



The Crowded Market-Quit Smoking “Now”

Taking Germany as an example.



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Tobacco consumption

Tobacco consumption is the **leading preventable cause** of premature mortality worldwide.



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/>

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

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!



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

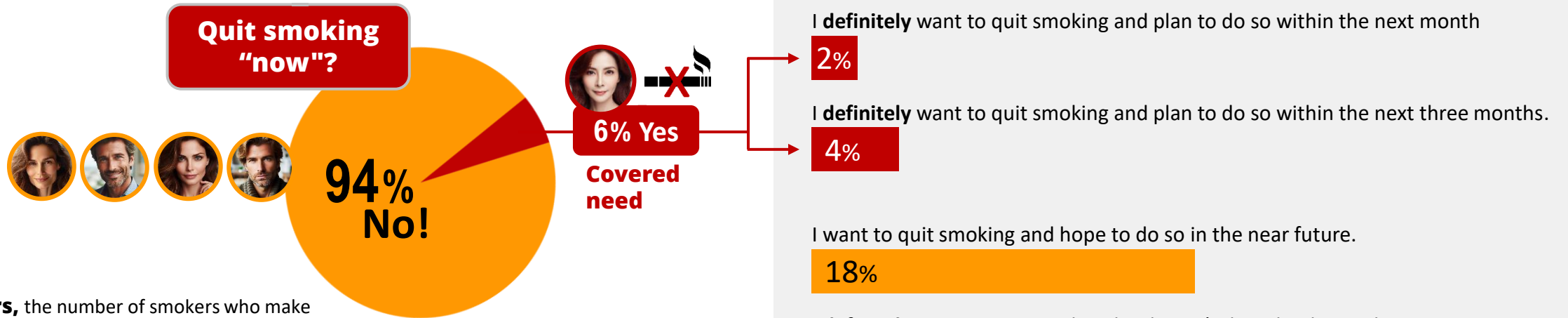
"Reduction treatments ...

... 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 ...**²

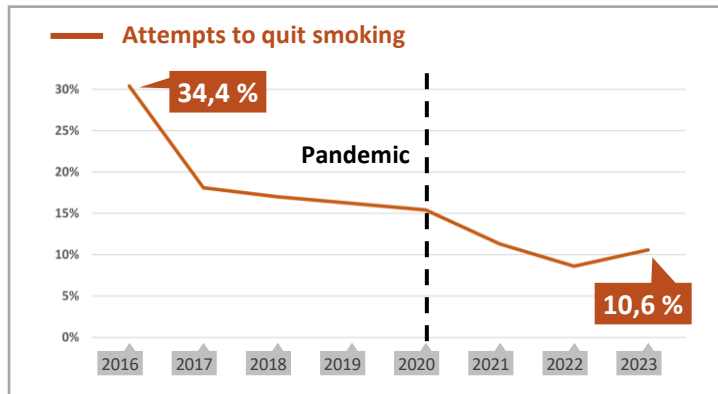
*Prof. Dr. Joachim Körkel u. Matthias Nanz,
The paradigm of open-ended addiction work, 2016,*

1) Source: https://ensp.network/wp-content/uploads/2020/10/guidelines_2020_english_forprint.pdf | p. 91 ff
2) Source: <https://docplayer.org/45668034-4-1-das-paradigma-zieloffener-suchtarbeit.html> | p. 198

2. Quit smoking "now"! - A snapshot



For years, the number of smokers who make at least one serious attempt to quit smoking has been declining.¹



Studies indicate that two out of three smoking patients in general practices are in the stages of precontemplation or contemplation, while one out of four being in the stage of preparation.

Only about 1 out of 14 is in the preparation stage for quitting smoking.²

I definitely want to quit smoking and plan to do so within the next month

2%

I definitely want to quit smoking and plan to do so within the next three months.

4%

I want to quit smoking and hope to do so in the near future.

18%

I definitely want to quit smoking but haven't thought about when.

5%

I want to quit smoking but haven't thought about when.

10%

I should quit smoking, but I don't really want to.

