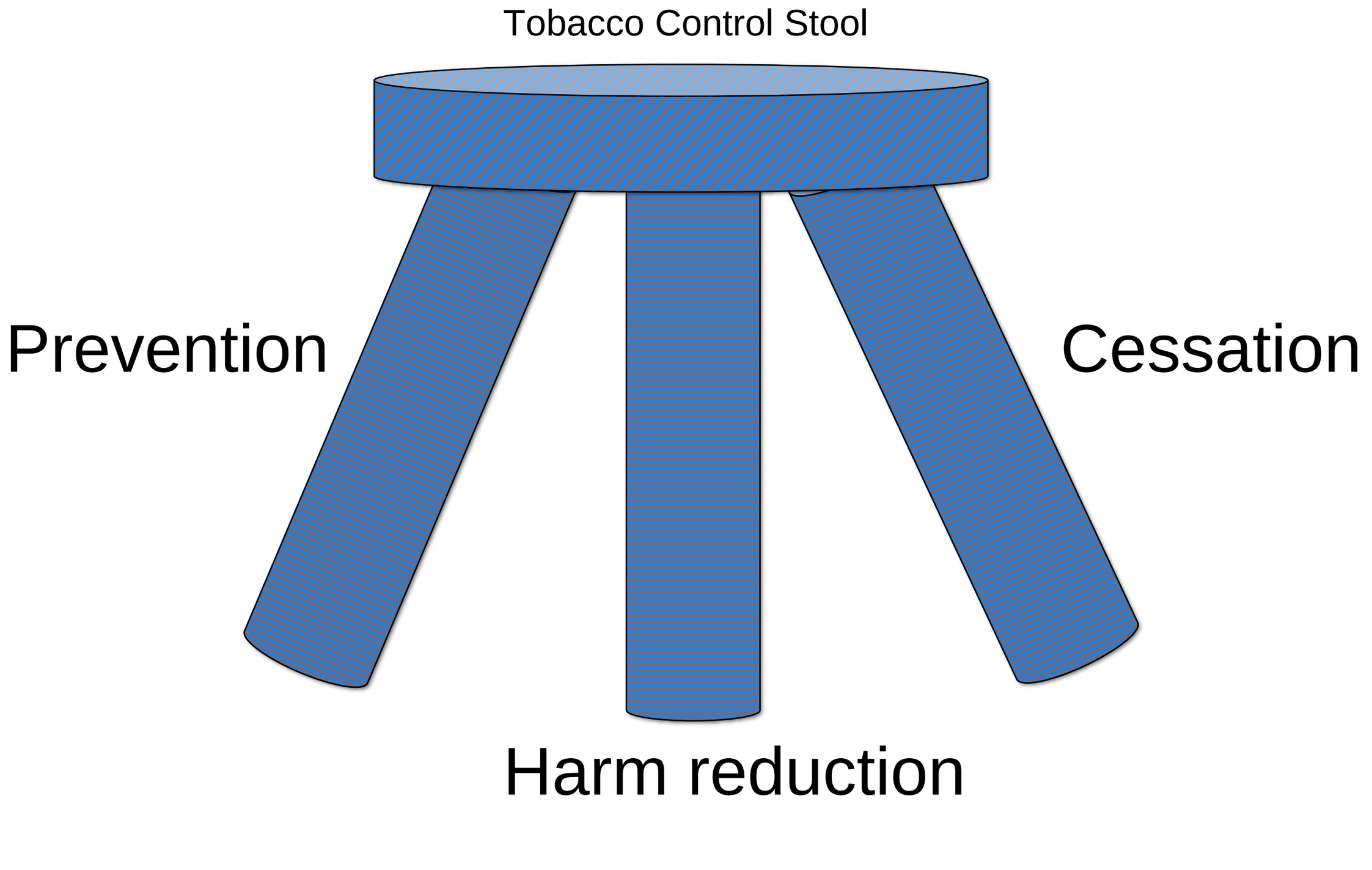
Best practice for brief tobacco cessation interventions

Hayden McRobbie
The Dragon Institute for Innovation

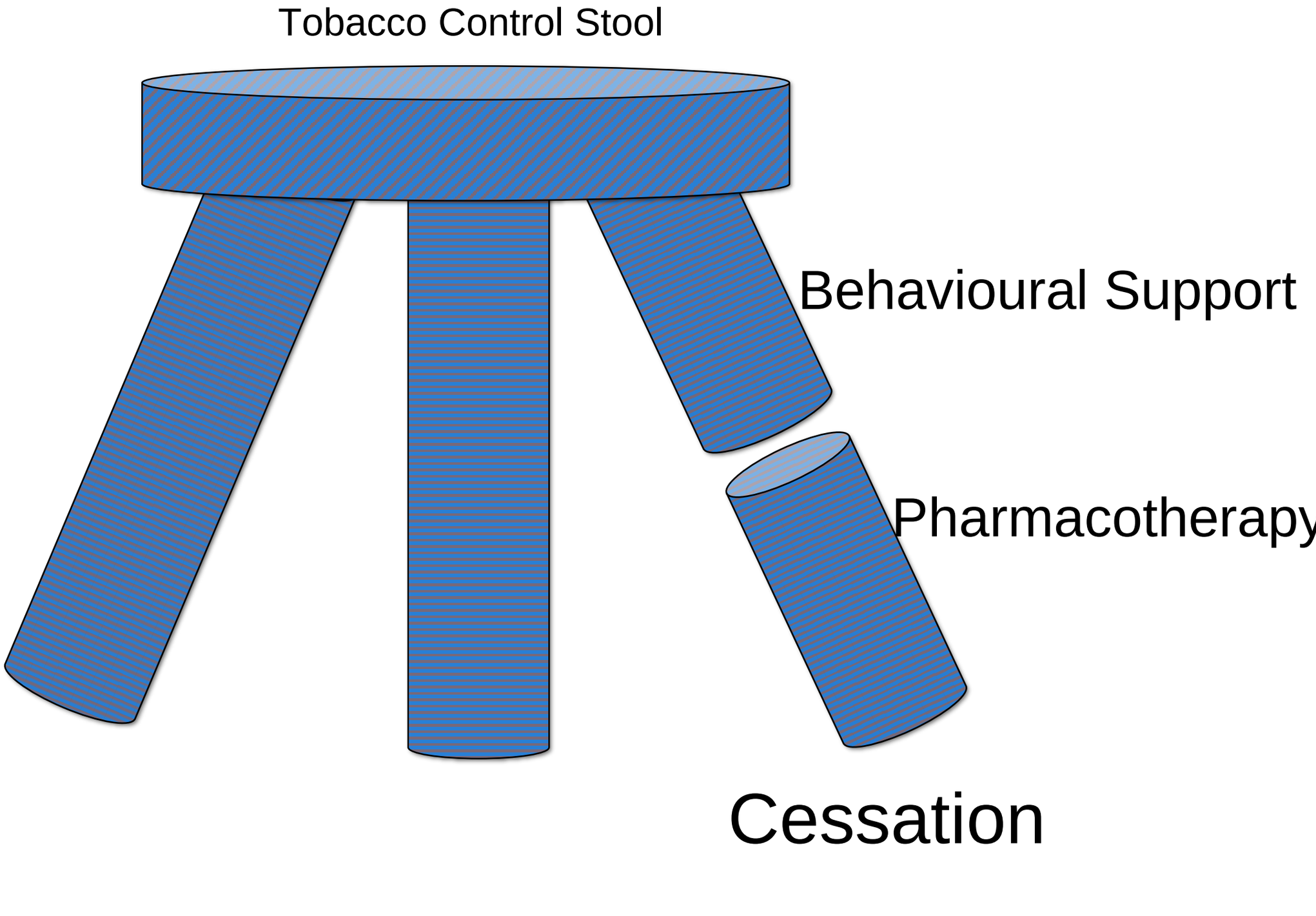
Disclosures

- I am Professor of Public Health Interventions at Queen Mary University of London
- I am the Clinical Director of The Dragon Institute for Innovation
- In the past 5 years have received honoraria for speaking at smoking cessation meetings that have been organized by J&J and Pfizer.
- I have no links with any tobacco or e-cigarette manufacturers.

