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Smoking Cessation Patient Intervention in Connecticut Primary Care Clinic

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Newtown,
Connecticut

Fay Abdullah

September
2020

Dr. Eurica
Chang

Smoking Cessation Patient Intervention in Connecticut Primary Care Clinic

Introduction

Cigarette smoking is associated with numerous health effects including cancer, cardiovascular disease, respiratory disease and adverse reproductive effects.¹ As such, USPSTF recommends clinicians ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA)-approved pharmacotherapy for cessation to adults who use tobacco, with a Grade A recommendation.²

The aim of this project is to develop a consistent method for providing patients at the Newtown Primary Care facility in Newtown, Connecticut with a smoking cessation intervention during their annual physical exam.

¹Office of the Surgeon General (US); Office on Smoking and Health (US). *The Health Consequences of Smoking: A Report of the Surgeon General*. Atlanta (GA): Centers for Disease Control and Prevention (US); 2004.

²Siu AL; U.S. Preventive Services Task Force. Behavioral and Pharmacotherapy Interventions for Tobacco Smoking Cessation in Adults, Including Pregnant Women: U.S. Preventive Services Task Force Recommendation Statement. *Ann Intern Med*. 2015;163(8):622-634. doi:10.7326/M15-2023

Costs of Smoking in Connecticut

According to a Connecticut study using software distributed by the Centers for Disease Control and Prevention, the total cost, including direct and indirect smoking-related costs, was estimated to be \$944 million, or \$287 for each man, woman, and child in the state of Connecticut.¹

¹Adams ML. The public health impact and economic cost of smoking in Connecticut--1989. *Conn Med.* 1994;58(4):195-198.

Community
Perspective
(members of
Newtown,
Connecticut)



“Smoking hastens your demise. There is not enough effort at all to decrease smoking.”



“The first time, the patient will ignore you. Nag nag nag eventually gets through. At around the 3rd or 4th nag, the patient will quit.”

Intervention & Methodology

The proposition is to dedicate a portion of the annual physical exam at Newtown Primary Care to smoking cessation. Patients who smoke will be counseled on the “5 A’s” of smoking cessation via adding the following questions to the physical exam patient interview:

1. Ask whether the patient smokes.
2. Advise every tobacco user to quit.
3. Assess the tobacco user’s willingness to make a change.
4. Assist the tobacco user in making a quit attempt.
5. Arrange for a follow-up within 2 weeks.¹

Result:

Printout for clinicians
as a reminder to utilize
the “5 A’s” method.



5 A's of Smoking Cessation

1. Ask whether the patient smokes.
2. Advise every tobacco user to quit.
3. Assess if this tobacco user willing to make a change.
4. Assist the patient willing to make a quit attempt.
5. Arrange for a follow-up within 2 weeks.



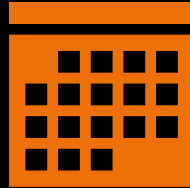
Newtown Primary Care

170 Mt. Pleasant Road
Newtown, CT 06470

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Effectiveness & Limitations



Evaluation

Patients' progress will be tracked at follow-up appointments. The first will be within 2 weeks, then at 1 month, 3 months, 6 months, and 12 months.



Limitations

1. Clinicians' time constraints can lead to inconsistency in interviewing.
2. Response biases from patients can limit accuracy.
3. Patients may fail to follow-up.

Recommendations for Future Interventions

- 1. Token economy behavioral therapy that incentivizes patients to quit smoking.
- 2. Biofeedback method that provides patients with real-time health data to influence their negative habits.

References

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