30%

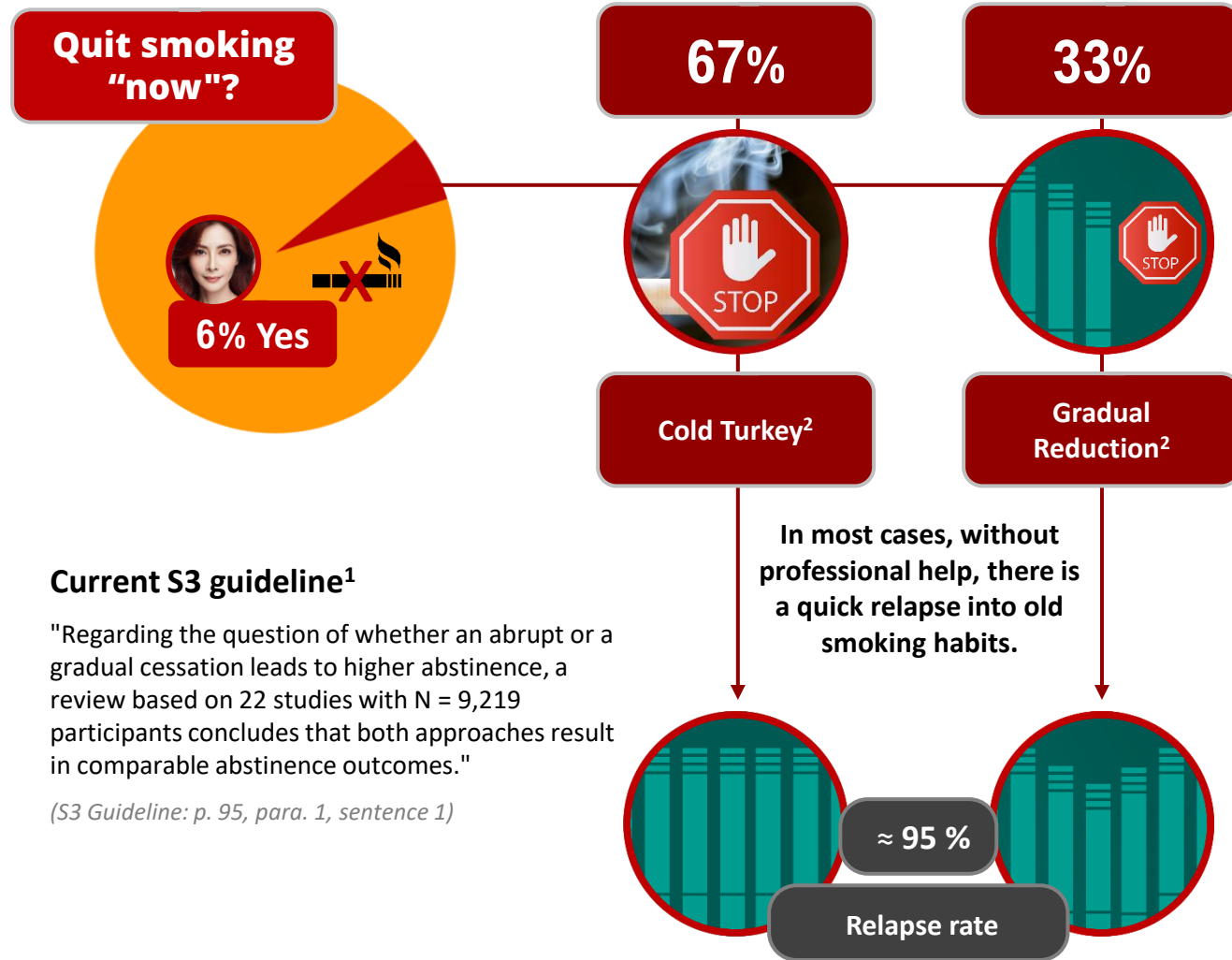
I do not want to quit smoking.

