (bodily) **dependence**

Addiction centre

Effects of nicotine withdrawal "Hungry nicotine receptors"

- Agonizing craving
- Irritability and restlessness
- Frustration and anger
- Anxiety
- Sleep disorders
- Concentration disorders
- Decreased heart rate
- Increased appetite and weight gain



Quelle: J. Henningfield

High level of suffering

High relapse rates (despite help)

Next attempt to quit smoking is usually postponed for years

Solution
Quit smoking with ability to abstain

CiQuit®

Goal 3

Ability to abstain



~~**Psychological** (mental) **dependence** +
Physical (bodily) **dependence**~~

Addiction centre

Effects of nicotine withdrawal "Hungry nicotine receptors"

Greatly weakened!
At best, no longer available.



Quelle: J. Henningfield

No or low level of suffering

High success rates*

In case of relapse, return to CiQuit with low consumption

*Sub-goals: Strong reduction, quality of life, motivation to quit smoking + outcome goal: abstinence

7. All in overview



The Scientific Background



The Proof-of-Principle Study



The Patent



Cooperations with Companies



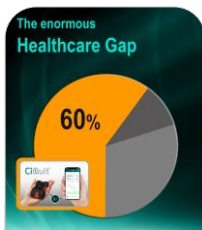
Cooperations with Health Insurance Funds



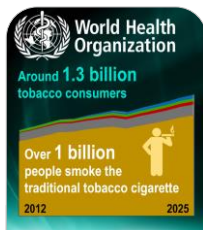
Cooperations with Pharmaceutical Companies



The Covered Need - Quit Smoking "Now"



The Uncovered Need - Smoke "Less" First



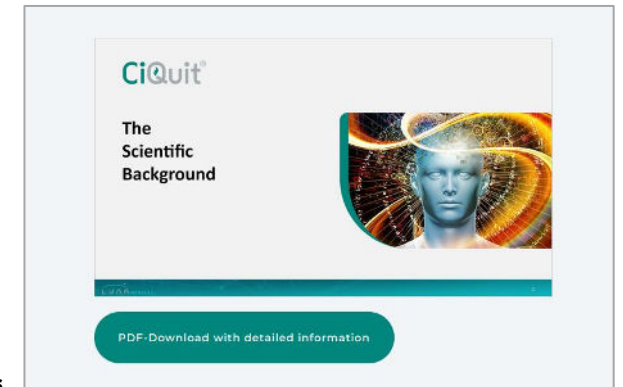
Smoking - A Global Overview

www.luna-medical.com ...

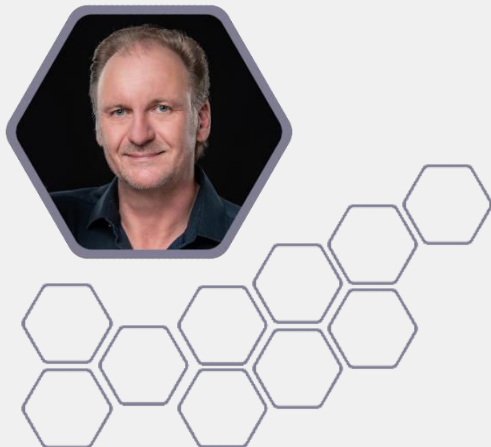
- serves as a detailed information source on smoking and the process of tobacco cessation, particularly in the context of the CiQuit cessation method.
- presents a wide range of scientifically backed insights that demonstrate easy access for smokers, explain the effectiveness of CiQuit, and reinforce its efficacy.
- acts as an informative resource for companies, health insurance providers, and pharmaceutical companies looking for an effective and practical strategy for tobacco cessation and interested in a partnership.