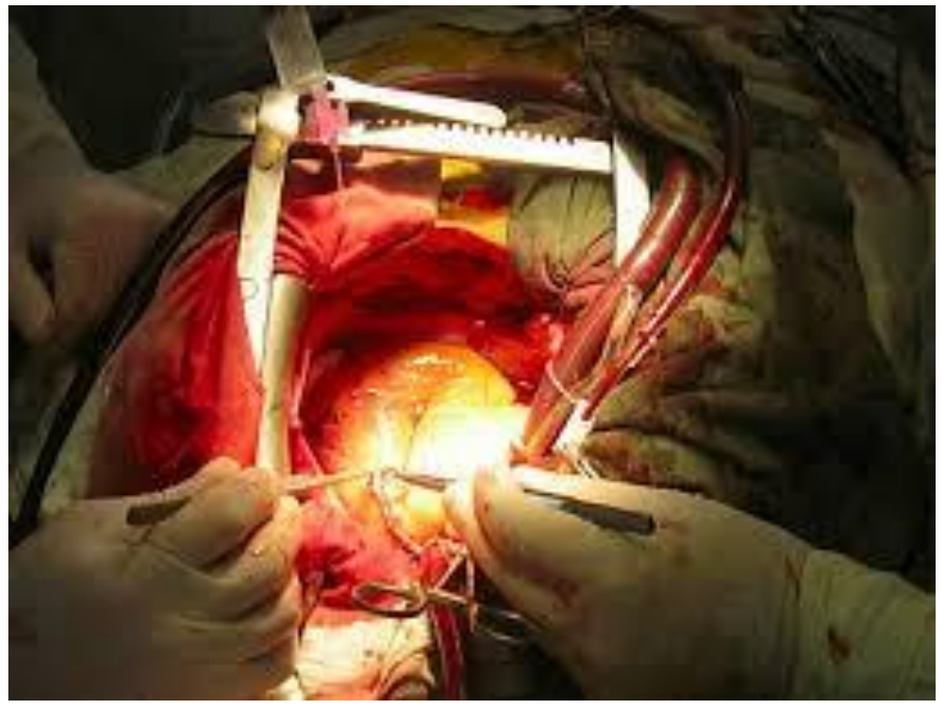
Tobacco control strategies



Tobacco control strategies



Prevention vs. Treatment



Quitline

13 QUIT

137848

Affordability

Intervention	Affordability			
	LIC	LMIC	UMIC	HIC
Text Messages	7.7	11.2	25.9	109.5
Brief advice to quit	2.7	7.8	18.0	12.3
Printed self help materials	2.4	4.6	10.8	19.3
Cytisine	1.7	4.9	11.3	15.0
Nortriptyline	1.4	4.1	9.5	8.6
Proactive Telephone support	1.0	3.8	9.7	4.5
Face-to-face behavioural support	0.9	3.4	8.6	4.0
Bupropion	0.5	1.6	3.7	7.7
Varenicline	0.5	1.3	3.0	9.2
NRT (single product)	0.4	1.0	2.4	6.9

Affordability is the ratio of per capita gross domestic product (GDP) to the cost per life year gained. Interventions with a ratio ≥ 1.0 are deemed affordable

West et al. (2015) Addiction, 110, 1388–1403

Increasing ex-smokers

‘The first law of smoking cessation’

Professor Robert West, UCL

E = N x S

number of ex-smokers created in a given time period

number of smokers who try to stop

probability of success in those who try

Prompting quit attempts

Healthcare Professionals Role

- Health care professionals can increase a patient's odds of quitting with brief advice, medication, and behavioural support [1]
- Tasks
  1. Identifying people who smoke
  2. Motivating a quit attempt
  3. Refer for (or provide) treatment and support
  4. Supporting ongoing abstinence

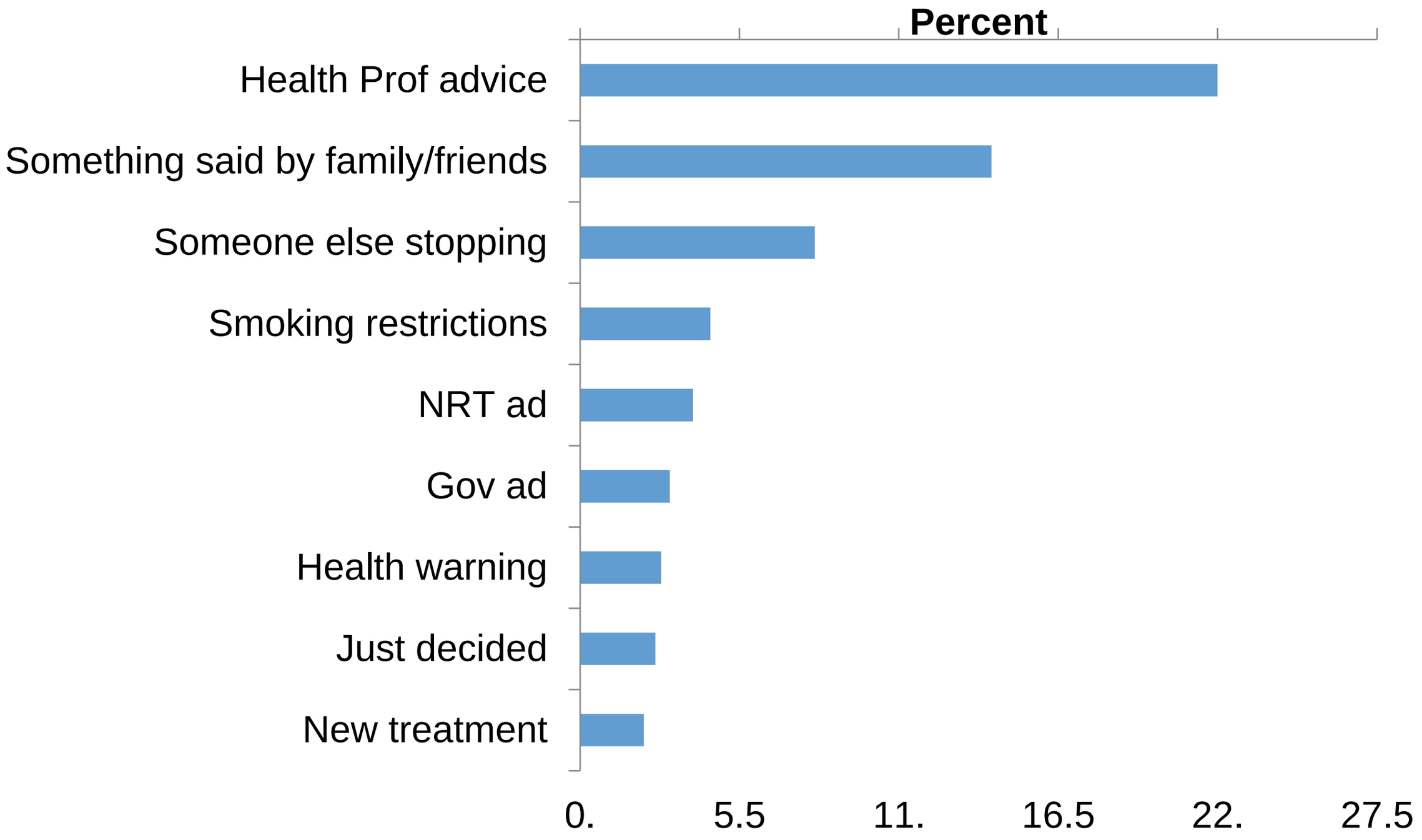
1. AVEYARD P. & WEST R (2007) Managing smoking cessation, *BMJ*, 335, 37-41.

Importance of brief advice

- Brief advice from a healthcare professional prompts people to quit
- RR = 1.66 (95% CI: 1.42-1.94)
- Increases long-term abstinence rates by 1-3 percentage points (above unassisted quit rates, which are around 2-3%)

Stead et al. Physician advice for smoking cessation. Cochrane Database of Systematic Reviews 2013, Issue 5. Art. No.: CD000165.

The ‘conversation’ is a trigger



Source: www.rjwest.co.uk - Smoking Toolkit Study

ABC – but the focus is on offering C

A

Ask about and document every person's smoking status.

Smoking status definitions

- **Non-smoker** has smoked fewer than 100 cigarettes in their lifetime.
- **Ex-smoker** has smoked more than 100 cigarettes in their lifetime, but has not smoked any tobacco in the last 28 days.
- **Current smoker** has smoked more than 100 cigarettes in their lifetime and has smoked tobacco in the last 28 days.

B

Give Brief advice to stop to every person who smokes.

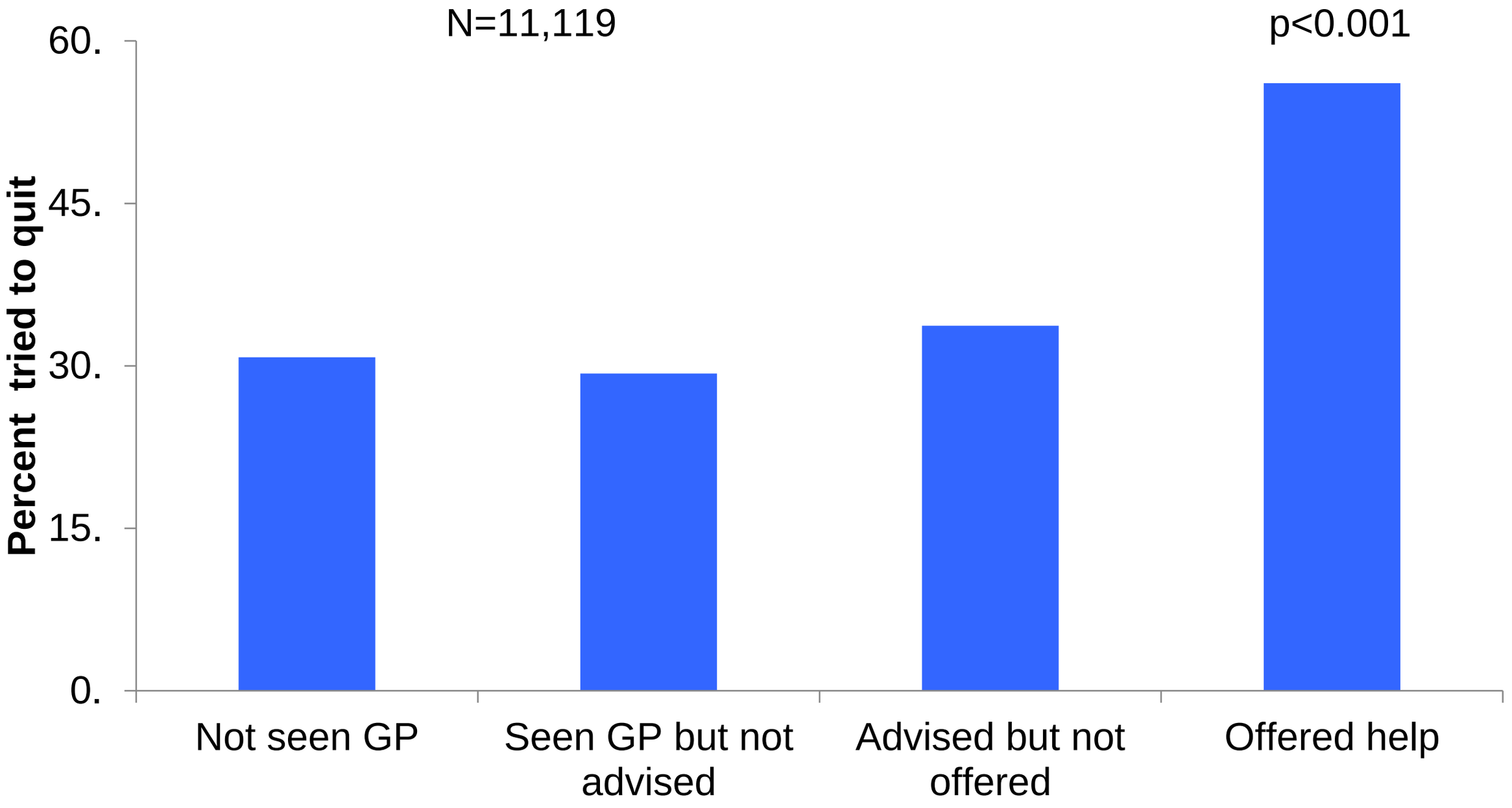
- You can give this advice in 30 seconds.
- Where possible, tailor your brief advice to the person in front of you. Advice could be health or financially related.

