

Smoking Cessation Guideline



ASK (1 minute)

- ◆ Ask every patient at every visit, including hospital admissions, if they smoke.

ADVISE (1 minute)

- ◆ Urge every tobacco user to quit with a personalized message about the benefits of quitting.

ASSESS (1 minute)

- ◆ Assess the willingness of the patients to attempt to quit within the next 30 days.
- ◆ If the patient is ready to quit, proceed to ASSIST.
- ◆ If the patient is not ready, provide information to motivate the patient to quit and proceed to ARRANGE.

ASSIST (3 minutes +)

- ◆ Refer patients to the NYS Quitline 1-866-NYQUITS (1-866-697-8487) for cessation counseling and information.
- ◆ Inform patients about pharmacotherapy options.

and/or

- ◆ Suggest and encourage use of problem-solving methods and skills for smoking cessation (e.g. identify “trigger” situations).
- ◆ Provide social support as part of the treatment (e.g., “we can help you quit”).
- ◆ Arrange social support in the smoker’s environment (e.g., identify “quit buddy” and smoke-free space).
- ◆ Provide self-help cessation materials.

ARRANGE (1 minute +)

- ◆ Assess smoking status at subsequent visits and, if the patient continues to smoke, encourage cessation.



Guide Your Patients to a Life Free of Tobacco Addiction

Helping your patients with their pursuit of a tobacco-free life takes only a few minutes. This table will help you ask the right questions along the way.

Stages:	Steps:				
Precontemplation: Not yet thinking about quitting	Record patient progress in chart.	Ask , “How do you feel about your tobacco use?”	Show that you understand patients’ feelings.	Encourage patients to consider positives and negatives of tobacco use.	Offer information.
Contemplation: Thinking about quitting within 6 months	Record patient progress in chart.	Ask , “What do you see as the pros and cons of tobacco use?”	Reinforce patients’ reasons for wanting to quit.	Help patients identify more reasons for wanting to stop.	Provide information.
Preparation: Planning to stop using tobacco next month	Record patient progress in chart.	Reinforce , “You’ve made an important decision.”	Ask questions to determine nicotine dependence.	Ask , “Have you decided what day you will stop?”	Offer a longer visit to discuss plan (esp. if drug therapy recommended) and provide information.
Action and Maintenance: Has stopped using tobacco	Record patient progress in chart.	Ask , “How are things going? Have you had temptations or slips?”	Normalize difficulties, encourage and provide specific suggestions for each patient.	Ask about drug therapy (if relevant).	Offer follow-up visits or referral and containing support and provide information.
Regression: Has reverted to using tobacco regularly once again	Record patient progress in chart.	Ask , “How do you feel about quitting?” If discouraged, acknowledge feelings.	Advise that people often attempt to stop several times and learn from their previous experiences.	Offer to help when patient is ready.	



Keys to Effective Communication

1. Ask open-ended question: “How are you feeling about using tobacco now?”
2. Convey understanding: “You seem concerned about the impact of your tobacco use on your daughter.”
3. Acknowledge/affirm attempts to quit: “It has been stressful, but you haven’t used tobacco in two weeks. That’s a major accomplishment.”
4. Summarize the key issues: “On the one hand, tobacco helps you cope with stress; on the other, you are worried about your health.”
5. Encourage patients to focus on reasons to quit: “What is the most important reason you have for wanting to stop using tobacco?”

Suggestions for the clinical use of pharmacotherapies for smoking cessation



Pharmacotherapy	Precautions/ Contraindication	Side Effects	Dosage	Duration	Availability	*Individual Cost
First-line Pharmacotherapies (Approved by the FDA for smoking cessation)						
Bupropion SR	History of seizure History of eating disorder	Insomnia Dry mouth	150 mg every morning for 3 days, then 150 mg twice daily (begin treatment 1-2 weeks pre-quit)	7-10 weeks maintenance up to 6 months	Zyban (Rx only)	\$3.79/day (2 doses)
Nicotine Gum/Mint		Mouth soreness Dyspepsia	1-24 cigs/day: 2 mg gum/mint (up to 24 pieces per day) 25+ cigs/day: 4 mg gum/mint (up to 24 pieces per day)	12 weeks	Nicorette Gum Nicorette Mint (OTC only)	\$.46/2-mg piece \$.51/4-mg piece
Nicotine Inhaler		Local irritation of mouth and throat	6-16 cartridges/day	3 months followed by gradual weaning off inhaler over 6-12 week period	Nicotrol Inhaler (Rx only)	<\$.80/ cartridge
Nicotine Nasal Spray		Nasal irritation	16 sprays/day	8 weeks followed by gradual weaning off inhaler over 4-6 week period	Nicotrol NS (Rx only)	\$5.19/day
Nicotine Patch		Local skin reaction Insomnia	21 mg/24 hrs 14 mg/24 hrs 7 mg/24 hrs 15 mg/16 hrs	4 weeks then 2 weeks then 2 weeks 8 weeks	Nicoderm CQ (OTC only) Nicotrol⁺ (OTC only) Generic patches (Rx and OTC)	Brand name patches: \$3.57/day Generic: \$2.79/day



Not all drugs are covered by all plans. Check with your health plan regarding coverage.

The information contained within this table is not comprehensive. Please see package inserts for additional information.

* Prices based on retail prices of medication as listed at www.cvs.com, June 2003.

⁺ Based on price listed at www.drugstore.com.

Source: Fiore MC, Bailey WC, Cohen SJ, et al. Treating Tobacco Use and Dependence. Clinical Practice Guideline. Rockville, MD: US Department of Health and Human Services. Public Health Service. June 2000.