

Positive Quality Intervention: Smoking Cessation

Description: This PQI aims to provide screening, treatment options, and additional patient resources for smoking cessation.

Background: Smoking and other forms of tobacco use can cause various different types of cancer, including but not limited to lung, mouth, and esophageal¹. A smoker's cancer risk is between two and ten times higher than a nonsmokers. Smoking cessation can reduce the risk of lung cancer by 30-50% in 10 years compared to those who continues to smoke². They can also reduce their risk of mouth and esophageal cancer by half within five years of quitting. While quitting can be daunting for patients, there are many ways a provider can support their journey by offering education, pharmacological and non-pharmacological therapies.

PQI Process: Tobacco dependence is a two-part problem – physical and behavioral. Smoking cessation should be individualized to address both the addiction and the habit, by utilizing motivational interviewing to strengthen the patient's commitment to change. Use the following four steps of motivational interviewing in conjunction with the 5 A's or 5 R's for patients willing or not willing to quit smoking, respectively.

1. Engage
 - Establish a trusting and respectful relationship by using open-ended questions, affirmations, and expressing empathy
 - Collaborate on goal setting and ways to achieve them
2. Focus
 - Maintain direction, reflect, summarize, and identify discrepancies
3. Evoke
 - Determine underlying concerns and resolve ambivalence to change
 - Assess desire, ability, reasons, and needs to quit smoking
4. Plan
 - Utilize a plan personalized to the patient's needs

For patients willing to quit: 5 A's³ [Motivational Interviewing Questions for the 5 A's](#)

1. Ask about tobacco use and exposure in every health encounter
 - Non-daily and intermittent smokers may not identify as a smoker
2. Advise to quit by offering education about benefits of tobacco cessation
3. Assess willingness to make an attempt to quit
4. Assist with the quit attempt: brief counseling, medication (refer to additional resources)
 - Combination nicotine replacement therapy (NRT) and behavioral training is most effective, with a 21% success rate⁴
5. Arrange a follow-up counseling session and provide continuing support

Patients not willing to quit: 5 R's

1. Relevance - use motivational information relative to the patient's disease status, family or social situation, health concerns, age, and other important patient characteristics
2. Risks - encourage the patient to identify potential negative consequences of tobacco use and highlight those that seem most pertinent to the patient
3. Rewards - identify benefits most rewarding to the individual patient

IMPORTANT NOTICE: NCODA has developed this Positive Quality Intervention platform. This platform is intended as an educational aid, does not provide individual medical advice, and does not substitute for the advice of a qualified healthcare professional. This platform does not cover all existing information related to the possible uses, directions, doses, precautions, warning, interactions, adverse effects, or risks associated with the medication. The materials contained in this platform do not constitute or imply endorsement, recommendation, or favoring of this medication by NCODA. NCODA does not ensure the accuracy of the information presented and assumes no liability relating to its accuracy. All decisions related to taking this medication should be made with the guidance and under the direction of a qualified healthcare professional. It is the individual's sole responsibility to seek guidance from a qualified healthcare professional. *Updated 9.26.23*

4. Roadblocks - identify barriers to quitting and note elements of treatment that could address barriers
5. Repetition - reassess readiness to quit at every visit by utilizing
*For additional info: [behavioral considerations](#)

Patient-Centered Activities:

- Provide over-the-counter NRT [guide](#) when appropriate
- Assist by personalizing therapy to meet the individual needs of each patient
- Provide behavioral therapy, physician advice, telephone-based interventions, peer/group or individual smoking cessation programs
- Patient resources
 - Online: [CDC resources](#), [North American Quit Line](#)
 - Phone: Call 1-800-QUIT-NOW or Text QUIT to 47848
 - Encourage use of smoke-free apps
 - State/local resources may vary, including pharmacist prescriptive authority
 - Free and/or discounted resources be available through local programs with clinician referral
- Educate Patients on the S.T.A.R Method⁶
 1. Set a quit date, ideally within 2 weeks
 2. Tell family, friends and co-workers about quitting to gain support
 3. Anticipate challenges, especially during the first few weeks
 4. Remove tobacco products, make the home and places where the patient spends time smoke-free

Supplemental Information:

- [Smoking cessation medication guide](#) for health care professionals^{5, 6}

References:

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6. Non-pharmacological and pharmacological interventions for smoking ... (n.d.). Retrieved February 10, 2023, from <https://www.ncbi.nlm.nih.gov/books/NBK562834/>
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