C

Strongly encourage every person who smokes to use Cessation support and offer them help to access it. Refer to, or provide, cessation support to everyone who accepts your offer.

- The best results are achieved when a person uses behavioural support and stop-smoking medication in combination.
- Where people choose to use stop-smoking medication, check that they understand how to use it and, later, whether they have experienced any adverse effects.

And it's the offer of support that's important



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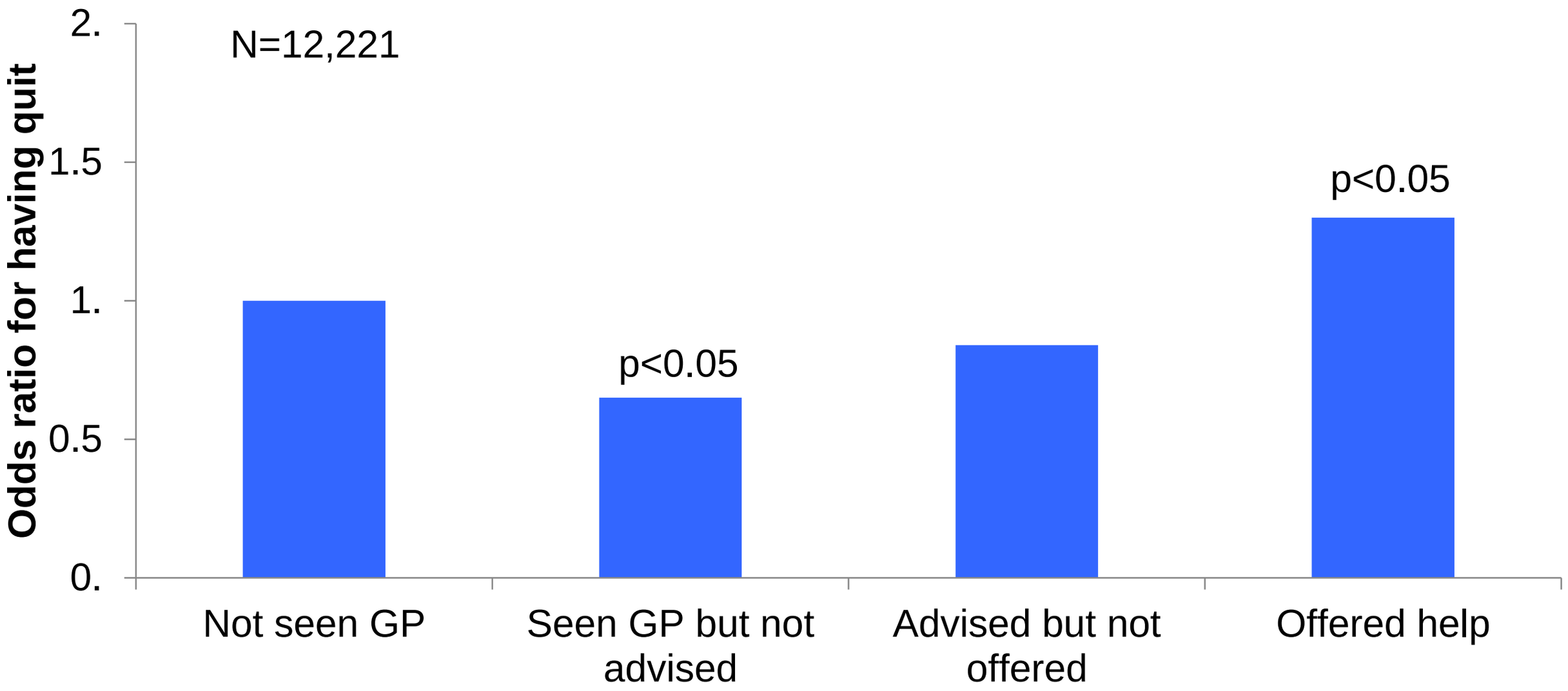
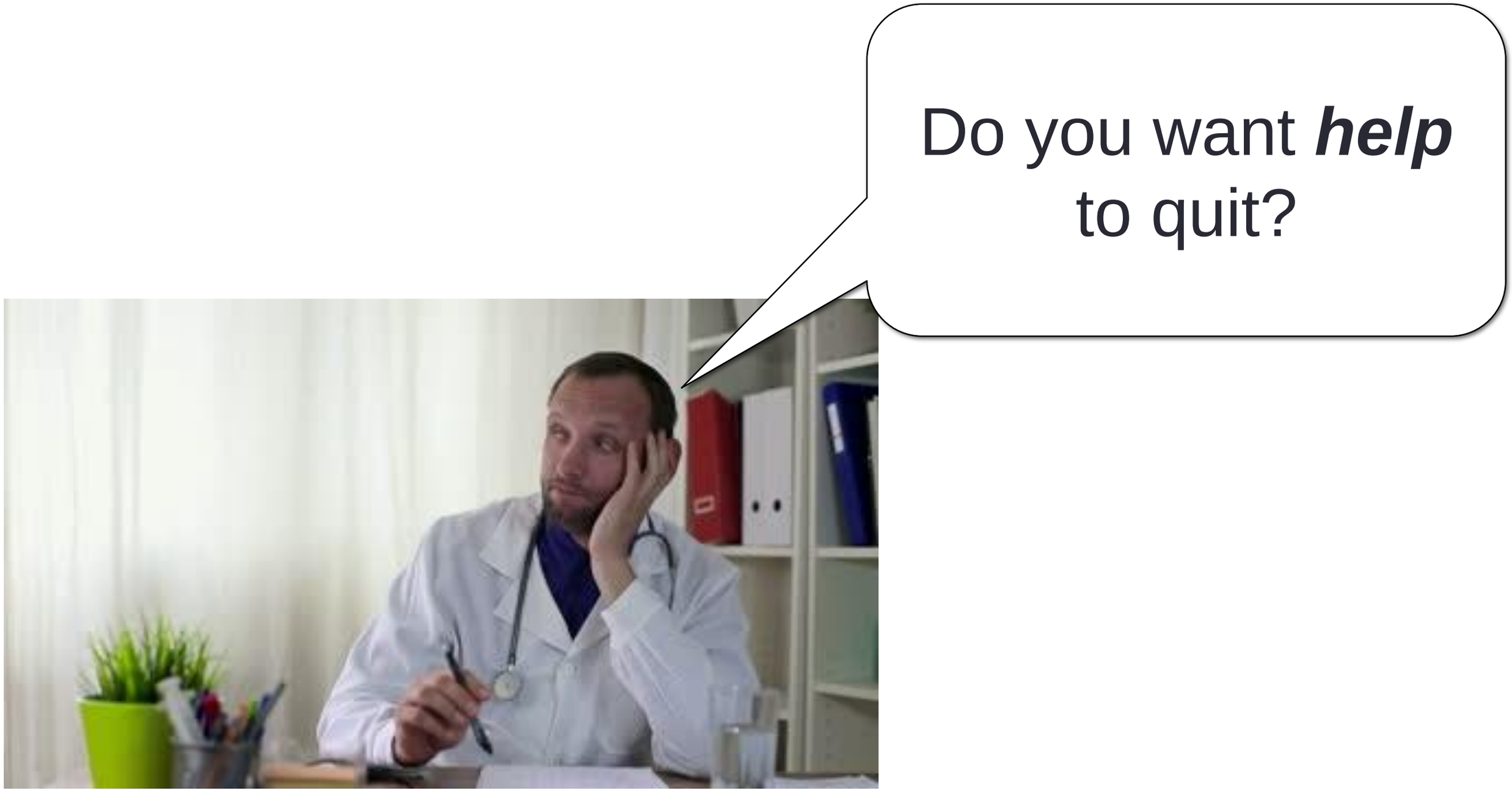
Not advising may be worse than useless



Results of multiple logistic regression adjusting for age, sex and social grade

Source: www.rjwest.co.uk - Smoking Toolkit Study

OK – so what do you want me to say?



