

SCREENING & BRIEF INTERVENTION: TOBACCO

Screening & Brief Intervention (SBI) is designed for use by providers who do *not* specialize in addiction treatment. This intervention technique:

- Uses motivational approaches based on how ready the patient is to change behavior.
- Gives feedback and suggestions in the form of useful information, respectfully and without judgment or accusations.
- Is an evidence-based model of substance abuse treatment, effective for tobacco cessation.

The 5 A's Use the "5 A's" method as a starting point for establishing tobacco dependence treatment and for organizing a clinical treatment team.

Ask about tobacco use. Identify and document the tobacco use status of every patient, including youth, at every visit.

- Ask every patient if he or she smokes.
- Consider tobacco use one of the vital signs.
- Use a universal identification system (such as stickers on charts or computer reminders) to keep track of tobacco use.

Advise to quit. In a clear, strong and personalized manner, urge every tobacco user to quit.

- Give clear advice about quitting.
- Offer strong warnings about health problems related to tobacco use.
- Give personalized support.

Assess For current tobacco users, is the patient willing to attempt to quit at this time? For the ex-tobacco user, how recently did he or she quit and are there any challenges to remaining abstinent?

- Assess the patient's willingness to try to quit in the next 30 days. Be flexible with this date.
- Listen for "I want to quit" or "I am ready to quit," rather than "I need to quit."

Assist For the patient willing to make an attempt to quit, offer medication and provide or refer the patient for counseling or other behavioral treatment. For patients unwilling to quit, try motivational interventions designed to increase future quit attempts. For the recent quitter and for patients with remaining challenges, provide relapse prevention.

- Help patients develop a quit plan.
- Evaluate pharmacotherapy use or problems.
- Follow STAR when working with patients.
 - Set a quit date (within two weeks).
 - Tell family, friends and coworkers.
 - Anticipate challenges to quitting.
 - Remove tobacco products from their environment.



Arrange follow-up All patients receiving treatment should also receive follow-up.

- Follow up to check on the cessation progress.
- Congratulate success.
- Identify problems and anticipate challenges.

Quick tips

Adult patients Giving motivational information to a patient makes the greatest impact if it is relevant to the patient's health, health concerns, family situation (such as having children in the home), age, gender and other important patient characteristics (including prior quitting experience).

Ask the patient to identify the potential negative consequences of smoking and highlight those that seem most relevant to the patient. Examples include:

- Acute risks: shortness of breath, exacerbation of asthma, impotence, infertility
- Long-term risks: heart attack, stroke, lung and other cancers, COPD
- Secondhand smoke risks: lung cancer in spouse and children; SIDS, URI, asthma and ear infection in children

Ask the patient to identify the potential benefits of quitting tobacco use; highlight those that seem most relevant to the patient. Examples of rewards include:

- Your food will taste better.
- Your sense of smell will improve.
- You'll save money.
- You'll feel better about yourself.
- Your home, car and breath will smell better.
- You can stop worrying about quitting.
- You'll have healthy babies and children.
- You'll no longer expose others to smoke.
- You'll feel better physically.
- You'll have freedom from addiction.
- You'll perform better in sports.
- You'll set a good example for your kids.



Youth patients In addition to the information above, direct patient interventions with the right message have been found to be effective in influencing smoking cessation in adolescents. Ask youth, "Do you feel that cigarettes control your life in any way?" Here are a number of brief messages to use when talking to teens:

- Tobacco causes yellow teeth and fingers, bad breath, smelly clothes and wrinkled skin.
- Cigarettes contain 4000 chemicals; 400 are toxic (arsenic and formaldehyde), and 40 cause cancer.
- Eating healthy foods and exercising are better ways to lose weight than smoking.
- Smoking a pack a day costs more than \$25 a week – more than the cost of a CD.
- Most people don't smoke; only one in four adults and even fewer teens smoke.

For more information about SBI using the 5 A's, visit www.odscompanies.com and review the Tobacco Cessation Clinical Guidelines section.

Citations:

Fiore MC, Jaén CR, Baker TB, et al. Treating Tobacco Use and Dependence: 2008 Update. Quick Reference Guide for Clinicians. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service. April 2009. Pediatrics, "The State of Office-Based Interventions for Youth Tobacco Use":

<http://www.pediatrics.org/cgi/content/full/111/6/e650>

TalkToYourPatients.org, a website resource for providers offering information about the 5 A's as well as counseling, media campaigns, research and continuing education: <http://talktoyourpatients.org/>

Youth Tobacco Cessation Collaborative: www.youthtobaccocessation.org

TheTruth.com, an interactive website aimed at adolescents: www.thetruth.com