31%

Source:

DEBRA (German Smoking Behaviour Survey) DEBRA Factsheet 05
The Motivation to Quit Smoking Scale (MRS) with survey3³

3. Quit smoking "now"! - Methods of realisation



Current S3 guideline¹

"Regarding the question of whether an abrupt or a gradual cessation leads to higher abstinence, a review based on 22 studies with N = 9,219 participants concludes that both approaches result in comparable abstinence outcomes."

(S3 Guideline: p. 95, para. 1, sentence 1)

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

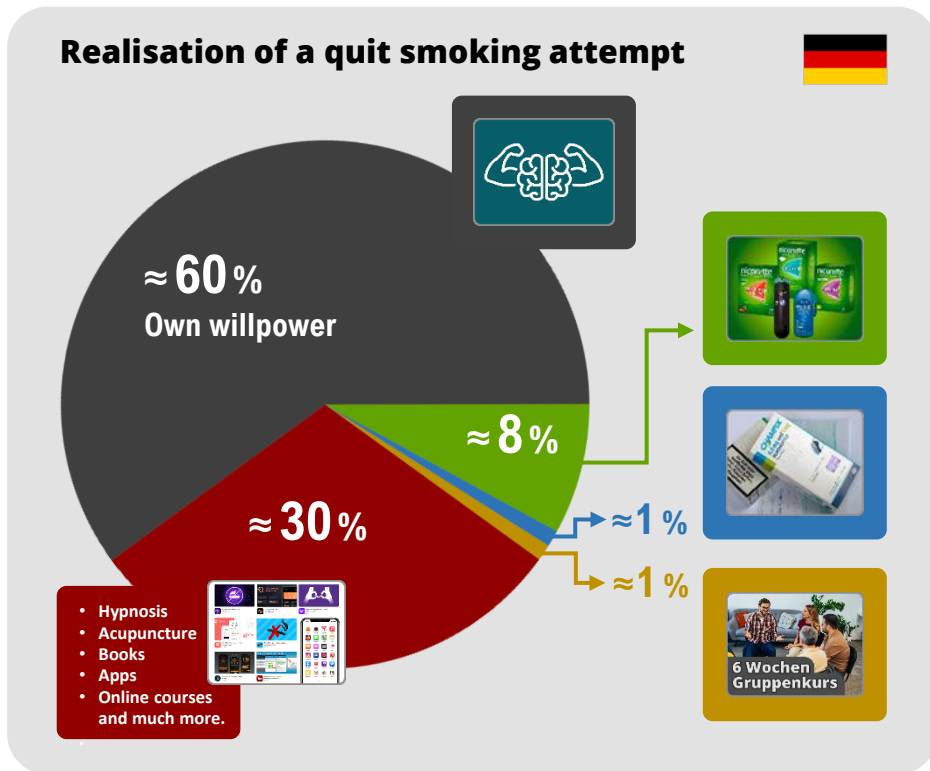
High relapse rates (despite help)

Next attempt to quit smoking is usually postponed for years

4. Relying only on willpower - The wrong strategy

Problem

Attempts to quit smoking on one's own willpower despite a very low success rate, as many smokers overestimate their ability to quit smoking without support. This overestimation leads to the avoidance of evidence-based assistance, in the hope of being successful through their own willpower. Evidence-based assistance, at least, increases the chances of success.



Important! S3 guideline³

"Unlike many other health interventions, individuals seeking to quit smoking are typically not advised by a medical consultant on the most effective method based on scientific evidence. Instead, those affected often inform themselves in a loosely regulated market of tobacco cessation offerings."

Nicotine

Replacement Therapy

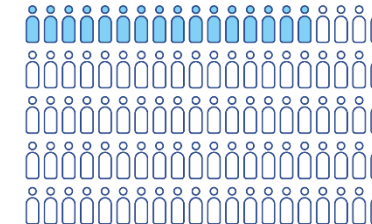


Success rate
≈ 15 %

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).⁴

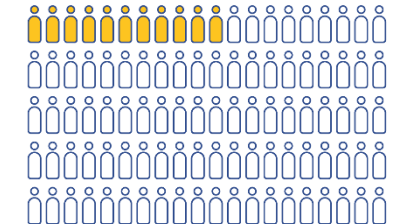
Do nicotine replacement products help to quit smoking? ⁵

