

Tobacco Dependence: Education and Training for Lung Cancer Screening Centers

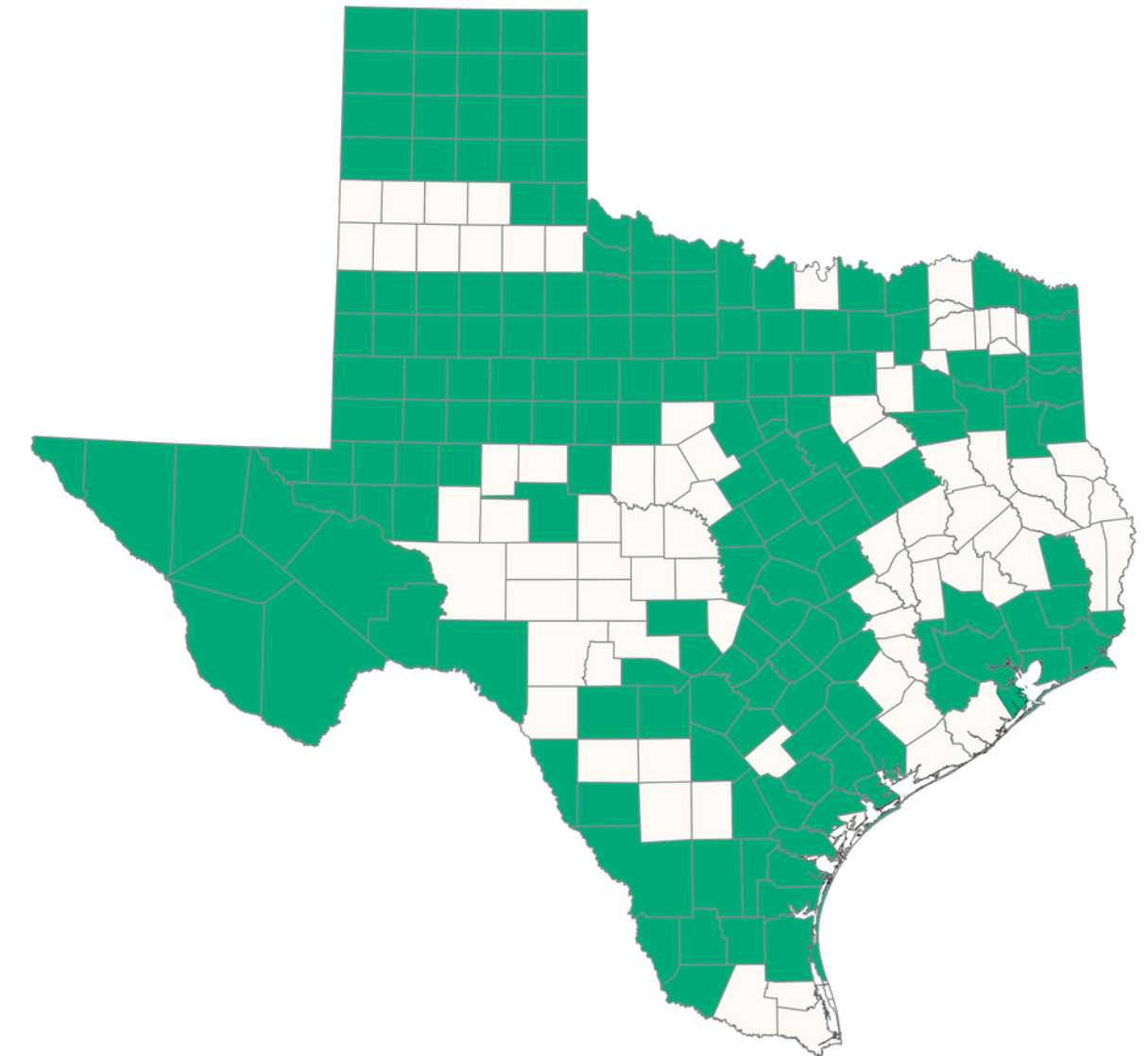


Agenda

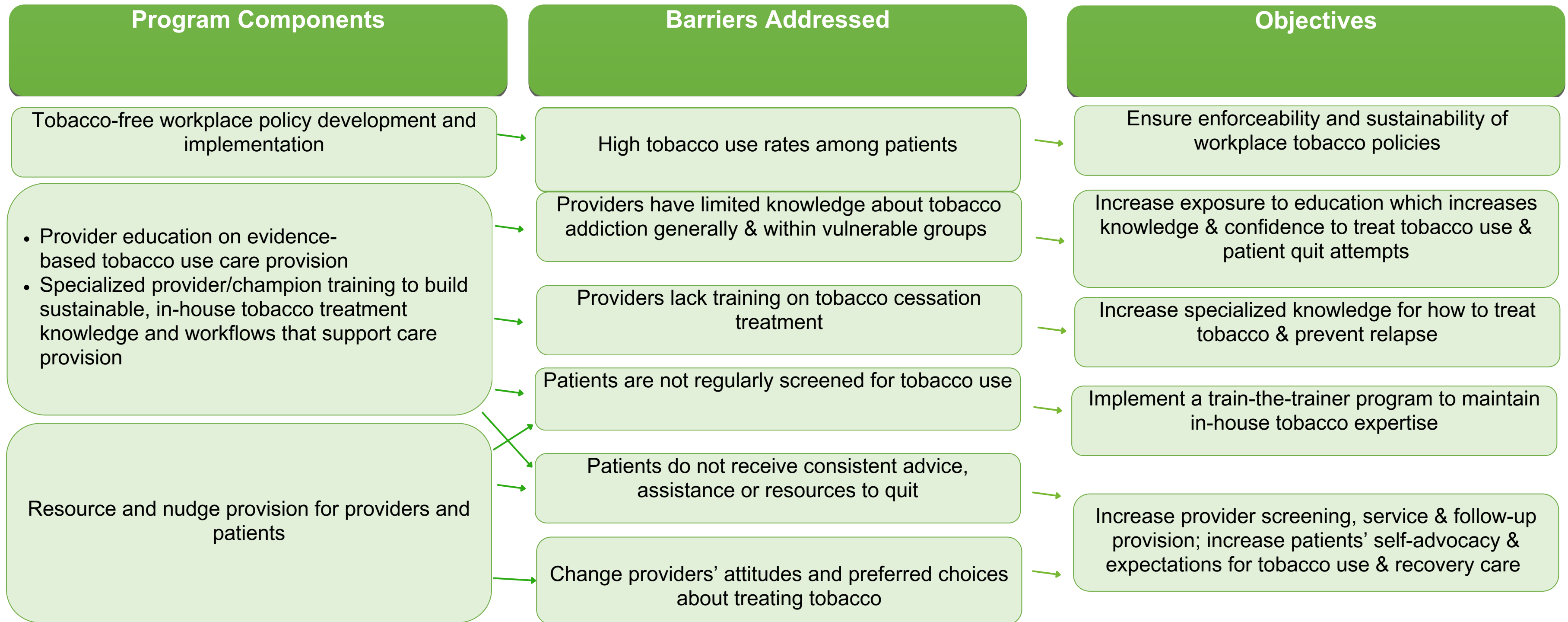
1. Mission, History, and Why.
2. Evidence-Based Treatment for Tobacco Dependence
3. E-cigarettes and ENDS
4. Relapse Prevention
5. Resources

Mission

Project SWITCH (Supporting Workplace Investment in Tobacco Control and Health) promotes wellness among Texans by partnering with healthcare organizations to build capacity for system-wide, sustainable initiatives that will reduce tobacco use and secondhand smoke exposure among employees, patients, and visitors.



Project SWITCH Program Components



Why Lung Cancer Screening Programs?