Further PDF documents

- **The scientific background**
<https://www.luna-medical.com/en/scientific/>
- **The proof-of-principle study**
<https://www.luna-medical.com/en/pop-study/>
- **The patent**
<https://www.luna-medical.com/en/patent/>
- **Cooperations with companies**
<https://www.luna-medical.com/en/companies/>
- **Cooperations with health insurance funds**
<https://www.luna-medical.com/en/health-insurance/>
- **Cooperations with pharmaceutical companies**
<https://www.luna-medical.com/en/pharmaceuticals/>
- **The covered need - Quit smoking "now"**
<https://www.luna-medical.com/en/covered-need/>
- **The enormous healthcare gap - Smoke "less" first**
<https://www.luna-medical.com/en/healthcare-gap/>
- **Smoking - A global overview**
<https://www.luna-medical.com/en/global-overview/>



Thank you very much



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www.luna-medical.com

Worth knowing

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What users say

Statements from the pilot study

"Very good thing, thanks to the control I was able to reduce my cigarette consumption from 18-20 to an average of 13 after just 8 weeks."

Rainer W.

"So I'm very enthusiastic, I arrived on day 30 and I can only say one thing: simply great."

Astrid P.

"The box made me realize how often I had reached for a cigarette without thinking. Now, before every cigarette, I think about whether I really want it and how many I have left to achieve my own daily goal."

Constanze K.

"It's simple to use. The box remembers your smoking behaviour pretty quickly and I have to say that I smile every time the access time is increased. Habit becomes mindfulness!"

Stefan F.

"I no longer light up a cigarette without thinking or reflecting. I can easily do without one or two. It makes you proud and, in retrospect, happy. I believe it is possible to become a real non-smoker. The brain adjusts to it. Great invention!"

Nils O.

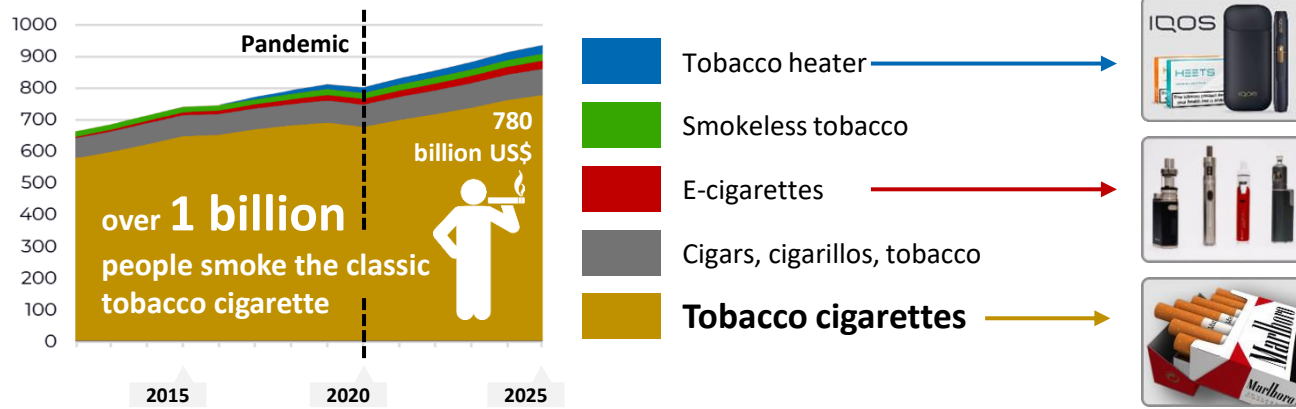
1. Smoking - A global challenge



World Health Organization

Worldwide **1.3 billion** tobacco consumers

Global sales of tobacco products in US\$ billion, forecast to 2025¹



Examples

Smokers in different countries

| | | | |
|--|---------|--------------------|--|
| | Germany | around 25,000,000 | |
| | Europe | around 115,000,000 | |
| | USA | around 45,000,000 | |
| | China | around 300,000,000 | |

Factsheet:

Annual harm caused by the production and consumption of tobacco

Health

8 million lives and serious tobacco-related diseases

Economic costs

Around US\$ 1,4 trillion worldwide²

Environment

- 600 million trees
- 200,000 hectares of land
- 22 billion tons of water
- 84 million tons of climate-damaging CO₂³