Nicotine replacement products



16 out of 100 people who used a nicotine replacement product no longer smoked.*
***(After 6 or 12 month)**

Placebo products



11 out of 100 people who used a placebo product no longer smoked.*

Quelle: Hartmann-Boyce et al. (2018)



1) Source: <https://www.aerzteblatt.de/pdf.asp?id=221166> | Versuch und Scheitern

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


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

4) Source: <https://www.cochrane.de/news/ein-neuer-cochrane-review-untersucht-die-wirksamkeit-von-unterschiedlichen>

5) Source: <https://www.stiftung-gesundheitswissen.de/wissen/rauchentwöhnung/koennen-nikotinplaster-und-co-bei-der-rauchentwöhnung-helfen>

5. Success rates of the most common tobacco cessation methods

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%, die NET nutzten, rauchten nicht mehr. 11%, die ein Placebo verwendeten, rauchten nicht mehr.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/076-006I_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/076-006I_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

6. Barriers to utilizing offers of help

- **Effort**
- **Side effects**
- **Costs**





CiQuit:
No or only low barriers to utilisation

 High willingness to use
 Low willingness to use


Example Germany 

Target group	Method of implementation	Effort during use	Side effects	Costs	Use of the method in %	Quit smoking attempts per year	Success rate
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Covered need - quit smoking „now“! (Methods with high evidence)

10 %	 Own willpower	No	No	No	60 %	1.200.000	≈ 5 %	One goal: Quit smoking YES or NO
	 NRT Nicotine replacement therapy	No	Low	High ≈ 150 - 300 €	8 %	160.000	≈ 15 %	
	 Medication e.g. Zyban, Champix	No	High	High ≈ 150 - 300 €	1 %	20.000	≈ 25 %	
	 Courses with presence	High	No	High ≈ 150 - 250 €	1 %	20.000	≈ 35 %	

Uncovered need - Smoke „less“ first!

60 %		No	No	Medium Subscription	= high willingness to use
		No	No	No ¹	

Several goals:

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



Goal: Inability to abstain > 80%

Current S3 guideline¹



“When planning interventions, it should be considered that with increasing intensity of an intervention, acceptance among the target group and thus their accessibility, as well as the proportion of regular completers, decreases.”
(S3 guideline: p. 97, para. 3, sentence 1)

Comparison of countries²

Use of Nicotine Replacement Therapy (NRT) during an attempt to quit smoking depending on the cost coverage by the healthcare system.