Why Lung Cancer Screening Programs? ★

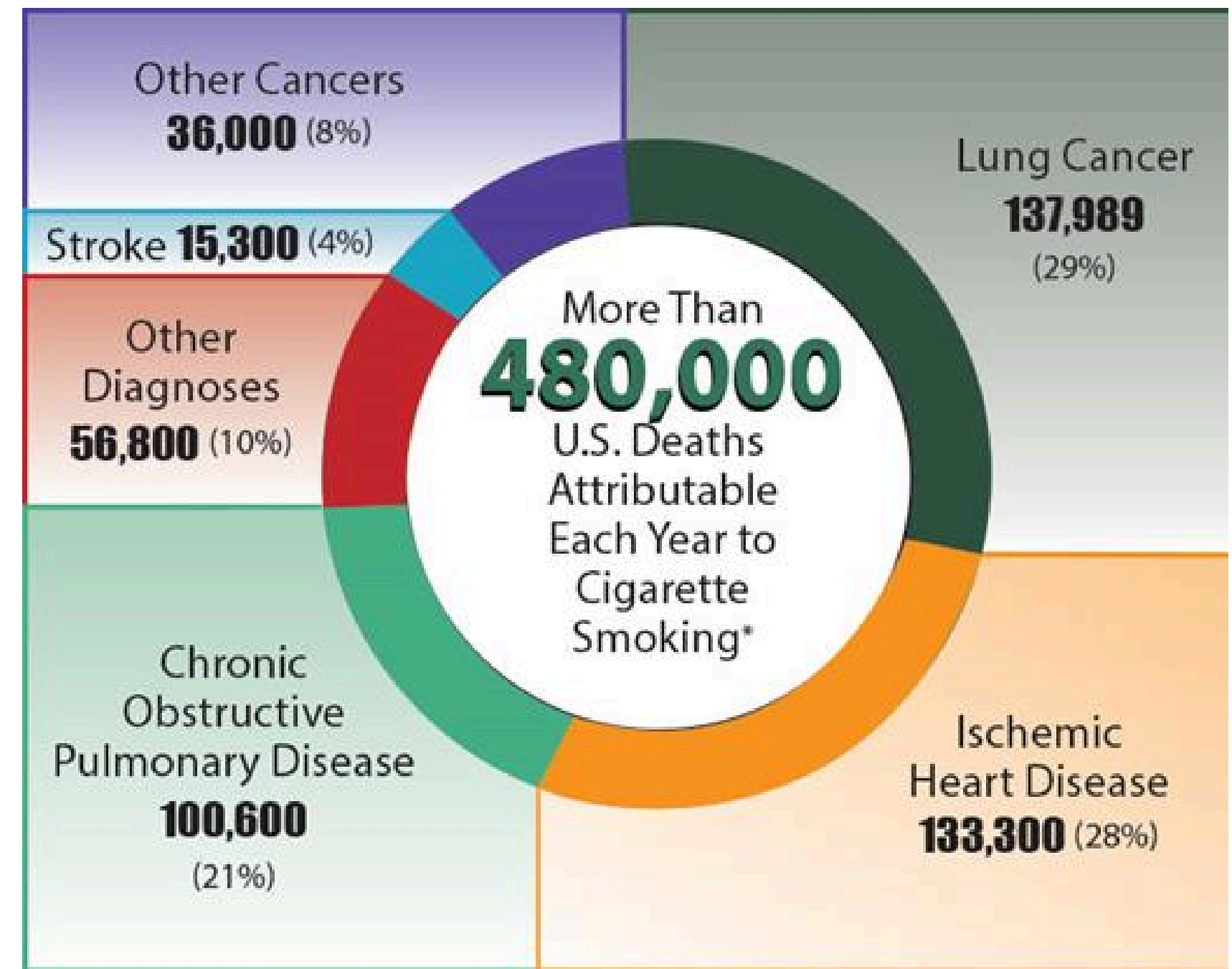
- Screening offered to those at **high risk** of developing lung cancer
 - Revised guidelines on lung cancer screening more than doubled the number of people eligible in the US, from **6.4 million to 14.5 million**
 - Half of patients eligible for lung cancer screening are current smokers, the other **50%** are former smokers
- The need is great for tobacco cessation and relapse prevention in lung cancer screening centers

Hazards of Smoking



Smoking is the leading preventable cause of death and disability in the United States

- Smoking causes more than **480,000** deaths each year
- About **1 in 5 deaths** is related to smoking



Source: The Health Consequences of Smoking—50 Years of Progress:
A Report of the Surgeon General, 2014

Smoking and Lung Cancer



- Smoking accounts for **90%** of all lung cancers and **80-90%** of lung cancer deaths
- **Cigar smoking and pipe smoking** are almost as likely to cause lung cancer as cigarette smoking
- **Secondhand smoke** also increases the risk for lung cancer
- Black and Hispanic populations have a higher likelihood of lung cancer diagnosis, and higher mortality rate with **less smoking exposure** compared to White populations
- Lung cancer kills **one and a half times** as many women as breast cancer; smoking is the **number one risk factor**

Evidence-based Treatments for Tobacco Dependence



Using the 5 A's

(Ask, Advise, Assess, Assist, Arrange)



Ask - about current tobacco use

Advise- to quit

Assess - willingness to make a quit attempt

Assist - the quit attempt

1. Brief counseling
2. Medication, if appropriate
3. Refer to additional resources

Arrange - a follow-up appointment (in person or by telephone)

Ask – every patient, at every visit about their smoking (e.g., "Do you smoke, even once in a while?")

Advise – them to quit using smoking (e.g., "Quitting is one of the most important things you can do to improve your overall health.")

Assess – their desire to quit smoking (e.g., "Do you have a desire to quit smoking in the next 30 days?")

Assist – those who have a desire to quit to access treatment resources (e.g., "I am happy you want to quit. Would you like to hear about the options to help you quit smoking?")

Arrange – a follow-up session to check in on their progress (e.g., "I would like to meet with you again in two weeks to discuss your progress.")



Scan here to
download your 5 A's
badge card today!

Using the 5 R's

(Relevance, Risks, Rewards, Roadblocks, Repetition)



USING THE 5R's

RELEVANCE of their current tobacco use and reasons to stop.

RISKS of continued tobacco use.

REWARDS of tobacco cessation.

ROADBLOCKS to a successful quit attempt.

- Need counseling referral?
- Medication or NRT?
- Any additional resources?

REPETITION of all 5R's in each contact with currently unmotivated tobacco users.

RELEVANCE: "What do you think the overall impact is to your health?"

RISKS: "Do you have children who may be exposed to the secondhand smoke?"

REWARDS: "You've had several visits this year for your asthma, can you tell me how quitting smoking might help your asthma symptoms?"