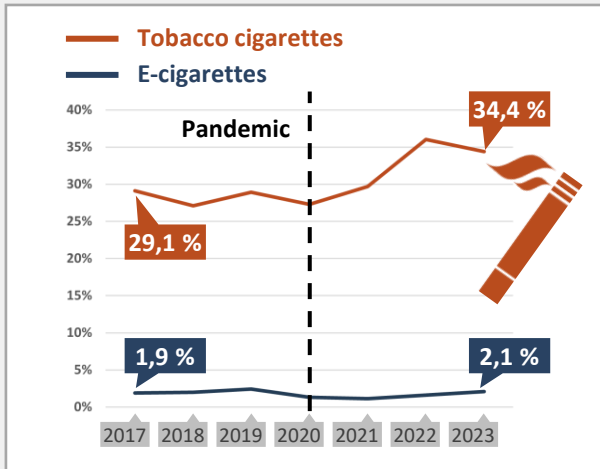
Every year, an estimated **4.5 trillion** cigarette butts with more than 7,000 toxic chemicals end up in the environment.^{4,5,6}

1) Source: <https://www.van-grunsteyn.com/sektoranalyse-tabak-resilienz-durch-anpassung>
 2) Source: <https://www.paho.org/en/topics/tobacco-control>
 3) Source: <https://www.paho.org/en/campaigns/world-no-tobacco-day-2022>

4) Source: <https://www.nabu.de/natur-und-landschaft/aktionen-und-projekte/meere-ohne-plastik/29901.html>
 5) Source: <https://www.euwid-recycling.de/news/wirtschaft/jaehrlich-werden-45-billionen-zigarettenstummel-weggeworfen-170522/>
 6) Source: https://www.euwid-recycling.de/fileadmin/data/euwid_recycling_und_entsorgung/news/Images/Talking_Trash_EN.pdf

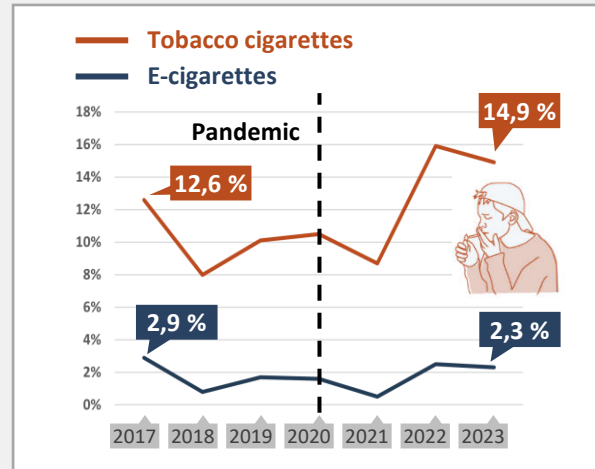
2. Development of smoking - Germany as an example

Since the pandemic, the number of people smoking tobacco cigarettes has skyrocketed.



| DEBRA German survey on smoking behaviour | | | |
|--|-------------|------------|---------------------|
| Population 14 years + | | | |
| Measurement time | in millions | Prevalence | Smokers in millions |
| 11.05.2023 | 73,3 | 34,4% | 25,2 |
| 14.05.2022 | 73,3 | 36,0% | 26,4 |
| 03.06.2021 | 72,5 | 29,7% | 21,5 |
| 08.07.2020 | 72,5 | 27,3% | 19,8 |

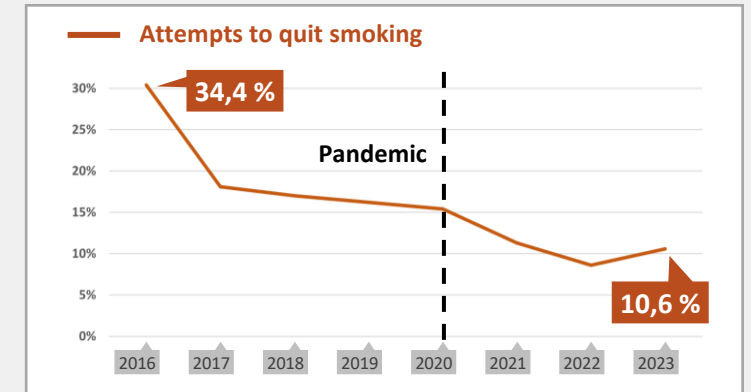
Unfortunately, the number of young smokers has risen just as sharply since the pandemic.



