

Make 'em Quit!

(If it was only that easy)

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Objectives

At the completion of the presentation, the participants will be able to:

- Screen & assess for tobacco use and exposure to environmental tobacco smoke
- Conduct a “Five A’s” model brief intervention for tobacco cessation
- Identify patient education resources for use in tobacco cessation
- Describe pharmacotherapy for tobacco cessation
- Document intervention(s) for tobacco cessation.
- Refer patients who use tobacco to intensive cessation services

Clinical Practice Guideline

- Focus on Chapters 2 and 3 – practical aspects of a brief intervention
- Guideline also includes:
 - Intensive interventions for smokers
 - System interventions – cost effectiveness
 - Actual evidence and recommendations
 - Treating specific populations
 - Glossary
 - Appendixes (including coding information p.231)

Key Findings Pages 6-8

1. Tobacco dependence is a chronic condition
2. Important to document tobacco status
3. Treatments are effective for everyone
4. Brief interventions are effective
5. Practical & social support counseling most effective
6. Encourage medication use
7. Counseling & medication are effective alone, but more effective together
8. Telephone Quit Lines are effective
9. Motivational treatments are effective for those unwilling to quit
10. Tobacco treatments are cost effective

Guide for Brief Interventions

Page 38

- Three Patient Types
 1. Tobacco users who are willing to quit
 2. Those who are unwilling to quit now
 3. Those who recently quit



5 A's Page 39

 Ask

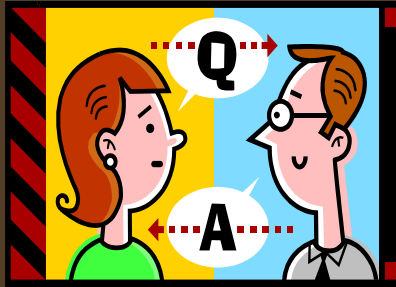
 Advise

 Assess

 Assist

 Arrange

Ask — Page 40



- Every patient (age 11 and up)
- Every visit (record as a vital sign)
- Record present use, historical use, exposure to secondhand smoke

Advise — Page 41

**Current
Smoker**



**Former Smoker
– recently quit**



Advise – Page 41

- For current smokers:
 - Give a clear, strong, and personalized message
 - Urge every smoker to quit

