

Smokers with comorbid conditions need help from their doctor to quit

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Smokers who also have alcohol, drug and mental disorders would benefit greatly from smoking cessation counseling from their primary care physicians and would be five times more successful at kicking the habit, a study by researchers at UCLA's Jonsson Comprehensive Cancer Center has found.

Smokers with these comorbid conditions make up about 40 percent of the smoking population, have a more difficult time quitting and represent a significant burden on the [healthcare system](#). If their [primary care physicians](#) could help them to quit smoking it would aid both in improving the health of [patients](#) and reducing tobacco-related [healthcare costs](#), said Dr. Michael Ong, an assistant professor of general internal medicine and health services research and a researcher with UCLA's Jonsson Comprehensive Cancer Center.

"We found it would be very effective for primary [care physicians](#) to provide help in [quitting smoking](#) to these patients," Ong said. "However, in the context of everything these physicians are trying to do in a day, smoking cessation may fall by the wayside. It's also been thought that with this patient population, doctors should only take on one thing at a time, for example treating an opiate addiction and opting to deal with the smoking cessation later. But at the end of the day, we showed that smoking cessation counseling is effective in this patient population and should definitely be pursued."

The study appears today in [Nicotine & Tobacco Research](#), the peer-

reviewed journal of the Society for Research on Nicotine and Tobacco.

Primary care physicians play an important role in smoking cessation counseling. However, prior to this study, their effectiveness with this patient population was unclear, Ong said.

And while the Ong's study found that smokers with and without alcohol, drug or [mental disorders](#) were equally likely to receive smoking cessation counseling – 72.9 percent and 79.9 percent respectively - those with these disorders also quit smoking at equal levels when they got a little help from their doctor.

The study found that the probability of patients with the comorbid disorders quitting without smoking cessation counseling was 6 percent, while patients without the comorbid disorders had a 10.5 percent chance of successfully kicking the habit. With smoking cessation counseling, patients with the comorbid conditions had five-fold better chance of quitting at 31.3 percent, while smokers without the other disorders had a three-fold better chance at 34.9 percent.

"This study shows that primary care physicians can help smokers with alcohol, drug or mental disorders to successfully quit," the study states. "These smokers should be targeted for smoking cessation counseling to reduce the health burden of tobacco."

Ong said there are much higher rates of smoking among schizophrenics and those with depression and anxiety disorders. Among drinkers, those with alcohol disorders include people who are alcohol dependent as well as weekend binge drinkers.

For the study, Ong and his team examined the relationship between past year smoking cessation counseling and successful quitting among 1,356 patients. The patients had reported smoking in the 1998-1999

Community Tracking Study survey and later reported seeing a primary care physician in the last year in a follow-up Healthcare for Communities Survey in 2000-2001.

"We sampled for patients with these disorders and if they were smoking at one time, we followed up two years later to see if they had talked to their primary care physician about quitting and whether they did in fact quit smoking," Ong said. "We picked out smokers from the original survey in 1998 and analyzed data from the second survey in 2000. Nobody had ever examined smokers with these comorbid conditions from this angle before."

Ong said he hopes the study results will be incorporated into new clinical practice guidelines when they come out so [primary care](#) physicians treating [smokers](#) with comorbid conditions realize that [smoking cessation](#) counseling in this difficult patient population can be successful.

"Getting people to quit smoking is the No. 1 way to reduce deaths in the United States," Ong said. "We know these deaths are preventable and we should be incorporating every tool in our tool box to keep people healthy. This study provides evidence that counseling all types of patients, even those challenging patients with comorbid conditions, to [quit smoking](#) can work."

Provided by University of California - Los Angeles

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