"It's a well-known phenomenon that people smoke more when the situation around them becomes less safe."¹

PD Dr. Tobias Effertz,
University of Hamburg

For years, the number of smokers who make at least one serious attempt to quit smoking has been declining.²



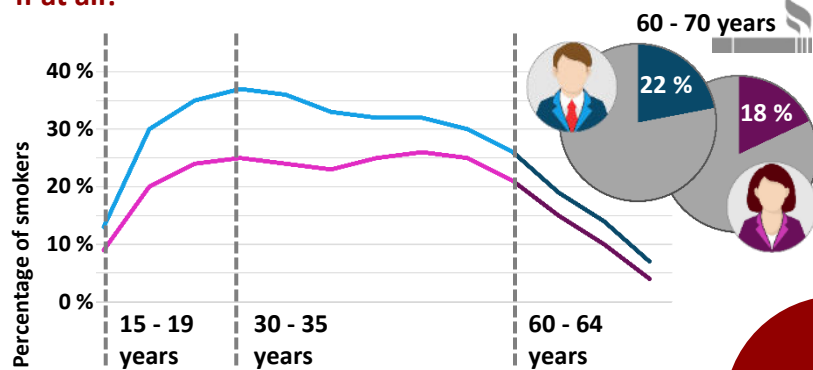
What the politicians say:

Burkhard Blienert
The Federal Government Commissioner
for Addiction and Drugs

"In the healthcare system, we finally must pull together in order to bring comprehensive help to quit smoking, onto the streets."³

3. What addiction experts say: The problem - Inability to abstain

Permanent abstinence is achieved far too late,
if at all!



Inability to
abstain

Current S3 guideline¹

"... Physical or psychological dependence makes quitting tobacco consumption more difficult and makes it a **protracted and often lifelong process characterized by relapses.**"

(S3 guideline: p. 10, para. 1, sentence 3)

"Between the ages of 20 and 50, a third of men and a quarter of women smoke. A significant decline in smoking can only be observed from the age of 60. But even here, the **proportion of smokers is still significant at 22% for men and 18% for women (DHS 2020).**"

(S3 guideline: p. 22, para. 3, sentence 2)

"The **inability to abstain** is largely explained by an existing tobacco addiction, which is made up of pharmacological and psychological components. A decisive criterion of tobacco dependence is the reduction in control, which **makes it difficult or even impossible** for smokers to stop using tobacco by sheer willpower."²

Anil Batra
Head of the Department of Addiction Medicine and Addiction Research, UK Tübingen



Prof. Dr. Anil Batra

"The problem is that smokers too often quit far too late, on average after **five to ten attempts, which can sometimes last for decades.** By then, irreversible damage and smoking-related illnesses have long since been caused."³

Stephan Mühlig
Head of the Psychotherapeutic University Outpatient Clinic TU Chemnitz



Prof. Dr. Stephan Mühlig

"There is another misconception in the healthcare system: smoking is seen as a free choice. According to the motto: everyone has the right to harm themselves. This completely ignores the fact that many smokers are addicted. **And many people don't get the support they need.**"⁴

Ute Mons
Head of the Cancer Prevention Unit of the German Cancer Research Center (DKFZ)



Prof. Dr. Ute Mons

1) Source: https://register.awmf.org/assets/guidelines/076-006l_S3_Rauchen_Tabakabhaengigkeit-Screening-Diagnostik-Behandlung_2021-03.pdf

2) Source: https://www.dhs.de/fileadmin/user_upload/pdf/Broschueren/Suchtmedizinische_Reihe_Tabakabha%CC%88ngigkeit_BFREI.pdf

3) Source: <https://www.aerztezeitung.de/Medizin/Entwöhnung-kommt-oft-viel-zu-spaet-409870.html>

4) Source: <https://www.bmbf.de/bmbf/shareddocs/interviews/de/jede-dritte-krebserkrankung-ist-vermeidbar.html>

4. The scientific background to CiQuit

A core principle from science

"Successful smoking cessation depends on how the learned habit of smoking can be permanently **"deleted!"** from the relevant brain area."

*Prof. Dr. Joseph McClernon,
Development of interventions against nicotine addiction*

Goal



Ability to
abstain



The core principle of CiQuit

CiQuit shifts the process of smoking from the "hot system" to the "cool system" and deletes the habit (addiction) of smoking from the relevant brain regions!