 **Germany**
 Cost coverage **NO**
 **8%**

Using NRT during an attempt to quit smoking

 **England**
 Cost coverage **YES**
 **48%**

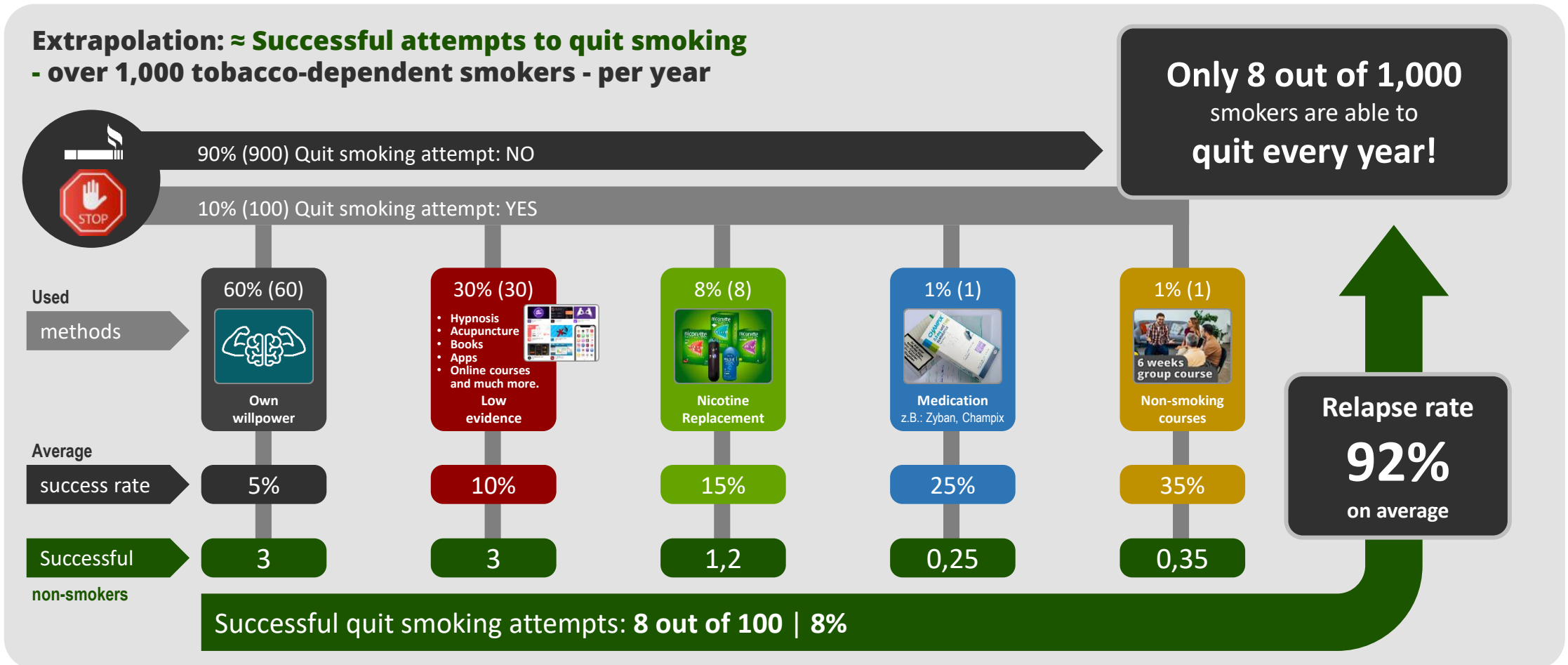
Using NRT during an attempt to quit smoking

1) Cost coverage by health insurance funds as DiGA = digital health application according to MDR |

1) Source: https://register.awmf.org/assets/guidelines/076-006I_S3_Rauchen_-_Tabakabhaengigkeit-Screening-Diagnostik-Behandlung_2021-03.pdf
 2) Source: <https://www.aerzteblatt.de/archiv/211741/Rauchstoppsversuche-und-genutzte-Entwöhnungsmethoden>

7. High relapse rates despite many offers of help

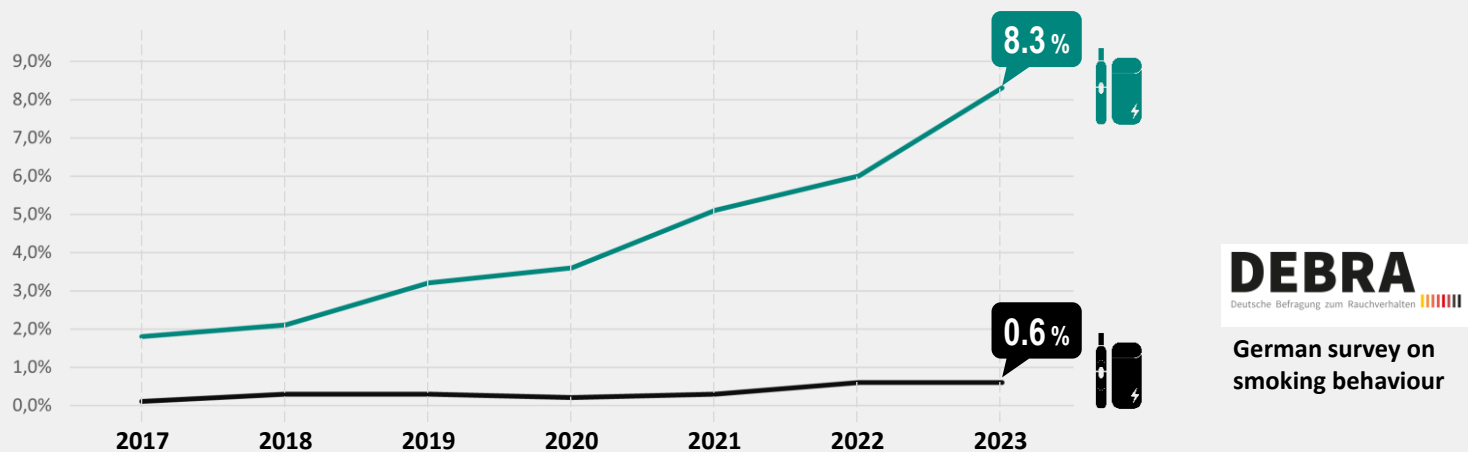
Far too few smokers achieve the leap into permanent abstinence each year.