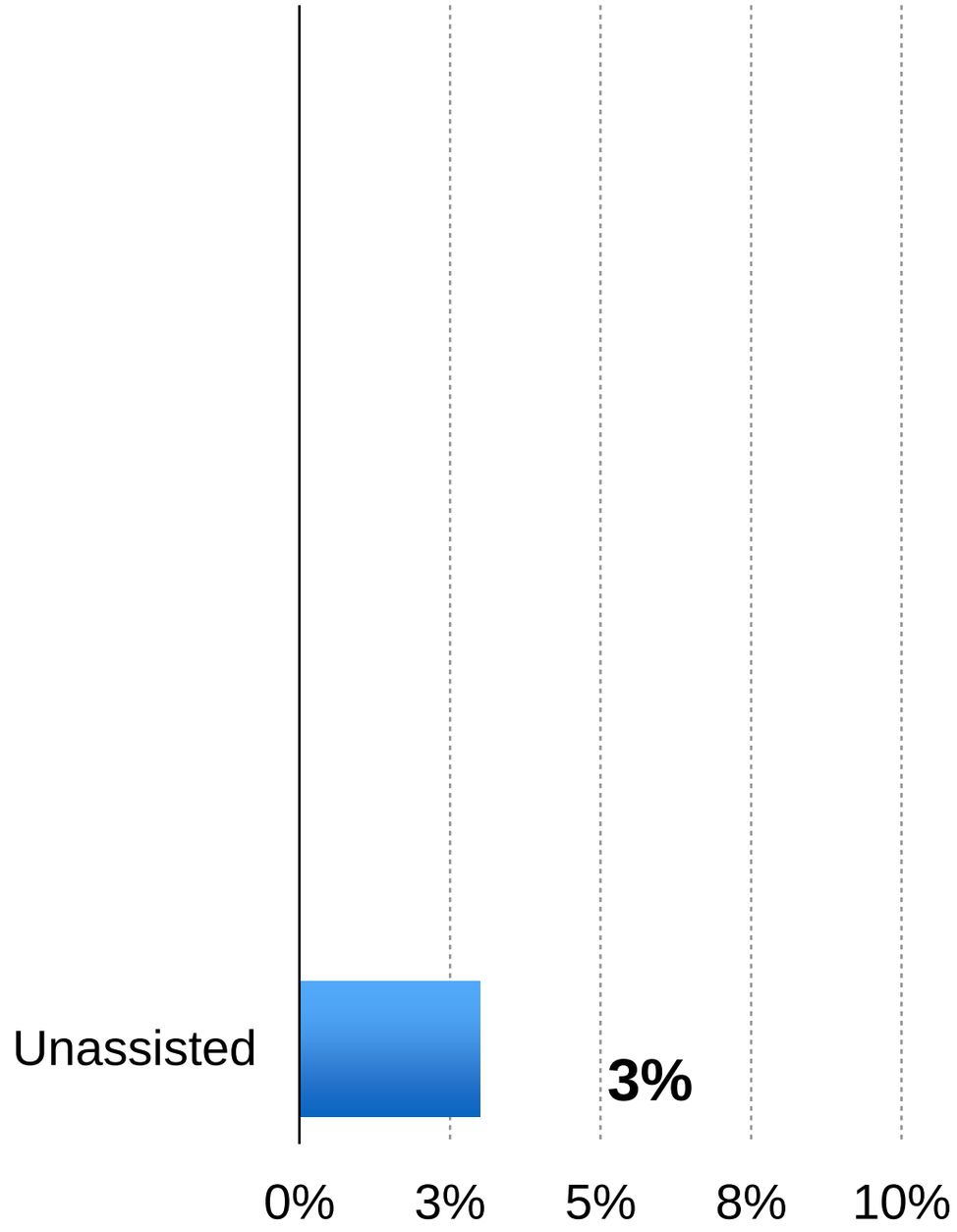
Making an offer of help to quit

- Strongly encourage every person who smokes to use cessation support
- Briefly explain the options
- Make it emotionally salient
- Help people access it – today!

what can you offer?

Behaviour support

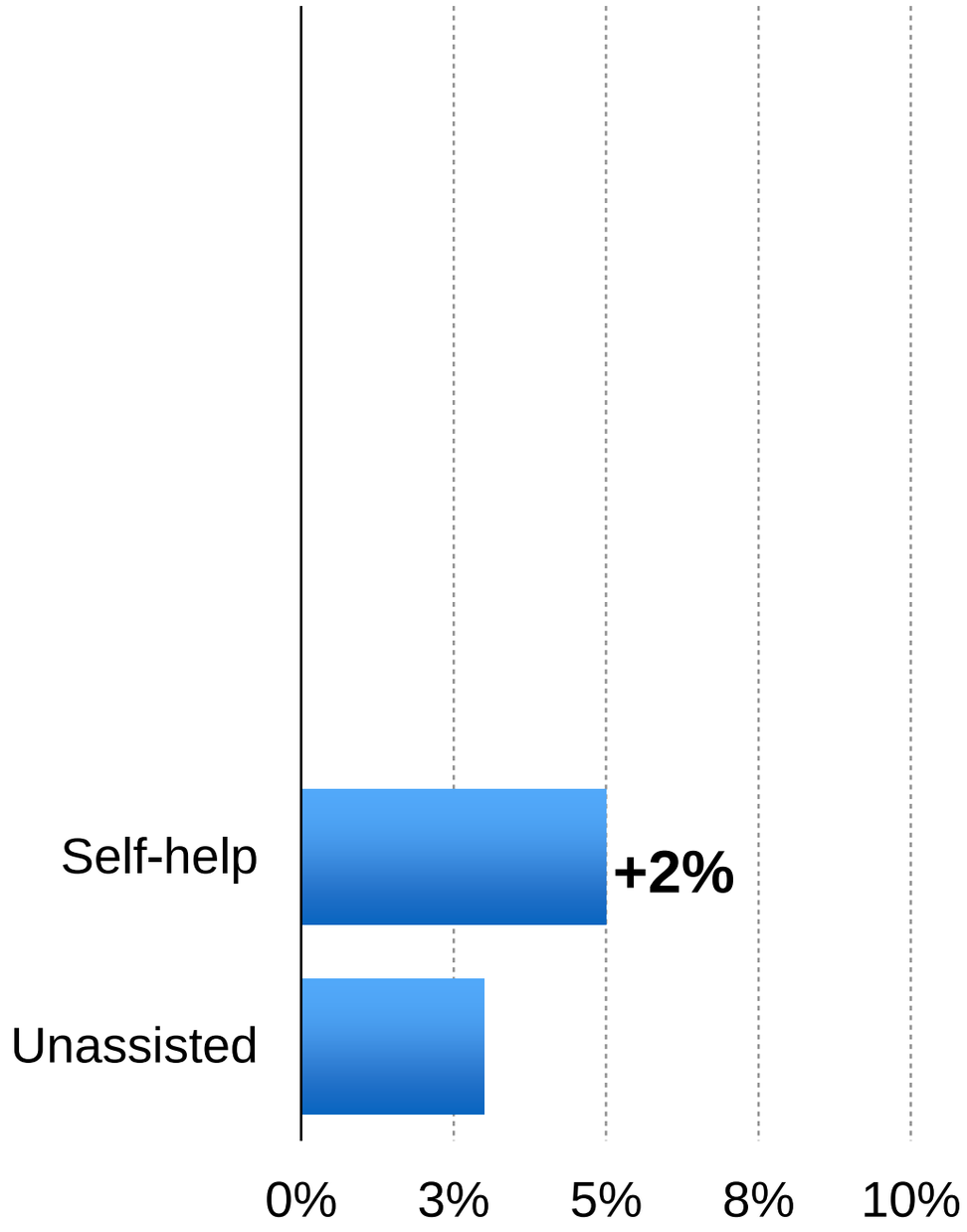
The starting point.