Learning and unlearning "delete!" is not possible in the "hot system"!



Learning and unlearning "delete!" can only be implemented in the "cool system"!



The **"hot system"** in the context of cigarette smoking:

The "hot system" is impulsive, operating automatically and subconsciously. In cigarette smoking, the "hot system" is activated by the anticipation (excitement) of immediate enjoyment and relaxation that nicotine provides. It responds to cravings as well as stress, boredom, and many other triggers that lead to reaching for a cigarette.

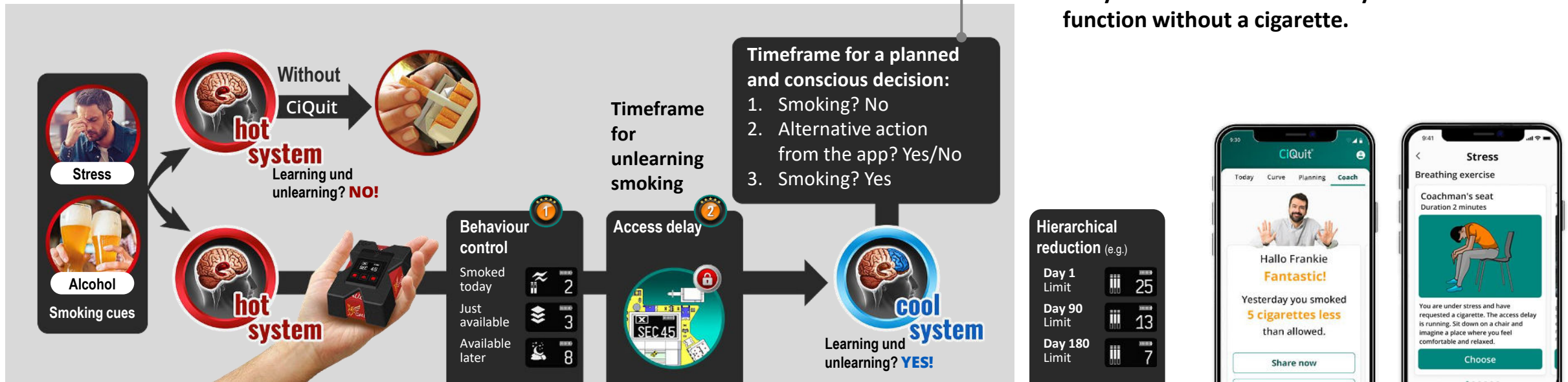
The **"cool system"** in the context of cigarette smoking:

The "cool system" is analytical and future-oriented. It considers long-term consequences and health risks associated with smoking.

- Through the CiQuit-Box, the **"cool system"** is activated every time you reach for a cigarette.
- This counters the smoking impulse, which is subconsciously initiated by the **"hot system"**.
- The process of reconditioning, which is only possible through the **"cool system"**, is now achievable without addiction pressure through the CiQuit-Box.



5. Summary: The primary task of the CiQuit-Box



The CiQuit-Box

Accompanies 24/7 and enables unlearning smoking at the exact moment of craving!

*Access delays slowly increasing daily!

Examples:

Day 1
20 seconds

Day 39
1:17 minutes

Day 83
2:46 minutes

Body and mind adapt to the slowly increasing access delays and do not generate an agonising craving during the access delays.

- The "hot system" generates a craving to satisfy needs that give us a good feeling in the moment. How this behaviour affects us in the long term is not considered by the "hot system".
- In contrast, the "cold system" enables rational consideration of options for action and is based on the activation of brain regions for self-control, learning and unlearning.
- 1 **Effective behaviour control** requires the observation and documentation of problematic behaviour, whereby observation alone leads to positive change.
- The CiQuit-Box **delays access to cigarettes** by keeping the box closed, but this does not mean denying access to cigarettes.
- 2 Instead, the **access delay** creates a time window that allows the user to actively unlearn smoking in the relevant brain regions "cold system" at the exact moment of craving.

6. Summary: The primary task of the CiQuit-App



The CiQuit-App

Permanent maintenance of motivation and AI-supported roadmap to abstinence!