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

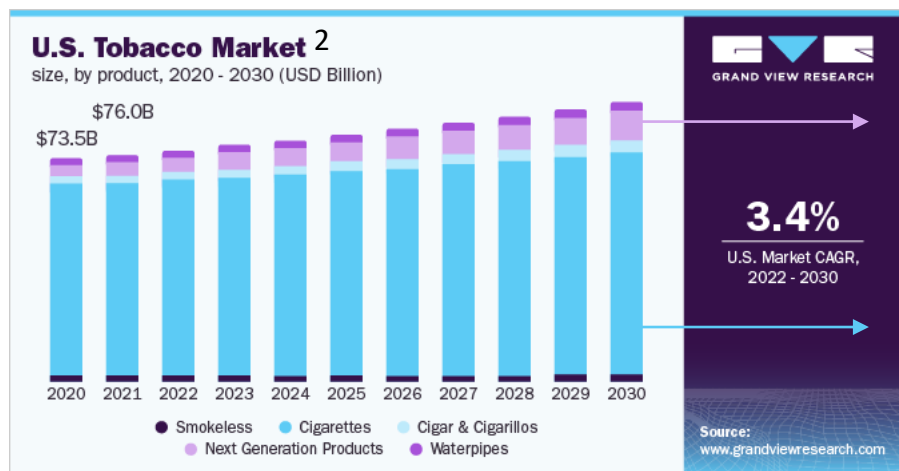
In 2023

- **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



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. 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."

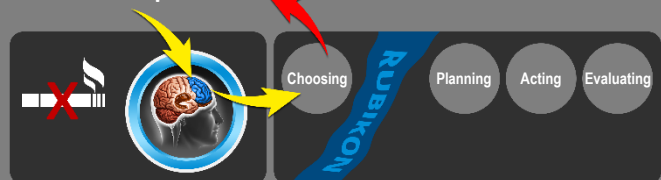
Quit smoking "now"!

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.

10. Quit smoking "now"! - In the context of the Rubicon model

Rubicon model Part 1

Extrinsic motivation
or intrinsic motivation

Rubicon model Part 2

"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."¹

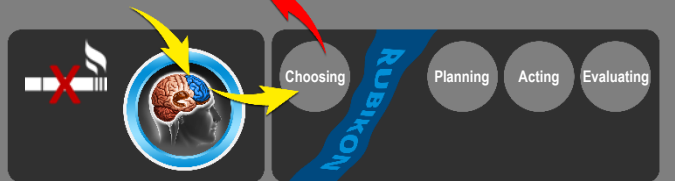
Quit smoking "now"!

Fear of losing something
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- Failed attempts etc

The Rubicon **cannot**
be crossed



No, not now!

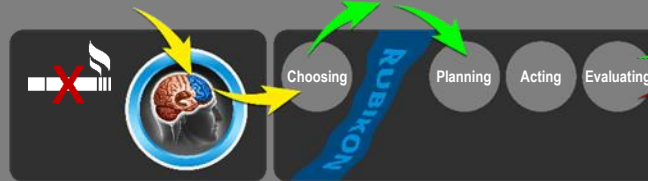
Quit smoking despite inability to abstain

Fear of
"withdrawal symptoms"!

Concern: My suffering will be great and long-lasting

- Less preparation
- Fear of loss
- Fear of failure

The Rubicon is **nevertheless** crossed



Yes, I will!