- Unassisted quitting

Self Help Materials

Increases in 6-12 month continuous abstinence rates



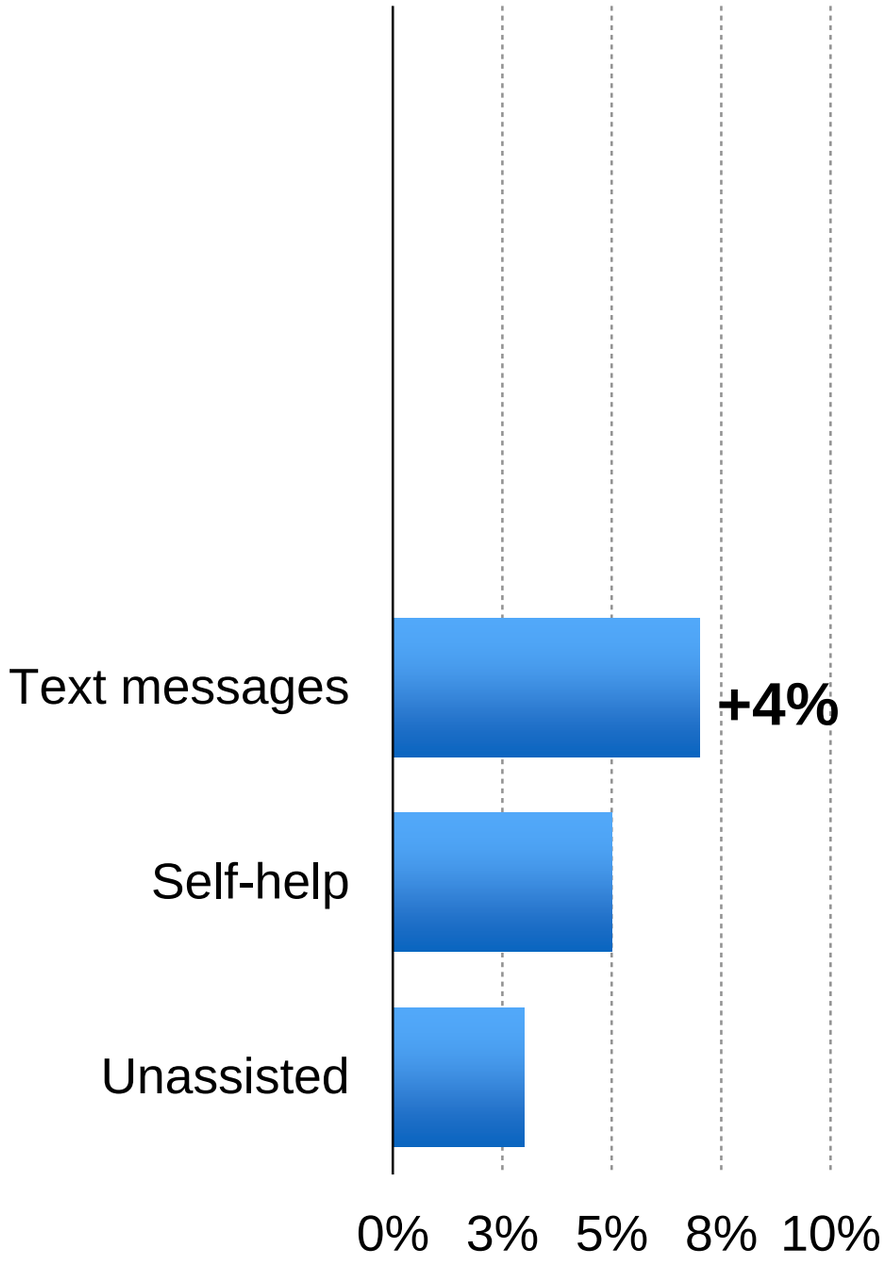
- ‘The sell’ (if this is all you have available)…

- *“I really recommend using this self-help quit book. A lot of my patients have found it really useful. Quitting will still require a bit of work on your part, but the results are definitely worth it!”*

West et al. (2015) Addiction, 110, 1388–1403

Text Messages

Increases in 6-12 month continuous abstinence rates



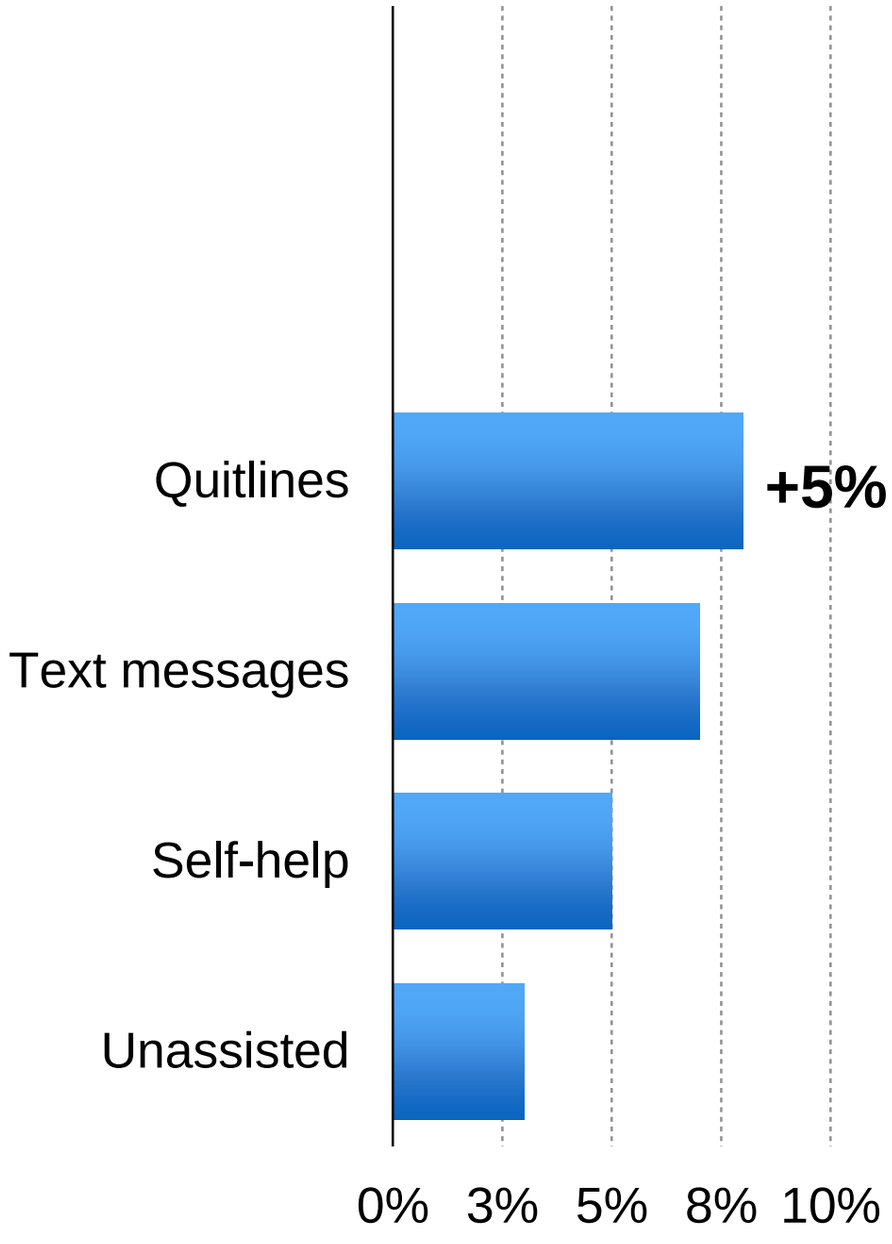
- ‘The sell’…

- *“The Quitline has a brilliant stop smoking programme that is delivered through your mobile phone. This will at least double your chances of stopping smoking for good. It’s free and we can get you signed up today…”*

West et al. (2015) Addiction, 110, 1388–1403

Quitlines

Increases in 6-12 month continuous abstinence rates

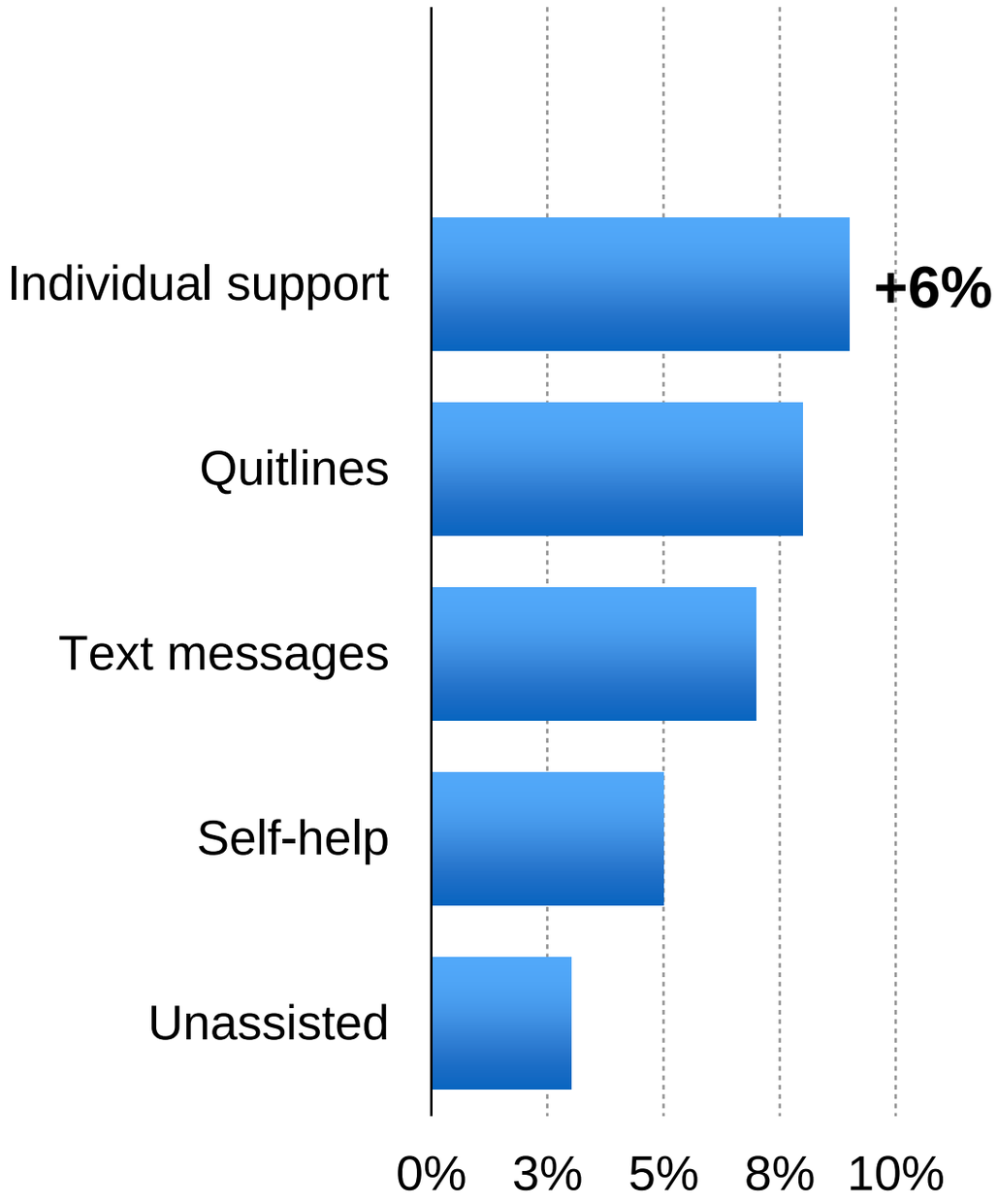


- ‘The sell’…
- *“You’ve probably heard of the Quitline, but do you know how good it is? A number of my patients tell me that it’s a great service and helped them to quit. Its free and they’ll give you expert advice. If you like, I can get them to give you a call…”*