- **Success experiences** in professions, sports, or changing behaviors are crucial for maintaining motivation. Success generates positive emotions, which, through the release of dopamine in the reward center, maintain this motivation.
- **Both self-reinforcement and external reinforcement** (pride, praise, recognition) play a significant role in establishing a new reward system, as these reinforcers create positive emotions (success) and thus initiate the release of dopamine.
- The CiQuit app triggers these reinforcers, among other things, through the **visualization of partial successes and success messages**, further enabling the continuous evaluation of changes and thereby stabilizing the modification process.
- "If-Then" plans are an effective self-regulation strategy to transform good intentions into successful actions. The app offers specific action alternatives for individual smoking situations (promoting reconditioning).

As a result, the interplay between the box and the app realizes a core principle of behavior therapy:

"Smoking can be actively unlearned, and non-smoking can be newly learned."

7. CiQuit - Rubicon model: The quick decision to use

This is what the medical profession says!¹

Ineffectiveness

"Patients are usually only slightly motivated or not motivated at all to quit smoking."

Too time-consuming

"Initiating tobacco cessation is cumbersome and doomed to fail in most cases."

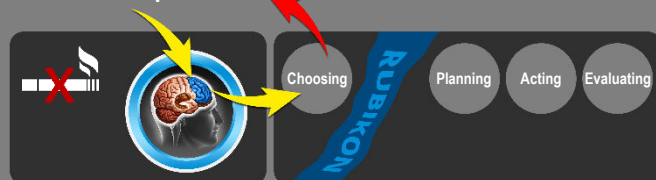
Quit smoking "now"!

Fear of losing something
"precious"!

- Long decision-making process
- High persuasion effort

- Fear of loss
- Fear of failure
- Failed attempts etc

The Rubicon **cannot**
be crossed



No, not now!

Rubicon model²

Choosing (pre-decisional phase):

The thought of quitting smoking completely can be overwhelming and daunting. In contrast, the goal of smoking less initially appears less threatening and more achievable.

Setting smaller goals, such as step by step reducing the daily cigarettes, helps reduce the feeling of being overwhelmed.

CiQuit - Smoke "less" first!

No fear of losing something
"precious"!

- Fast decision-making process
- Low persuasion effort

- No fear of loss
- No fear of failure
- No additional effort

The Rubicon can be
crossed **immediately**



Yes, I will!

Motivational psychology Rubicon model

- It is important that wishes are transformed into concrete goals.
- This is known as crossing the Rubicon.

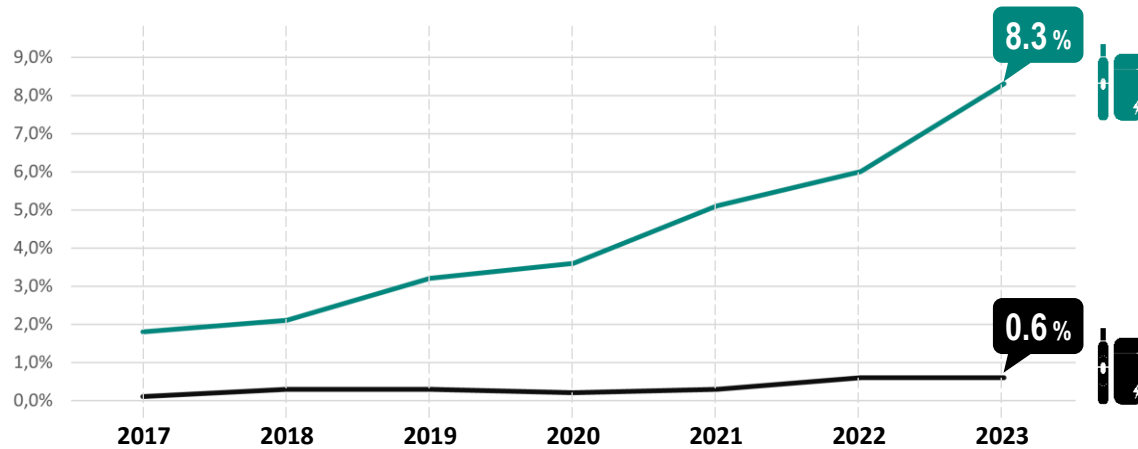
A clear goal ends choosing and sets the organism to "GO!"