ROADBLOCKS: "You've talked about being concerned about withdrawal symptoms, would you like to talk about nicotine replacement therapy?"

REPETITION: Patients with a failed quit attempt should be advised that most people make multiple quit attempts before they are successful.



Scan here to
download your 5 R's
badge card today!

Why Use Nicotine Replacement Therapy?

NRT

Helps relieve physical withdrawal symptoms

Addresses a person's physiological need

Delivers lower levels of clean nicotine



Tobacco Treatment Medications

	Patches	Gum	Lozenge	Varenicline (most effective)	Bupropion (Zyban/Wellbutrin)
Strength	21, 14, 7 mg	2, 4 mg		.5, 1 mg	150 mg SR (sustained release) 300 mg XL (extended release)
Dosing	1 patch/ 24 hours	1 piece every 1-2 hours		<ul style="list-style-type: none">• Days 1-3: .5 mg every morning• Days 4 - 7: .5 mg twice daily• Day 8 – end of treatment: 1 mg twice daily	Days 1-3: 150 mg once in AM Day 4 – end: 150 mg twice daily or may take 300 mg XL once a day
Advantages	Private Once a day	Offset cravings Reduces dependence		High success rates	Also treats depression
Adverse Reactions	Skin reaction Sleep Disturbance	Mouth soreness Hiccups	Indigestion Hiccups Insomnia	GI upset- nausea, vomiting, constipation, gas Abnormal, strange or vivid dreams Very rare but should monitor for depressed mood, agitation, changes in thoughts/behavior, and suicidal ideation	Dry mouth, Insomnia, Decreased appetite Do not use with seizure disorder, eating disorders, MAOIs, or abrupt discontinuation of alcohol, benzodiazepines, or antiepileptic medication.

Patches	Gum	Lozenge
21, 14, 7 mg	2, 4 mg	
1 patch/ 24 hours	1 piece every 1-2 hours	
Private	Offset cravings	
Once a day	Reduces dependence	
Skin reaction	Mouth soreness	Indigestion
Sleep Disturbance	Hiccups	Hiccups
		Insomnia





Varenicline (most effective)	Bupropion (Zyban/Wellbutrin)
.5, 1 mg	150 mg SR (sustained release) 300 mg XL (extended release)
<ul style="list-style-type: none"> • Days 1-3: .5 mg every morning • Days 4 - 7: .5 mg twice daily • Day 8 – end of treatment: 1 mg twice daily 	Days 1-3: 150 mg once in AM Day 4 – end: 150 mg twice daily or may take 300 mg XL once a day
High success rates	Also treats depression
GI upset- nausea, vomiting, constipation, gas Abnormal, strange or vivid dreams Very rare but should monitor for depressed mood, agitation, changes in thoughts/behavior, and suicidal ideation	Dry mouth, Insomnia, Decreased appetite Do not use with seizure disorder, eating disorders, MAOIs, or abrupt discontinuation of alcohol, benzodiazepines, or antiepileptic medication.

Nicotine from NRT = Nicotine from Tobacco

The amount of nicotine a person receives from their NRT **should equal or be a little more than** the nicotine they were receiving from their tobacco

- People inhale approximately **1.2-1.8 mg of nicotine** with every cigarette
- There are 20 cigarettes in a pack of cigarettes, if a person smoking a pack of cigarettes per day should start with a 21 mg nicotine patch.
 - Little cigars or cigarillos are like cigarettes but have different packaging standards – may be sold individually, or in packages of 2, 3, or 5 little cigars) – they are likely flavored as well

Step Down Instructions For Patches

Step down instructions can also be found on the NRT box

If smoking more than 15 - 20 cigarettes per day...

- Step 1: one 21 mg patch per day for weeks 1 – 6
- Step 2: one 14 mg patch per day for weeks 7 – 8
- Step 3: one 7 mg patch per day for weeks 9 – 10 (or end of treatment plan)

If smoking 8 - 14 cigarettes per day...

- Step 1: one 14 mg patch per day for weeks 1 – 6
- Step 2: one 7 mg patch per day for weeks 7 – 8 (or end of treatment plan)

If smoking less than 7 cigarettes per day...

