

# Many doctors do not provide tobacco cessation assistance to lung cancer patients

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Physicians who care for lung cancer patients recognize the importance of tobacco cessation, but often do not provide cessation assistance to their patients according to a recent study published in the *Journal of Thoracic Oncology (JTO)*.

An online survey was conducted in 2012 by the International Association for the Study of Lung Cancer's (IASLC) [Tobacco Control](#) and [Smoking Cessation](#) Committee. The survey asked IASLC members about their practices, perceptions and barriers to tobacco assessment and cessation in cancer patients. More than 1,500 IASLC members responded and more than 90 percent of the physician respondents believe that active current smoking affects treatment outcomes and that tobacco cessation should be a standard part of clinical care. However, only 39 percent of respondents said they routinely provided smoking cessation assistance. In addition, the study found that physicians believed that patients would be resistant to tobacco cessation treatment and many do not feel adequately prepared to deliver effective tobacco cessation support to their cancer patients.

"This is the largest assessment of tobacco assessment, cessation, and perceptions of [tobacco use](#) by physicians who treat cancer patients," says Dr. Graham Warren, vice chair for research in [Radiation Oncology](#) at the Medical University of South Carolina and lead author on the study. "Tobacco use affects outcomes for virtually all cancer patients by increasing mortality, treatment complications, and other adverse health outcomes such as heart disease. Stopping tobacco use may be the most

important activity a cancer patient can do to improve their chances of successful cancer treatment. As clinicians and researchers, we must work to improve access to tobacco cessation resources and improve effective methods of tobacco cessation for cancer patients."

The study represents a large collaborative effort led by Warren and several investigators at IASLC, Roswell Park Cancer Institute, the Medical University of South Carolina, Yale University and MD Anderson Cancer Center. "The fact that several institutions worked together to assess physician practice is a very positive step," says Dr. Ellen R. Gritz, chair of the department of Behavioral Science at MD Anderson Cancer Center and member of the Institute of Medicine, who was a co-author on the study. "Hopefully, we can continue to make progress by bringing experts in diverse fields together and increase our ability to address adverse health behaviors, such as tobacco use, in cancer patients."

"The IASLC has significantly advanced our understanding of clinician behavior regarding tobacco use by cancer patients," says Dr. Alex Adjei, senior vice president for clinical research at Roswell Park Cancer Institute and Editor in Chief of *JTO*.

"Clearly there is a need to increase tobacco cessation assistance for [cancer patients](#)," says Dr. Carolyn Dresler, member of the IASLC Board of Directors and the Tobacco Control and Smoking Cessation Committee. "This study really helps us better understand the barriers to implementing [tobacco cessation](#) and gives us a target to improve cessation support."

Provided by International Association for the Study of Lung Cancer

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