Review of Selected Approaches to Promoting Smoking Cessation

Suzanne M. Mahon, RN, DNSc, AOCN®, APNG

Smoking accounts for at least 30% of all cancer deaths and 87% of lung cancer deaths (American Cancer Society [ACS], 2005). Ideally, no one would smoke, but, in the United States, approximately 23% of adults are smokers (ACS). Much research has been targeted at this population.

The ACS and other public health agencies have launched large campaigns to prevent the use of tobacco and to encourage cessation. Central to the educational effort is the fact that, for smokers who quit before age 50, the risk of dying in the next 15 years is half of that for those who continue to smoke (ACS, 2005). The U.S. Department of Health and Human Services (2000) has emphasized that every clinic should have a means to identify tobacco users, a means to keep healthcare providers current on smoking-cessation strategies, and staff dedicated to providing smoking-cessation services, as well as insurance coverage to include tobacco-dependence treatment. The meta-analysis did find that using materials tailored to the characteristics of individual smokers might be a little more effective than more standard, generic materials. Lancaster and Stead (2002) concluded that such materials may lead to a slight increase in cessation rates when compared to no intervention but that the effect is likely to be very small.

Standard Self-Help Materials

Many printed and multimedia materials describe the importance of and methods for successfully stopping tobacco use. An analysis of 51 published trials suggested that no evidence exists of any benefit of adding self-help materials to other strategies to promote smoking cessation (Lancaster & Stead, 2002). The meta-analysis found that using materials tailored to the characteristics of individual smokers might be a little more effective than more standard, generic materials. Lancaster and Stead (2002) concluded that such materials may lead to a slight increase in cessation rates when compared to no intervention but that the effect is likely to be very small.

Individual Counseling

Individual counseling includes activities during which healthcare providers directly instruct and advise on the importance of and means to achieve tobacco cessation. In a review of 21 trials involving more than 7,000 people, a meta-analysis suggested that individual counseling was effective (Lancaster & Stead, 2005). The researchers concluded that the odds ratio for successful smoking cessation with counseling alone was 1.56. The same researchers did not detect a greater effect of intensive counseling when compared to brief counseling.