- Step 1: one 7 mg patch per day for weeks 1 – 4

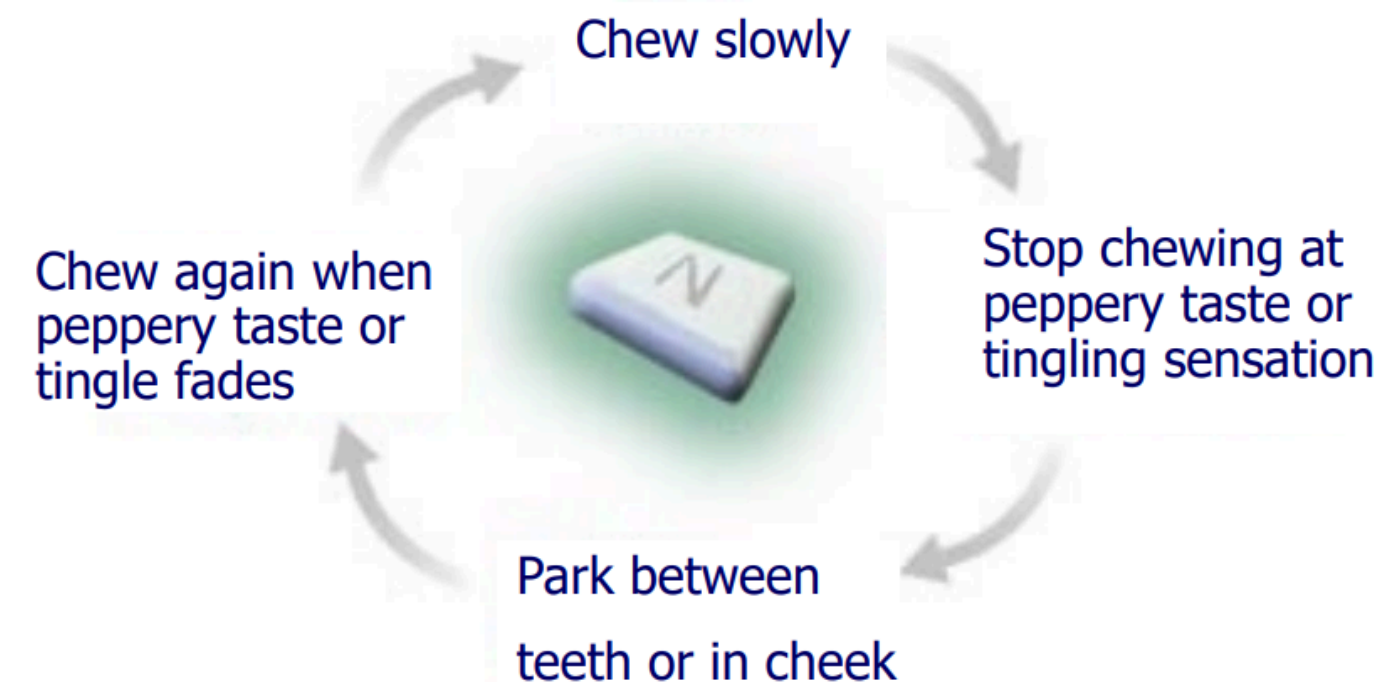
If a person is using multiple patches per day (example: smokes 30 cigarettes per day), they might use a 21 mg and a 14 mg patch (but could also use a 21 mg patch plus gum/lozenges). They would step down one patch at a time until they are only using one patch, then follow the above guidelines.



Nicotine Replacement - Gum/Lozenges

- Step down instructions for gum/lozenges:

- **Step 1:** one piece of gum or lozenge every 1 – 2 hours for weeks 1 – 6
- **Step 2:** one piece of gum or lozenge every 2 – 4 hours for weeks 7 – 9
- **Step 3:** one piece of gum or lozenge every 4 – 8 hours for weeks 10 – 12



- **Gum:** Repeat "Chew and Park" method until no tingle left from gum
 - Alternate different sides of mouth for approximately 25 minutes
- **Lozenges:** Place between gums and cheek
 - Will dissolve in mouth within approximately 10 – 12 minutes
- **Both** nicotine gum and lozenges work great in combination with the nicotine patches for high craving times

“How To Use” Videos Available

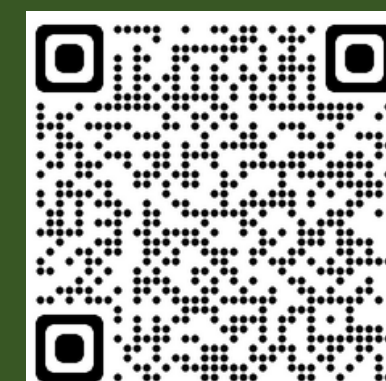
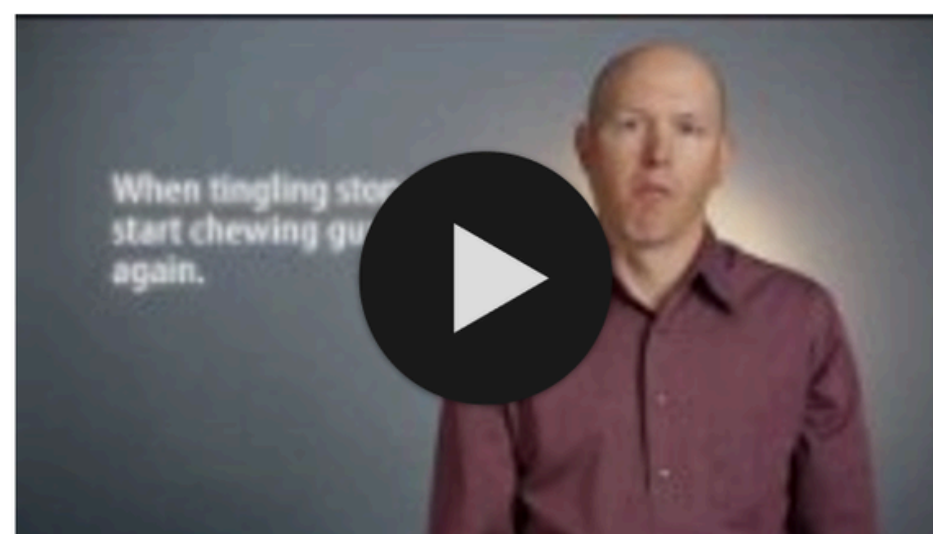
How to Use Nicotine Patches



