Smoking cessation: the role of the nurse

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What’s the problem?

• **Worldwide prevalence**: 1.3 billion adult smokers (1)
  – *Current world population*: 6.4 billion people (2)
Evolution in daily smokers (%) in Belgium (1990 – 2004)

Reference: 3
% of daily smokers, occasional smokers and non smokers with respect to age in Belgium in 2001

Reference: 3
Survey in 10 Belgian hospitals

- **Aim:** exploring the smoking behaviour of patients hospitalised on Belgian respiratory wards
- **Sample:** n=548 patients
  - 10 Belgian hospitals
    - 3 Walloon hospitals (3 wards)
    - 7 Flemish hospitals (9 wards)
    - ♂: n=316; ♀: n=199; missing: n=33
    - Mean age: 61.5 years
- **Period:** 17 October - 31 October 2005

Reference: 4
Smoking status in 548 patients hospitalised on 12 Belgian respiratory wards

<table>
<thead>
<tr>
<th>Smoking Status</th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>non-smokers</td>
<td>31.2%</td>
<td>12.6%</td>
<td>18.6%</td>
</tr>
<tr>
<td>smokers</td>
<td>21.9%</td>
<td>15.5%</td>
<td>6.4%</td>
</tr>
<tr>
<td>ex-smokers</td>
<td>46.8%</td>
<td>33.2%</td>
<td>13.6%</td>
</tr>
</tbody>
</table>

Reference: 4
Willingness to quit in smokers, and quit-span in ex-smokers, hospitalised on 12 Belgian respiratory wards

140 patients (25.6%) need our help

- Smokers: 47% (n=55)
- Ex-smokers: 67.44% (n=261)

Reference: 4
What’s the consequence?

- **Tobacco related diseases** (5):
  - Cancer, COPD, coronary heart disease, ...
  - Spontaneous abortion, ...
  - ...

- **Worldwide deaths** (6):
  - 5 million deaths/year (1/10 adult-deaths)
  - Mortality *doubles* in the next two decades if current smoking patterns continue
Smoking cessation interventions

- Behavioural interventions
- Pharmacotherapy
- Alternative interventions

References: 7 - 9
USPHS – guideline
(United States Public Health Service)

- Evidence based guideline: Treating Tobacco Use and Dependence (2000)

- Major conclusions include:
  - Combination of education, counseling, social support, and pharmacotherapy = most effective
  - Nurses can play a significant role in smoking cessation

- Major Recommendation for clinical practice: clinicians should routinely and consistently deliver a brief 5-step intervention in their daily practice

(References: 10-11)
**Brief 5-step intervention**

- **Key points : 5 A’s**
  - Ask: identify tobacco use status for every patient
  - Advise: urge every tobacco user to quit
  - **Asses:** is the tobacco user *motivated* to quit
  - Assist: for the motivated patient, use counseling and pharmacotherapy to help him/her quit
  - Arrange: schedule follow up contact

- **Not considering quitting or not ready to quit: “5 R’s**
  - Relevance, Risks, Rewards, Roadblocks, Repetition

(References: 10-11)
Smoking cessation and hospitalisation

- **Hospitalisation** (12):
  - Teachable moment: ↑ receptivity to smoking cessation messages by ↑ perceived vulnerability
  - Contact with healthcare professionals: can provide a smoking cessation message or intervention
Significant role for the nurse

- Largest group of health professionals (13)
- Strong evidence for efficacy of nursing smoking cessation interventions (14-17)
- Cochrane review: strong evidence for efficacy for smoking cessation interventions for hospitalised patients (12)
Nurses’ perceptions and actions (1)

• Perceptions:
  – Hospitalisation is an ideal time to quit smoking
  – Smoking cessation is an important part of the nurse role

• Actions:
  – Assessing – documenting: 50% - 90%
  – Smoking cessation intervention: 30 – 90%

• Main reasons for NOT providing smoking cessation:
  – Patient-related: lack of motivation, privacy, condition,
  – Nurse-related : lack of knowledge, skills and confidence; lack of time

(References 18 – 29)
Nurses’ perceptions and actions (2)

- **Tobacco use among nurses**: 7% - 46% (Schulz, 2003)
  - Comparison smokers with former or never smokers:
    - ↓ enthusiastic for smoking cessation intervention
    - ↓ confidence in skills and in efficacy of smoking cessation advice
    - ↓ smoking cessation interventions

- **Knowledge and skills**:
  - Nurses perceive lack of knowledge, skills, confidence
  - Formal training in smoking cessation: 10-20%
  - Effect training: ↑ interventions, ↑ attitudes, ↑ knowledge

(References: 18 -22; 24-26; 28-29)
CHALLENGES:

• Integration of tobacco dependence treatment into standard nursing practice

• Nursing education among smoking cessation interventions

• Support for tobacco dependent nurses

• National outcome studies support (financial, resources) from government and hospital management
Help Your Patients Quit Smoking
References


19. Nagle A, Schofield M, Redman S. Australian nurses‘ smoking behaviour, knowledge and attitude towards providing smoking cessation care to their patients. *Health Promotion International*, 14(2), 133-144.