- **Choosing**
Reduce your smoking?
Simple decision
= Yes, I will!
- **Planning**
The CiQuit therapy takes over!
- **Acting**
The CiQuit therapy will be realised!
- **Evaluating**
Subgoals successfully realised?
Maintaining motivation, as the partial successes adapt to the patient's progress.

8. Tobacco heaters (IQOS & Co.) - Germany as an example

In 2023

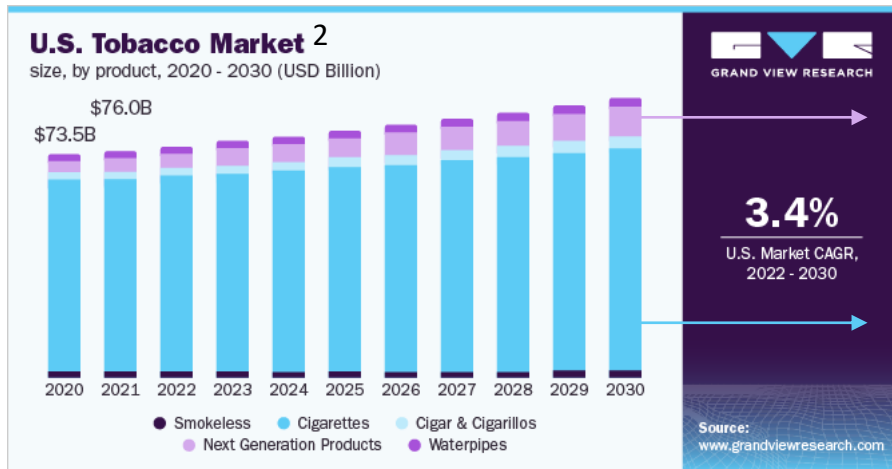
- **8.3%** of those aged over 14 reported currently using or having tried tobacco heaters.
- **only 0.6%** of those aged over 14 reported actually using tobacco heaters.¹



DEBRA
Deutsche Befragung zum Rauchverhalten 
German survey on smoking behaviour

Many smokers return to traditional cigarettes after trying tobacco heaters or e-cigarettes for various reasons:

1. **Insufficient Nicotine Hit and Satisfaction:** Alternative products often fail to replicate the familiar nicotine sensation and kick of conventional cigarettes.
2. **Complexity and Maintenance:** The higher maintenance required for e-cigarettes and heaters compared to traditional cigarettes is seen as cumbersome.
3. **Technical Issues:** Device failures such as battery outages or refill problems can cause frustration.
4. **Social and Cultural Factors:** Social surroundings and traditional smoking habits can hinder the use of alternative products.
5. **Regulatory Restrictions:** Stricter regulations for e-cigarettes and heaters, including flavour bans, can reduce their appeal.
6. **Taste and Sensory Experience:** Many smokers prefer the taste and smoking experience of traditional cigarettes over the perceived artificial flavours of e-cigarettes.
7. **Doubts about Cessation Effectiveness:** Uncertainties about the efficacy of these products as smoking cessation aids lead some smokers to revert to cigarettes.



Tobacco heaters and E-cigarettes



Traditional cigarettes




**In some countries, the possession of tobacco heaters, e-cigarettes and liquids is strictly prohibited and can be punished with severe penalties. These include holiday destinations such as Brazil, Singapore and Thailand (as of September 2023). <https://www.iqos.com/de/de/news/services-support/reisen-mit-tabakerhitzern-travelguide.html>

1) Source: <https://www.debra-study.info/>

2) Source: <https://www.grandviewresearch.com/industry-analysis/us-tobacco-market>