West et al. (2015) Addiction, 110, 1388–1403

Individual support

Increases in 6-12 month continuous abstinence rates

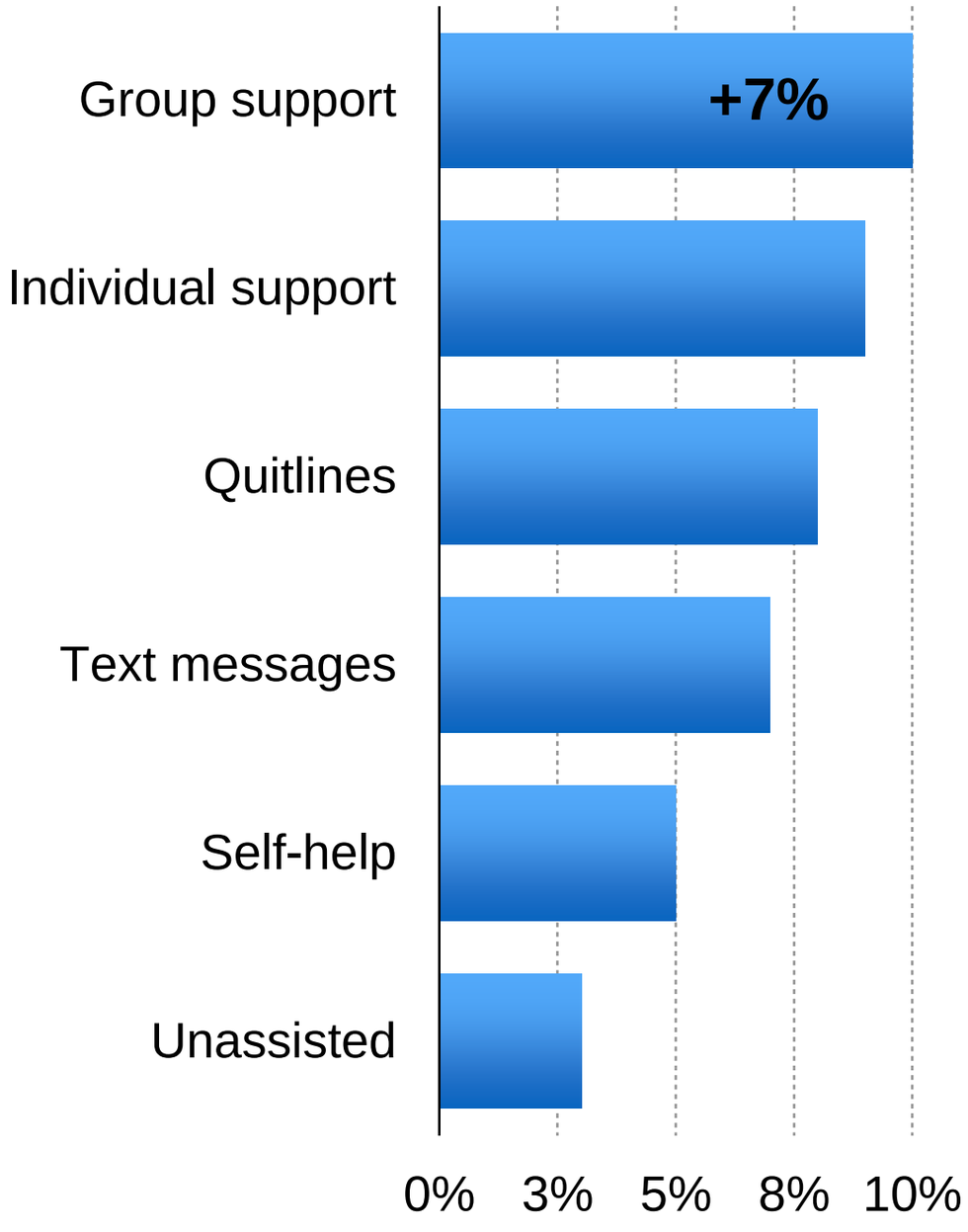


- ‘The sell’…
- *“I’ve just heard about this great new service to help people quit smoking. They use a combination of regular appointments and medicines and are reporting very good quit rates. I highly recommend them, and I can refer you today…what do you think?...”*

West et al. (2015) Addiction, 110, 1388–1403

Group support

Increases in 6-12 month continuous abstinence rates



- ‘The sell’…
- *“One of my other patients is a lot like you, really struggled to quit smoking. I was amazed the other day when they proudly told me they’d given up. When I asked how they told me about how they quit smoking with a group of other smokers. The support is really helpful. I can get you access to this, if you’re keen to find out a bit more …”*

West et al. (2015) Addiction, 110, 1388–1403

The TOP FIVE evidence-based behaviour change techniques

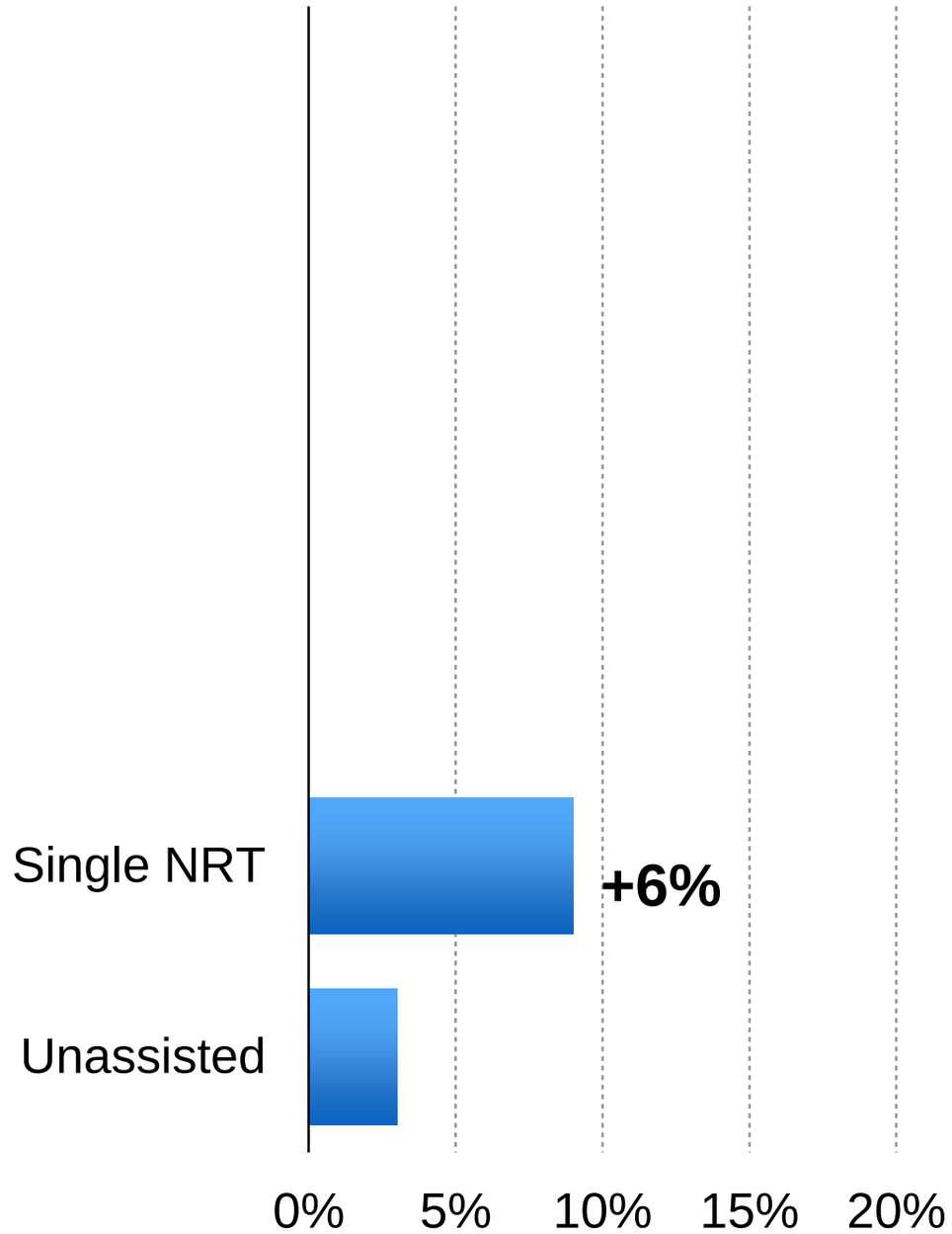
1. Building rapport
2. Use of CO monitoring as a motivational tool
3. Explaining how to use medications
4. Explaining the rationale for ‘not-a-puff’ after quitting
5. Eliciting commitment ‘not-a-puff’