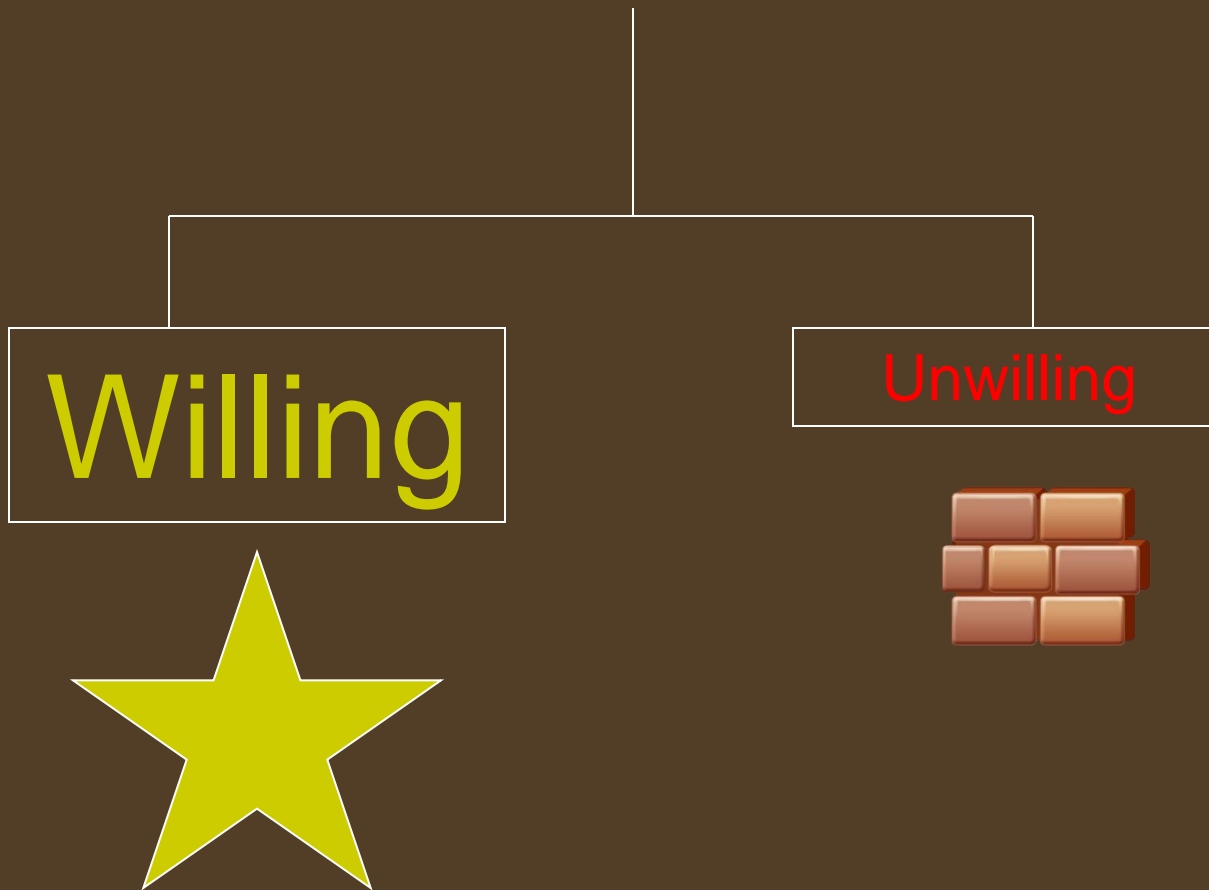


Assess – Page 41

Assess every tobacco user's willingness to make a quit attempt at this time



Assist – Page 42



Willing to Quit – Page 42

1. Assist with Quit Plan



Set a quit date (within 2 weeks)

Tell family members and co-workers

Anticipate challenges

Remove tobacco products from
environment

Willing

2. Recommend the use of approved medications (if appropriate) – Pages 44-56



1st & 2nd Line Tobacco Treatments

- 1st Line

- OTC – Nicotine gum, patches, and lozenges
- Rx – Nicotine nasal spray or inhaler
bupropion SR (Zyban)
varenicline (Chantix)



- 2nd Line

- clonidine (see FDA package insert)
- nortriptyline (see FDA package insert)

Willing

3. Provide practical counseling - Pg. 98

- Recognize danger situations
- Develop coping skills
- Stress abstinence



4. Provide intra-treatment support - Pg. 99

- Encourage patient in the quit attempt
- Communicate caring and concern
- Encourage patient to talk about quitting



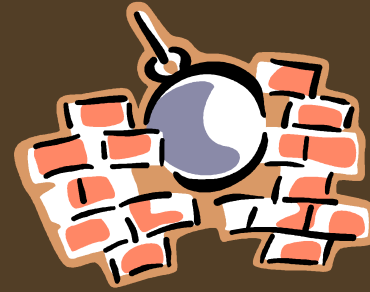
5. Provide supplementary materials

- Quit Line number 1-800-QUIT NOW

Assist – Page 42



Unwilling



- 5 R's (motivational intervention) – Page 59
 - R**elevance – why is quitting personally relevant?
 - R**isks – identify potential negative consequences
 - R**ewards – identify potential benefits of quitting
 - R**oadblocks – identify barriers to quitting
 - R**epetition – used at each visit for an unwilling patient

Arrange — Page 43

Arrange for follow-up contact, either by phone or in person during the first week after the quit date

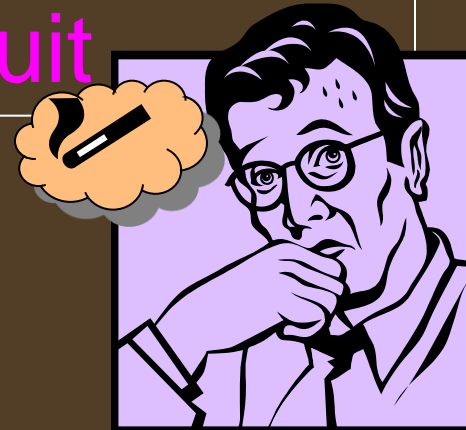


Advise — Page 60

Current
Smoker



Former
Smoker –
recently
quit



Assess — Page 61

- For former smokers who have recently quit:
 - How long has it been since you quit?
 - Do you still have any urges to use tobacco?
 - Do you have challenges to remain tobacco free?

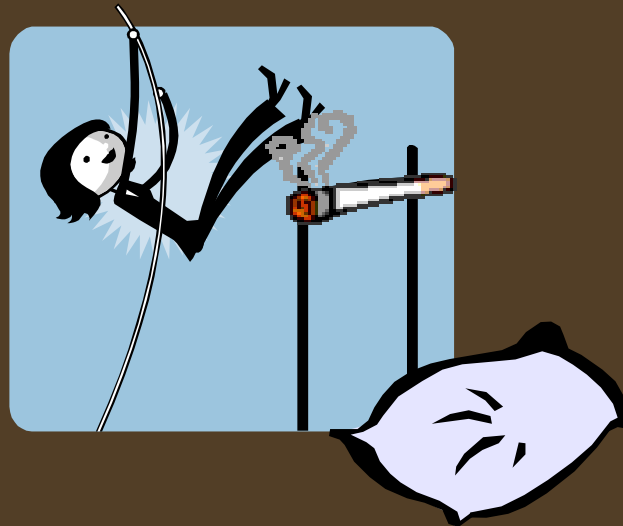
Assist — Pages 61

The former tobacco user should
receive congratulations on any success
and
strong encouragement to remain abstinent



Arrange — Page 61-62

All patients who have recently quit
or still face challenges
should receive follow-up
for continued assistance and support



Contact Information

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