Permanent
abstinence ✓

Low success rates

Next attempt to quit smoking is usually postponed for years



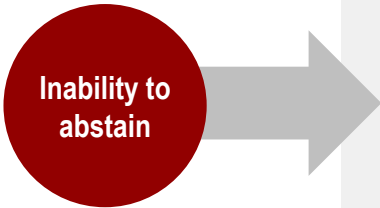
Prof. Dr. Stephan Mühlig
Head of the Psychotherapeutic University
Outpatient Clinic TU Chemnitz

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

11. Quit smoking "now"! - Low success rates

Problem

The inability to abstain prevents successful smoking cessation!



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



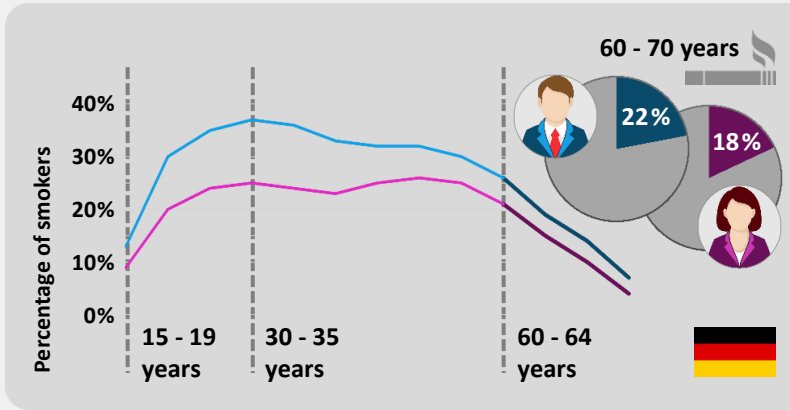
Quelle: J. Henningfield

High level of suffering

High relapse rates (despite help)

Next attempt to quit smoking is usually postponed for years

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



Quit smoking attempt - method and success rate:

Only willpower



≈ 5 %

With a firm resolution to quit smoking for good and never light up a cigarette again, the probability of abstinence is 25% one week after making the resolution and less than 5% six months later.¹ Unaccompanied attempts to stop smoking only lead to success in 3% to 5% of cases.²

Nicotine Replacement Therapy



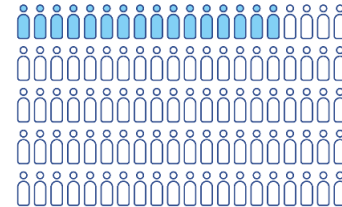
≈ 15 %

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).⁴

Further methods and success rates:
See Appendix 1 to 3

Do nicotine replacement products help to quit smoking?³

Nicotine replacement products



16 out of 100 people who used a nicotine replacement product no longer smoked.*

*(After 6 or 12 months)

Placebo product



1 out of 100 people who used a placebo product no longer smoked.*

Quelle: Hartmann-Boyce et al. (2018)



1) Source: https://www.dhs.de/fileadmin/user_upload/pdf/Broschueren/Suchtmedizinische_Reihe_Tabakabha%CC%88ngigkeit_BFREI.pdf
2) Source: <https://www.aerzteblatt.de/pdf.asp?id=221166> | Versuch und Scheitern

3) Source: <https://www.stiftung-gesundheitswissen.de/wissen/rauchentwoehnung/koennen-nikotinplaster-und-co-bei-der-rauchentwoehnung-helfen>
4) Source: <https://www.cochrane.de/news/ein-neuer-cochrane-review-untersucht-die-wirksamkeit-von-verschiedlichen>

12. Smoke "less" first! with CiQuit - In the context of the Rubicon model

Rubicon model Part 1

6 month (Basic setting)

Or adaptation to the weaning progress.