Michie S, Hyder N, Walia A, West R (2011)
Michie S, Churchill S, West R (2011)
West R, Walia A, Hyder N, Shahab L, Michie S (2010)

Stop Smoking Medicines

Single NRT

Increases in 6-12 month continuous abstinence rates

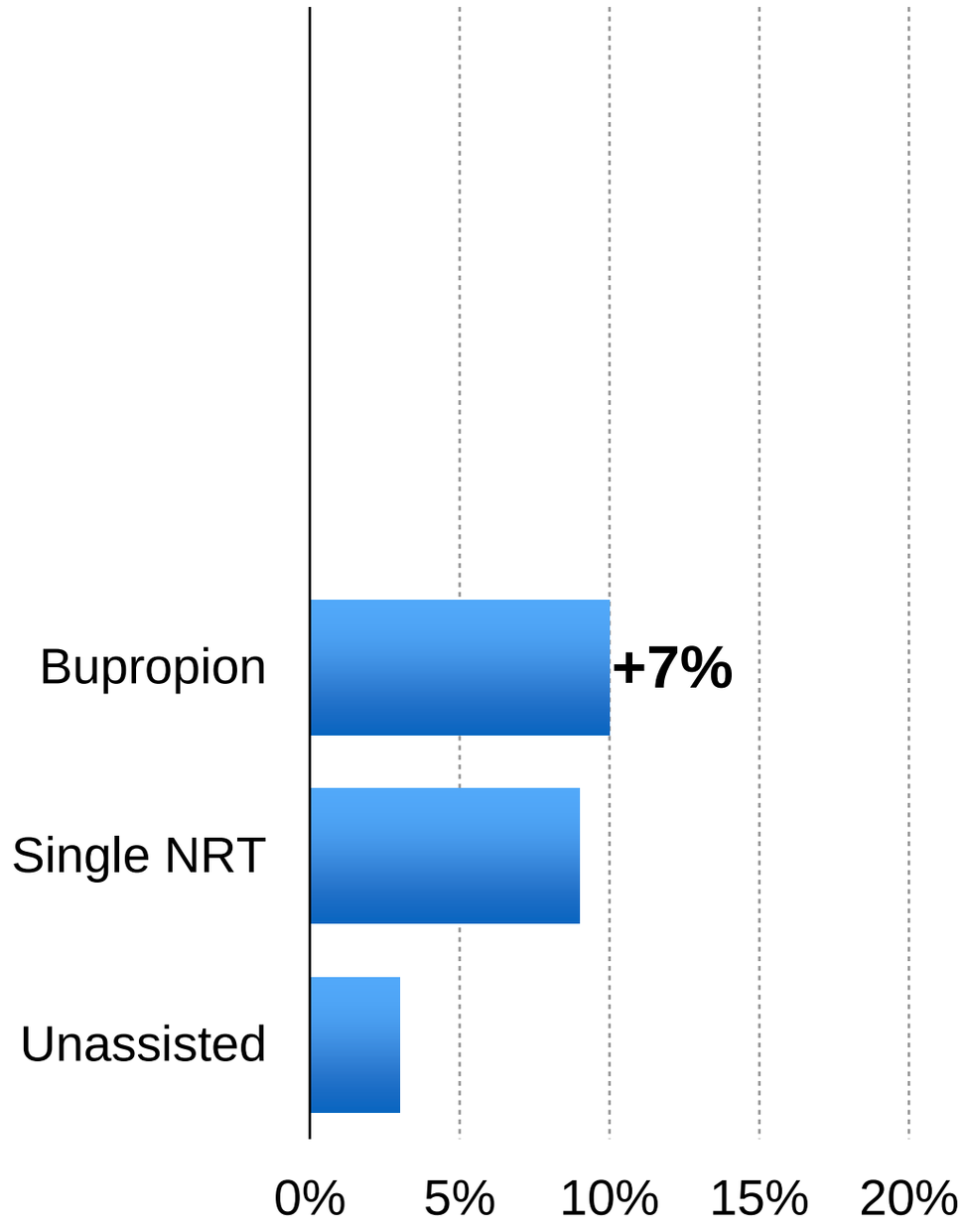


- ‘The sell’…
- “I’d like to encourage you to use a stop smoking medicine. These work to reduce urges to smoking and other withdrawal symptoms that people get when they quit. These medicines are no magic cure, but they will increase your chances of quitting.”

West et al. (2015) Addiction, 110, 1388–1403

Bupropion

Increases in 6-12 month continuous abstinence rates



- ‘The sell’…
- Can use the same message for all medicines, but also provide information on:
  - Specific product usage
  - Length of treatment
  - Common side effects

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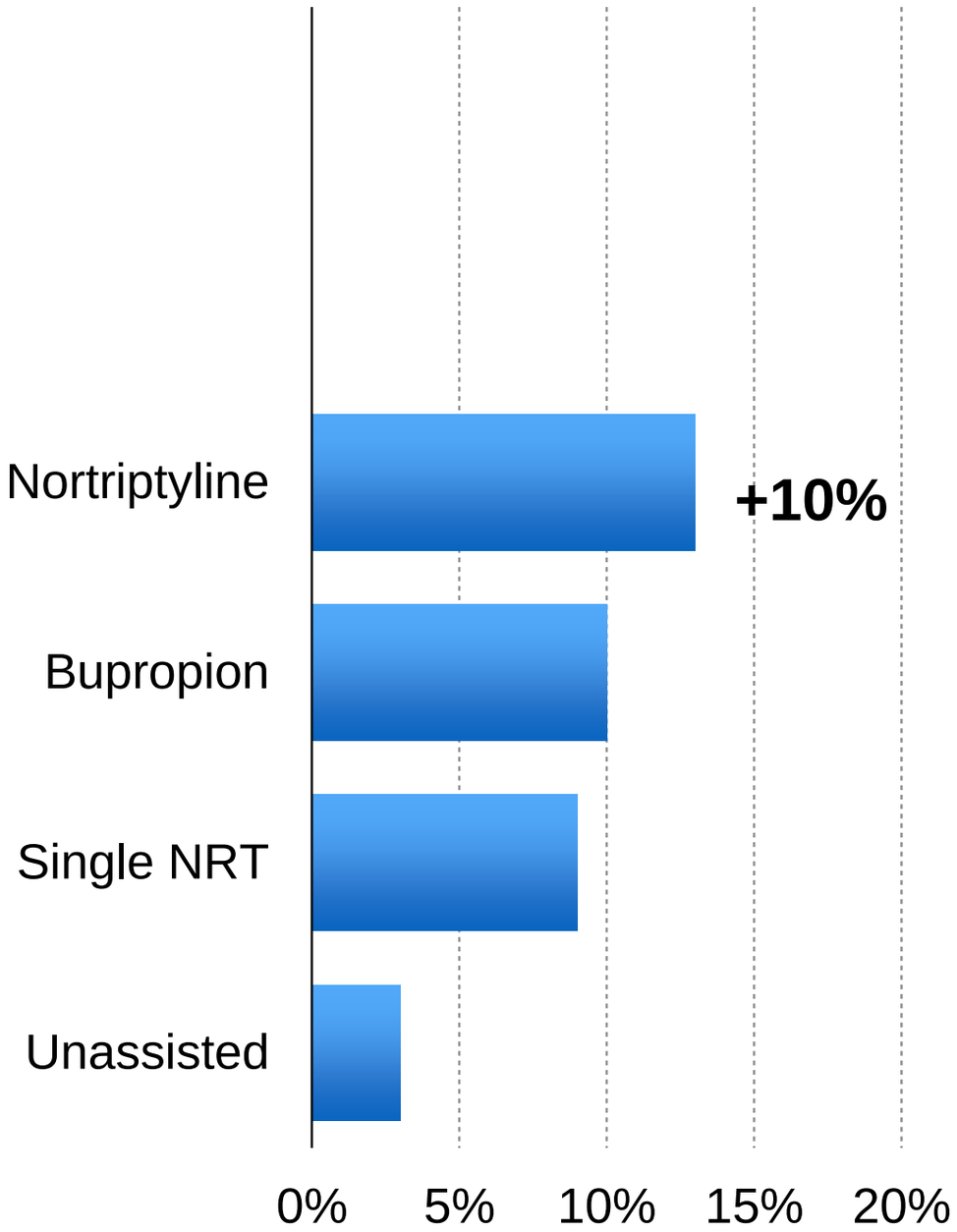
Nortriptyline

Increases in 6-12 month continuous abstinence rates



- ‘The sell’…
- Can use the same message for all medicines, but also provide information on:
  - Specific product usage
  - Length of treatment
  - Common side effects