How To Use Nicotine Lozenges



How To Use Nicotine Gum



Scan here to view
these videos and
more



Medications for Tobacco Users - Summary

Medication Type	Availability
Nicotine Patch	Over the counter
Nicotine Gum	Over the counter
Nicotine Lozenge	Over the counter
Nicotine Nasal Spray	Prescription only
Varenicline	Prescription only
Bupropion (Zyban/Wellbutrin)	Prescription only

Electronic Nicotine Delivery Systems (ENDS): To Vape or Not to Vape?

- Evidence suggests ENDS are less harmful than traditional, combustible cigarettes, but **not harmless**
- Research states:
 - Presence of toxic substances (i.e., fine/ultrafine particles, cytotoxicity, various metals, TSNAs, and carbonyls), but lower levels than cigarettes
 - Dual use of ENDS & combustible cigarettes is common & problematic
 - Recent studies have indicated similar quit rates with e-cigarettes as NRT
 - Long term health consequence of e-cigarette use is unknown, including as relates to lung diseases

Use of ENDS should not be encouraged as a first line cessation method as it is not FDA approved



**1st Generation
- Cigalike**



**2nd Generation- Tank
System**



What is a Relapse?

- The resumption of smoking at any point after the quit date
- Can occur soon after a person quits smoking, or some people may relapse months or even years after the quit date
- All clinicians should work to prevent relapse
- Relapse prevention programs can take the form of either minimal (brief) or prescriptive (more intensive)
- Lapse vs. Relapse

Understanding Tobacco Dependence & Relapse

Tobacco dependence can be seen through the lens of a chronic disease model

- Recognizes the long-term nature of the disorder
- As well as the possibility of relapse

We can think of tobacco dependence similarly as other chronic conditions (e.g., hypertension, diabetes), requiring ongoing care/maintenance rather than acute

Approximately 30% to 50% of US smokers make a quit attempt in any given year, success rates are low, with only 7.5% managing to succeed

Relapse Prevention – Getting Started



- Should start at the beginning of treatment, not after relapse
- Create a plan with your patient that will help prevent a relapse after the successful completion of an acute treatment
- Strategies for relapse prevention:
 - Skills approach (most widely studied)
 - Recognize and anticipate situations where relapse risk is high
 - Alternative behavioral interventions (often implemented w/ skills approach)
 - Distract from cravings by keeping the mind, mouth and hands busy
 - Extending duration of initial cessation treatment
 - Continue to attend/participate in a cessation program
 - Pharmacological intervention
 - Taping off medications would **not be recommended**
- Make them familiar with the available resources





Please reach out with any questions, comments, or general feedback.

Mikal Zere, MPH
Health Education Specialist

Email: Mgzere1@mdanderson.org

Resources - Quitlines

Telephone Quitlines: Staffed by counselors who provide helpful information, advice, and support.

- **1-800-QUIT-NOW (1-800-784-8669)** English
- **1-800-DEJEO-YA (1-855-335-3569)** Spanish
1-800-332-8615 (for the hearing-impaired)

Quitline services and hours vary by state.

- **1-877-44U-QUIT (1-877-448-7848)** – National Cancer Institute Quitline provides information on how to quit (in both English and Spanish). Services are available Monday through Friday, 8:00 a.m. to 8:00 p.m. (Eastern).
- **1-877-YES-QUIT** – Has phone and online options with web-based programs.
(<https://www.quitnow.net/mve/quitnow?qnclient=texas>). Click on the **Refer A Patient** in the upper right-hand corner.
- **1-855-QUIT-VET (1-855-784-8838)** – Quitline for veterans receiving health care through the U.S. Department of Veterans Affairs (VA). Monday through Friday, 8:00 a.m. to 10:00 p.m. (Eastern). The quitline is closed on Federal holidays
- CDC/NCI Smoking Quitlines:
 - **1-855-335-3569 (Spanish)**
 - **1-800-383-8917 (Chinese)**
 - **1-800-556-5564 (Korean)**
 - **1-800-778-8440 (Vietnamese)**