Rubicon model Part 2

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**



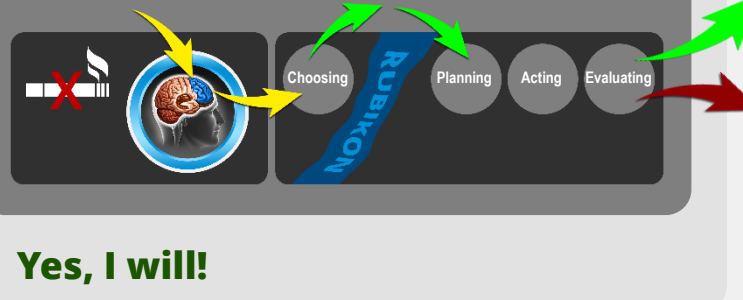
Quit smoking with ability of abstain

Developing an "anticipation" of a smoke-free life!

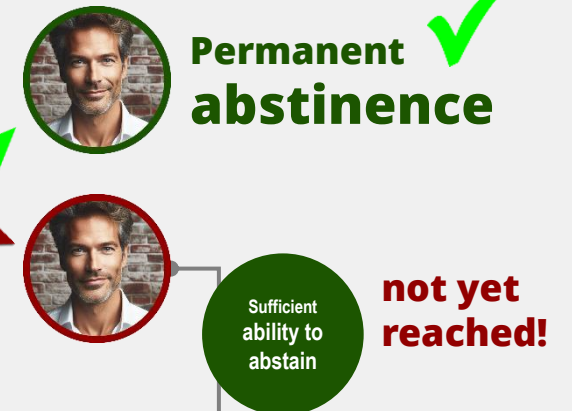
Self-confidence: Smoke-free is a gain in quality of life

- Optimal preparation
- No fear of loss
- No fear of failure

The Rubicon can be crossed **immediately**



- The CiQuit therapy is based on the so-called Rubicon model by Heckhausen and Gollwitzer, a motivation psychology process model that promotes goal-realizing actions through personal resources.
- The therapy guides willing smokers through various stages of maturation— from the conscious desire to quit, through continuous partial successes, to the ultimate goal of lasting abstinence.



Continuation of the CiQuit Therapy

13. Smoke "less" first! with CiQuit - High success rates

Solution

Quit smoking with ability to abstain

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

Ziel **> 80%**

Ability to abstain

9 Indicators of the ability to abstain

1. First cigarette at the earliest 1 hour after waking up
2. 10 or less cigarettes a day
At best 5 or less cigarettes a day
3. **Extremely high motivation to try to quit smoking**
4. Very good control over the smoke impulse
5. High awareness of one's own smoking behaviour
6. Weak link between trigger stimuli and cigarette (reconditioning)
7. Low ambivalent attitude towards cigarettes (Self-confidence to cope with smoking situations - e.g. stress - without a cigarette)
8. No or weak craving during reduction
9. **No or little discomfort about quitting smoking (no fear of failure, no fear of loss)**

Change mental attitude:

Building "**anticipation**" for a smoke-free life!

14. The unfulfilled 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

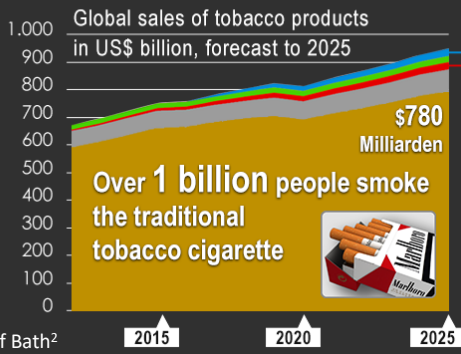
Competitors focus on switching to substitute products or quitting smoking immediately



Enormous healthcare gap

- Uncovered need
- No need
- Covered need

World Health Organization
Around 1.3 billion tobacco consumers



- Tobacco heater
- Smokeless tobacco
- E-cigarettes
- Cigars, cigarillos, tobacco
- Tobacco cigarettes



Covered need = [Tobacco heater icon] + [E-cigarette icon] + [NRT icon]

Offers designed to help replace tobacco cigarettes

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.

e.g.: Nicotine Replacement Therapy

Key-companies: Johnson & Johnson, gsk GlaxoSmithKline, HALEON

Global sales | Forecast 2030
US\$ 3,9 billion⁵

1) Source: Quelle: https://edoc.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>

Thank you very much



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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.