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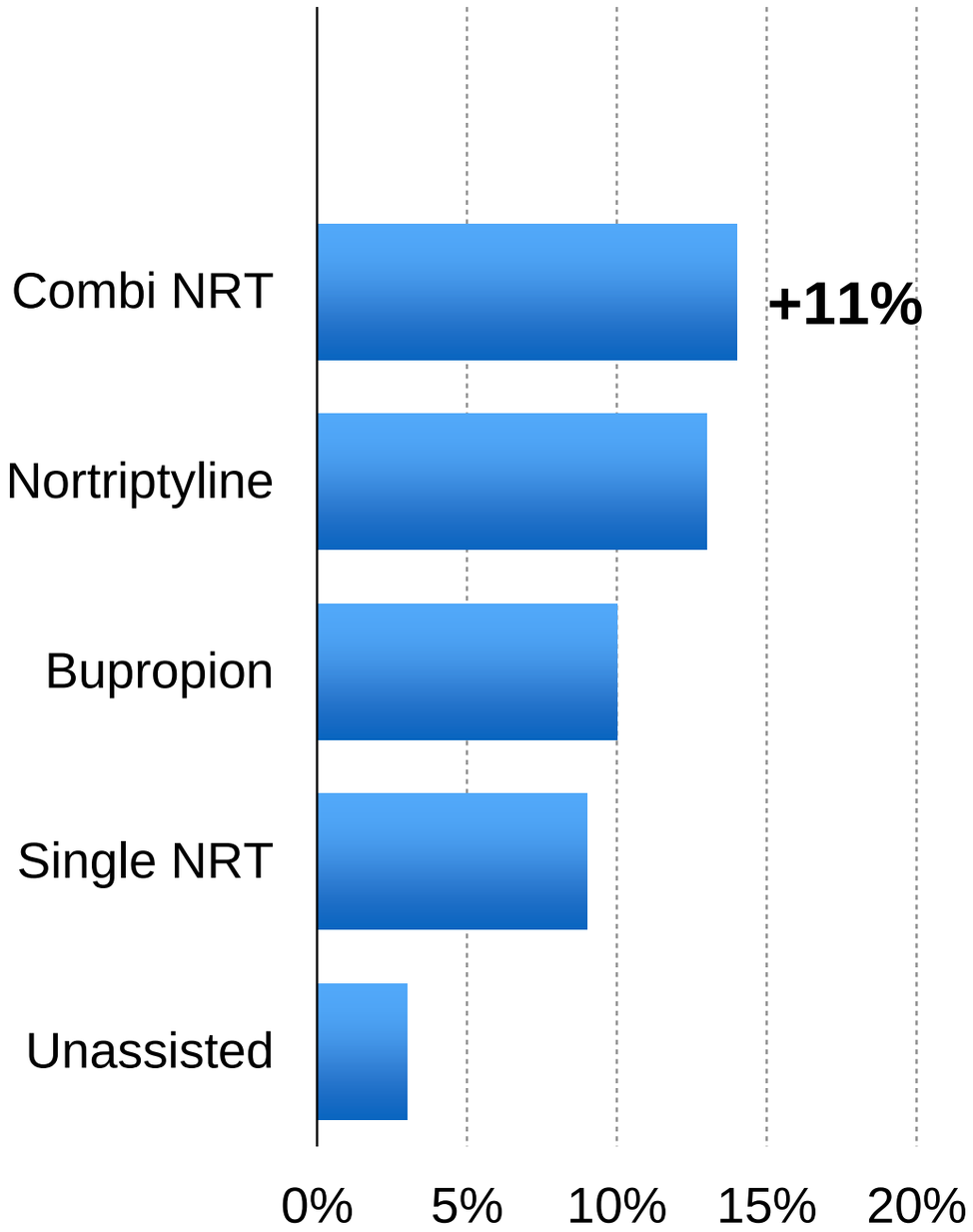
Combination NRT

Increases in 6-12 month continuous abstinence rates



- ‘The sell’…
- Can use the same message for all medicines, but also provide information on:
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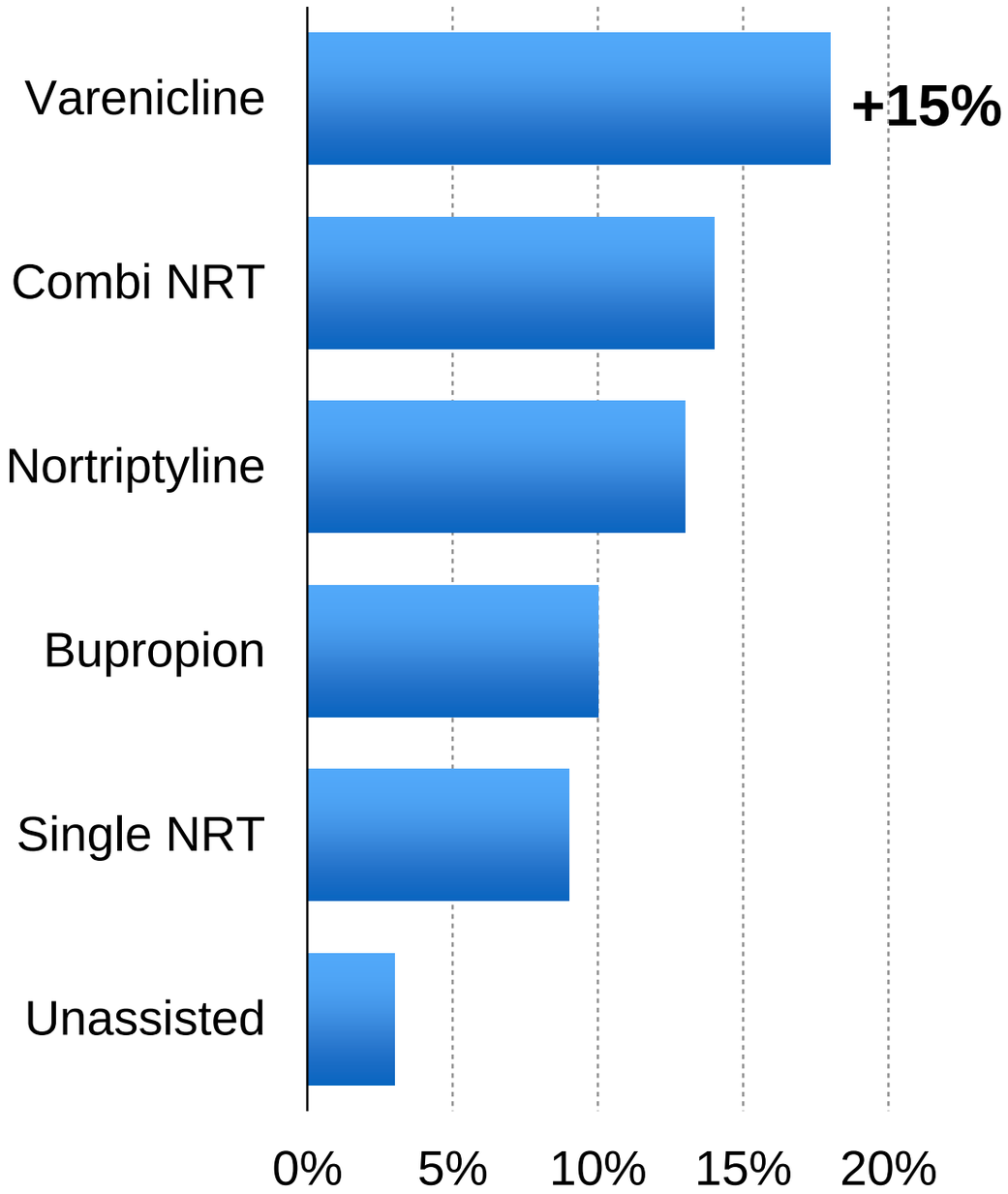
Varenicline

Increases in 6-12 month continuous abstinence rates



- ‘The sell’…
- Can use the same message for all medicines, but also provide information on:
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Client says no

- That’s OK.
- Document a declined offer

OK, I understand that now’s not the right time, but please don’t be offended when I ask you next time I see you. It’s really important for me to do everything I can to help you quit eventually.

You might hear…

Nothing works!

Don’t say

Treatments do work, you’re just not trying hard enough

Do say

I know it might feel like you’ve tried everything, but this service is really worth a go. They’ve got great success rates

You might hear…

Now’s not a good time

Don’t say

Well, I’m going to refer you anyway! The Quitline can sort you out

Do say

I understand now may not be the right time. I also know that quitting can be tough, but we can help make that easier. If you change your mind or would like to know more, just let me know

You might hear…

I'd like to quit, but its just so difficult

Don't say

You just need to put your mind to it.

Do say

I know that quitting can be tough, but we can help make that easier. I'd really recommend…

You might hear…

I've already tried the Quitline

Don't say

Well have you tried yogic breathing…?

Do say

Well, I'd really recommend giving it another go. They've got some new tools to help and offer one of your best chances for quitting for good.

You might hear…

What about I just cut down?

Don't say

Sure, that's better than nothing

Do say

Its good to hear you want to do something about your smoking, however the best health gains are from stopping completely. I know quitting can seem difficult, but I've got some ways to make it easier

You might hear…

I’m under a lot of stress and smoking helps me cope

Don’t say

Yes, I suppose smoking is the least of your worries right now.

Do say

I understand and I know a lot of people that tell me that smoking helps me cope. I’d really like to support you to quit. I have some ways that I can help.

You might hear…

I don’t want to use any stop smoking drugs, they’re risky

Don’t say

OK, that’s your choice.

Do say

It sounds like you have some concerns about using stop smoking medicines. Can I give you a little more information about these?

Conclusions

- People who smoke are expecting you to have a conversation with them about smoking

- Focus on the positive
  - Most know the health risks
  - Most don’t know what assistance is available

- Know how to offer support

- Address concerns that people raise
  - Nicotine doesn’t cause cancer etc.
  - Varenicline does not cause depression/suicide
  - Stop smoking services are not just for those that are ‘hardened smokers’

- Having a conversation about stopping smoking does not take long and can make a difference

Thank you

hayden@thedragon.institute