

Surgery Is Good 'Teachable Moment' to Help Smokers Quit

July 7 2010, By Sharyn Alden

It is well known that smokers are at an increased risk for post-surgical complications such as infections and poorly healing wounds. Likewise, smoking can contribute to lowered survival and delayed healing.

A new review from Denmark finds that programs to help people quit smoking before surgery can reduce the risk of complications afterward.

The fact alone that a person has surgery scheduled increases their chance for [quitting smoking](#) successfully. For [smokers](#) who want to quit and who receive preoperative stop-smoking support, this can be an optimum time.

David O. Warner, M.D., a professor of anesthesiology at the Mayo Clinic College of Medicine, leads the efforts by the American Society of Anesthesiologists to promote smoking interventions by anesthesiologists in the period right before and after surgery.

“Having a major surgical procedure itself almost doubles the chances that smokers will quit even in the absence of interventions,” Warner said. “In our research we have found that approximately one in eight successful quit attempts in older American is associated with having a surgical procedure, proving that for smokers, having surgery can save your life in more ways than one.”

The review, led by Thordis Thomsen, Ph.D., looked at the effects of [smoking cessation](#) support, including [nicotine](#) replacement therapy and

weekly counseling four to eight weeks before surgery. Thomsen is with the anesthesiology department at Herlev University Hospital.

The researchers concluded that interventions helped people stop smoking in both the short and long term. The review examined the success of smoking intervention before surgery and in the next 12 months.

The review comprised eight studies involving 1,156 people in Denmark, Australia, Canada, the United Kingdom and Sweden between 2002 and 2009. In seven studies, intervention resulted in a significant decrease in smoking before surgery.

The review appears in the latest issue of The Cochrane Library, a publication of The Cochrane Collaboration, an international organization that evaluates medical research. Systematic reviews like this one draw evidence-based conclusions about medical practice after considering both the content and quality of existing medical trials on a topic.

This is an updated version of a previous Cochrane review. The update includes one new study that examines the effect of intensive intervention on smoking cessation and postoperative complications. Two new studies examine the effect of brief intervention on the same outcomes.

“Brief preoperative smoking intervention can support smoking cessation, but if a patient receives intense smoking cessation support, the benefits may continue after the operation,” Thomsen said. “Intense intervention may also reduce post-surgical problems such as wound, heart, and lung complications.”

Thomsen added, “Conclusions of the review update do not differ substantially from the previous review. However, there is more evidence indicating that intense versus brief intervention may achieve perioperative abstinence for a longer period of time and reduce

complications.”

Although the reviewers recommend more studies, the evidence is clear that quitting smoking can reduce surgical complications such as infections.

“Most published studies intervene between four and eight weeks prior to surgery, but there are good physiological reasons to think that shorter periods of preoperative abstinence may be beneficial as well,” Warner said. “Postoperative abstinence is also important especially to prevent complications such as wound infections.”

More information: Thomsen T, Villebro N, Møller AM. Interventions for preoperative smoking cessation. The Cochrane Database of Systematic Reviews 2010, Issue 7.

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