

Free nicotine patches and counseling offered by national smoking helpline don't help quitters

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A major research trial to test the effectiveness of offering smokers free nicotine patches and proactive telephone counselling through the English national quitline has shown this extra support makes no difference to success rates for quitting the habit.

The Department of Health and UK Centre for Tobacco Control Studies (UKCTCS)-funded study led by The University of Nottingham's UK Centre for [Tobacco Control](#) Studies has just been published in the online version of the [British Medical Journal](#).

The work was carried out to establish whether the tried and tested support from the quitline could be improved to help more people stop smoking. The trial also examined whether the offer of free nicotine replacement therapy made to quitline callers increases the numbers of smokers who give up for good.

Smoking remains the single most important avoidable cause of illness and death and research into [smoking cessation](#) is a top public health priority in the UK. This latest study by UKCTCS set out to compare the effectiveness of a package of extra support offered to smokers with the standard support offered through the English NHS Smoking Helpline.

Leading the study, Professor Tim Coleman of UKCTCS, said: "This important trial has shed useful light on how telephone quitlines can be

used to help smokers wanting to quit. I think the results highlight just how hard it is for most people to break their [addiction](#) to tobacco and just how powerful and damaging a drug this is. On the basis of this study, giving out free [nicotine patches](#) and more intensive telephone counselling through the English national quitline just doesn't seem to work. It brings into sharp relief the need to find other ways of using quitlines help smokers give up and so to reduce the terrible effects smoking has on people's lives and the costly burden to the NHS."

The researchers carried out a parallel four group (2x2), randomised [controlled trial](#) among 2,591 non-pregnant smokers who called the English NHS smoking helpline between February 2009 and February 2010. Each smoker was randomly assigned to one of four groups:

- Standard support— NHS Stop Smoking Services advice and access to helpline
- Standard support with free [nicotine replacement therapy](#) (NRT)
- Proactive support —consisting of extra and regular scheduled telephone and message support from helpline staff.
- Proactive support with free (NRT)

The proactive groups were contacted by counsellors before their agreed quit date, on the day itself, and then at 3,7,14 and 21 days after quitting. Counsellors were trained to use specially designed motivational interviewing techniques which were tailored to each stage of the quitting process. The support closely monitored the two proactive groups' progress, and offered counselling, encouragement and congratulations.

Trial follow up was carried out by a market research company who were blind to treatment allocations. They collected data by telephone at one and six months after quit dates. The primary outcome was self-reported, prolonged abstinence from smoking from the quit date to six months.

Lapses of no more than five cigarettes in that period were allowed. Prolonged abstinence from the quit date and one month was also monitored with the same lapses permitted.

Analysis of the substantial bank of data recorded during the trial showed that at six months after quitting 18.9 per cent of the 59 per cent of participants who were contacted said they had managed not to smoke. Those whom the researchers were not able to contact were assumed to be smoking. Nearly 80 per cent of these agreed to give a breath test for carbon monoxide to validate their claim and 80 per cent of the tests proved they had quit successfully. Crucially no significant difference in success rates was observed between quit rates in the standard and proactive counselling groups or between those offered and not offered, NRT.

At one month after quit date higher follow-up rates were achieved (65.3 per cent of participants were contacted) but even with more complete data and the higher overall quit rates at one month (40.1 per cent), no significant differences were detected between the different intervention groups.

Overall the study has concluded that offering free [nicotine](#) patches or proactive counselling to smokers calling the English national smoking quitline was no more effective than the standard reactive quitline support which is currently on offer through the NHS. Quitlines can reach large numbers of smokers who are highly motivated to stop [smoking](#) . Consequently, future research needs to test other methods of providing cessation support to quitline callers so the most effective ways using quitlines can be discovered.

Provided by University of Nottingham

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