Texas Specific Resources

<https://map.naquitline.org/profile.aspx?stateid=tx> – Resources specific to the state of TX

Quitline: Texas Tobacco Quitline

Began Operations: September 2001

Website: <https://www.yesquit.org/>

Standard Hours of Operation

Monday: 12:00 AM - 11:59 PM

Tuesday: 12:00 AM - 11:59 PM

Wednesday: 12:00 AM - 11:59 PM

Thursday: 12:00 AM - 11:59 PM

Friday: 12:00 AM - 11:59 PM

Saturday: 12:00 AM - 11:59 PM

Sunday: 12:00 AM - 11:59 PM

Closed on: Closed Independence day: 11:59 pm-7/3-4:00 am 7/5,
Thanksgiving: 11:59-11/22-4:00 am 12/26, Christmas: Noon 12/24-
4:00 am 12/26 and New Year's: 3:00 pm -12/31-4:00 am 1/1

Telephone Numbers

Line	Phone Number	Language/Subject
1	(877) 937-7848	English

Supported Languages

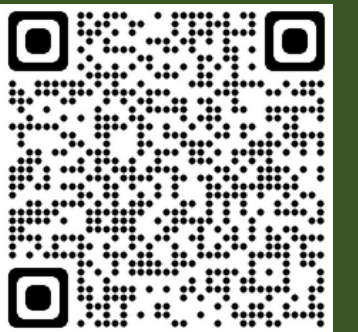
Counseling offered in: English, Spanish

Third-party counseling: English, Spanish, Mandarin, Cantonese, Korean, Vietnamese,

French, Russian, AT&T services with translation in over 140 languages

Deaf/Hard of hearing: Direct TTY machine

**ENROLL IN ONLINE
CESSATION SERVICES**



Scan the QR code
to access website

Texas Specific Resources – FREE Professional Cessation Counseling

- The Texas Department of State Health Services provides the Texas Quitline and combines an online and phone counseling program. It also has an array of tools and services to help people live tobacco free. Counseling services are available in over 100 languages. Professional cessation counselors receive 200 hours of training to personalize quit advice and to work with individuals based on lifestyle and specific needs.
- Qualifying tobacco users can get up to 5 counseling sessions
- Qualifying tobacco users can get 8 weeks of NRT
- For help connecting patients to the Texas Quitline services call (512) 232-4166
- <https://www.takingtexastobaccofree.com/>



Scan the QR code
to access website

Resources – Tools and Apps

- **Mobile Text Messaging Services:**

- [SmokefreeTXT](#) – Provides 24/7 encouragement, advice and tips to help you quit and stay quit.
- [SmokefreeMom](#) (For Pregnant Women) – Provides 24/7 encouragement, advice and tips to help pregnant women quit and stay quit.
- [SmokefreeVET](#) (For Veterans) – Provides 24/7 encouragement, advice and tips to help veterans quit and stay quit.

- **Smartphone Apps:**

- **Smokefree.gov:** [QuitGuide](https://smokefree.gov/tools-tips/apps/quitguide) (<https://smokefree.gov/tools-tips/apps/quitguide>) – Free app that provides insight into what to expect when you quit.
- **Smokefree.gov:** [QuitSTART](https://smokefree.gov/tools-tips/apps/quitstart) (<https://smokefree.gov/tools-tips/apps/quitstart>) – Free app that provides tips, inspiration, and challenges to help you quit and live a healthier life.

- **Other tools available online**

- **Smokefree.gov:** [Free Resources to Help you Quit](https://smokefree.gov/tools-tips/get-extra-help/free-resources) (<https://smokefree.gov/tools-tips/get-extra-help/free-resources>) – Get free tools, guides, and resources designed to help you quit and stay quit.

Resources – Tools and Apps

- **SmokefreeTXT en español:** (<https://espanol.smokefree.gov/consejos-herramientas/smokefreeTXT>)

¿Para quién es este programa? Para adultos en Estados Unidos que hablan español y que están listos para dejar de fumar. Este programa es ofrecido por Smokefree.gov del Instituto Nacional del Cáncer.

¿Cómo funciona? Inscríbase con el siguiente formulario o envíe un mensaje de texto con la palabra ESP al 47848. Recibirá mensajes de texto diarios para apoyarlo a dejar de fumar desde el código corto 47848 (pueden aplicar tarifas de mensajes y datos). El programa dura de 6 a 8 semanas. Puede optar por no participar en cualquier momento enviando el mensaje de texto PARAR.

- **SmokefreeVET en español:** (<https://veterans.smokefree.gov/tools-tips-vet/smokefreevetesp>)

¿Para quién es este programa? Para adultos en Estados Unidos que hablan español y que están listos para dejar de fumar. Este programa es ofrecido por Smokefree.gov del Instituto Nacional del Cáncer y El Departamento de Asuntos de Veteranos.