9. Success rates in tobacco cessation

Non-smoking courses are very rarely utilized!¹

|  | Benefits from statutory health insurance | | | | | |
|---|--|-----------|-----------|-----------|---------|-----------|
| | Individual behavioural prevention | | | | | |
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 |
| Total course participation | 1.675.008 | 1.685.490 | 1.805.889 | 1.157.305 | 796.595 | 1.294.193 |
| Example field of action: Movement | 1.159.826 | 1.155.187 | 1.223.676 | 732.653 | 466.144 | 769.853 |
| Share in % | 69,24% | 68,54% | 67,76% | 63,31% | 58,52% | 59,49% |
| Example field of action: Stress management | 438.854 | 462.829 | 514.285 | 363.332 | 275.593 | 452.486 |
| Share in % | 26,20% | 27,46% | 28,48% | 31,39% | 34,60% | 34,96% |
| Example field of action: Addictive drugs | 11.647 | 10.675 | 8.552 | 5.362 | 4.297 | 6.351 |
| Share in % | 0,70% | 0,63% | 0,47% | 0,46% | 0,54% | 0,49% |
| Promotion of non-smoking | 10.630 | 9.360 | 7.609 | 5.043 | 3.746 | 5.989 |
| Share in % | 0,63% | 0,56% | 0,42% | 0,44% | 0,47% | 0,46% |

1) Source: https://gkv-spitzenverband.de/krankenversicherung/praevention_selbsthilfe_beratung/praevention_und_bgf/praeventionsbericht/praeventionsbericht.jsp

Participants in non-smoking courses of all statutory health insurance funds (2019 - before the pandemic)



≈ 35 %

Non-smoking courses

In clinical practice, professional tobacco cessation treatments report 12-month abstinence rates between 25% and 40%.¹⁰ Intensive interventions with multiple contacts before and after the quit date achieve higher abstinence rates.¹¹

Excursus

Success rates in tobacco cessation



Only own willpower

With a firm resolution to quit smoking for good and never to light up a cigarette again, the probability of abstinence one week after making the resolution is 25%, and six months later, it already falls below 5%.² Unassisted attempts to quit smoking succeed in only 3% to 5% of cases.³

≈ 5 %



Apps and Online programs

Mobile self-help programs, S3 guideline: This Risk Ratio (RR) means that on average, 5.6% in the control groups and 9.3% in the intervention groups have successfully quit smoking.⁴ NichtraucherHelden-App (DiGA), study result: The NichtraucherHelden-App doubles the abstinence rate.⁵

≈ 10 %



Nicotine Replacement Therapy

63 studies with 41,509 participants: 17% who combined a patch with another intervention were able to quit, compared with 14% who used a single form of Nicotine Replacement Therapy (NRT).⁶ 16% who used NRT no longer smoked. 11% who used a placebo no longer smoked.⁷

≈ 15 %



Medication e.g.: Champix, Zyban

25% who took varenicline (Champix) no longer smoked. 11% who took a placebo no longer smoked.⁸ 19% who took bupropion (Zyban) no longer smoked. 12% who took a placebo no longer smoked.⁹

≈ 25 %

2) Source: https://www.dhs.de/fileadmin/user_upload/pdf/Broschuere/Suchtmedizinische_Reihe_Tabakabha%CC%88ngigkeit_BFREI.pdf
 3) Source: <https://www.aerzteblatt.de/pdf.asp?id=221166> | Trial and failure
 4) Source: https://register.awmf.org/assets/guidelines/076-006l_S3_Rauchen-_Tabakabhaengigkeit-Screening-Diagnostik-Behandlung_2021-03.pdf
 5) Source: <https://drks.de/search/de/trial/DRKS00025933> | Basic results | Conclusions
 6) Source: <https://www.cochrane.de/news/ein-neuer-cochrane-review-untersucht-die-wirksamkeit-von-unterschiedlichen>
 7) Source: <https://www.stiftung-gesundheitswissen.de/wissen/rauchentwohnung/koennen-nikotinplaster-und-co-bei-der-rauchentwohnung-helfen>
 8) Source: <https://www.stiftung-gesundheitswissen.de/wissen/rauchentwohnung/kann-vareniclin-bei-der-rauchentwohnung-helfen>

9) Source: <https://www.stiftung-gesundheitswissen.de/wissen/rauchentwohnung/kann-bupropion-bei-der-rauchentwohnung-helfen>
 10) Source: https://register.awmf.org/assets/guidelines/076-006l_S3_Rauchen-_Tabakabhaengigkeit-Screening-Diagnostik-Behandlung_2021-03.pdf
 11) Source: https://www.dhs.de/fileadmin/user_upload/pdf/Broschuere/Suchtmedizinische_Reihe_Tabakabha%CC%88ngigkeit_BFREI.pdf