¿Cómo funciona? Inscríbase con el siguiente formulario o envíe un mensaje de texto con la palabra VETESP al 47848. Recibirá mensajes de texto diarios para apoyarlo a dejar de fumar desde el código corto 47848 (pueden aplicar tarifas de mensajes y datos). El programa dura de 6 a 8 semanas. Puede optar por no participar en cualquier momento enviando el mensaje de texto PARAR

Resources – Websites

- [Smokefree.gov](https://smokefree.gov) – The National Cancer Institute provides free information and professional help to people trying to quit smoking. This site is also available in *Spanish* (<https://espanol.smokefree.gov/>)
- [Smokefree Teen](https://teen.smokefree.gov/) (<https://teen.smokefree.gov/>)
- [Smokefree Women](https://women.smokefree.gov/) (<https://women.smokefree.gov/>)
- [Smokefree Vet](https://veterans.smokefree.gov/) (<https://veterans.smokefree.gov/>)
- [You Can Quit 2 \(For Military Personnel- https://www.ycq2.org/\)](https://www.ycq2.org/) – Sponsored by the U.S. Department of Defense, helps U.S. service members and veterans quit tobacco
- [BeTobaccoFree.gov](https://betobaccofree.gov) – U.S. Department of Health and Human Services provides free information and tools for quitting
- [Become an Ex](https://www.becomeanex.org/) (<https://www.becomeanex.org/>) – Helps you "re-learn your life without cigarettes," and helps you develop a free personalized quit plan
- [CDC: Smoking and Tobacco Use](https://www.cdc.gov/tobacco/quit_smoking/index.htm) (https://www.cdc.gov/tobacco/quit_smoking/index.htm) – Provides quitting advice, the latest research and news on tobacco use, publications to order, and an array of useful links. This site is also available in *Spanish* (<https://www.cdc.gov/spanish/vidasaludable/>)
- [Truth Initiative Resources](https://truthinitiative.org/research-resources) (<https://truthinitiative.org/research-resources>) – In partnership with the Schroder Institute, this site provides the latest facts and analyses on the most important issues in tobacco and substance use

Resources – Smokeless Tobacco

- **National Institutes of Health:** [Smokeless Tobacco: A Guide for Quitting \(https://www.nidcr.nih.gov/health-info\)](https://www.nidcr.nih.gov/health-info) – Booklet includes reasons to quit, addresses myths about smokeless tobacco, and helps you develop a plan for quitting
- **American Cancer Society:** [Guide to Quitting Smokeless Tobacco \(https://www.cancer.org/healthy/stay-away-from-tobacco/guide-quit-smoking/other-ways-to-quit-smoking.html\)](https://www.cancer.org/healthy/stay-away-from-tobacco/guide-quit-smoking/other-ways-to-quit-smoking.html) – Provides information about smokeless tobacco, reasons for quitting, and information to help you quit
- **American Academy of Family Physicians:** [Smokeless Tobacco: Tips on How to Stop \(https://familydoctor.org/smokeless-tobacco-tips-on-how-to-stop/\)](https://familydoctor.org/smokeless-tobacco-tips-on-how-to-stop/) – Provides brief tips to help you quit smokeless tobacco
- **National Cancer Institute:** [SmokefreeVet \(https://veterans.smokefree.gov/smokeless-tobacco/how-to-quit\)](https://veterans.smokefree.gov/smokeless-tobacco/how-to-quit) – Provides resources to help adult dippers, who are also veterans, quit smokeless tobacco
- **University of Michigan:** [Quitting Smokeless Tobacco \(https://www.rogelcancercenter.org/breaking-habits-beating-us/smokeless-tobacco\)](https://www.rogelcancercenter.org/breaking-habits-beating-us/smokeless-tobacco) – Provides information on the health consequences of smokeless tobacco and resources to help quit smokeless tobacco
- **Mayo Clinic:** [Chewing Tobacco: Not a Safe Product \(https://www.mayoclinic.org/healthy-lifestyle/quit-smoking/in-depth/chewing-tobacco/art-20047428\)](https://www.mayoclinic.org/healthy-lifestyle/quit-smoking/in-depth/chewing-tobacco/art-20047428) – Provides information on the facts about chewing tobacco and other forms of smokeless tobacco

Lung Cancer Screening Centers



Visit our Project SWITCH
website



Videos on Nicotine Replacement Therapy and Other Resources:

<https://www.takingtexastobaccofree.com/videos>

Provider Resources/Tools (Badge Cards, NRT Guidelines, etc.):

<https://www.takingtexastobaccofree.com/provider-materials>



Printable Materials:

<https://www.takingtexastobaccofree.com/lung-cancer-screening-material>

THE UNIVERSITY OF TEXAS
MDAnderson
~~Cancer~~ Center

Making Cancer History®

Thank you!

