

Missed opportunities to help smokers with mental illness

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Although smoking prevalence has declined in the United Kingdom over recent decades, it has changed little among people with mental health disorders, remaining substantially higher than the national average. Yet a study published in the journal Addiction, presenting work carried out for a report released today by the Royal College of Physicians and Royal College of Psychiatrists called 'Smoking and Mental Health', suggests that general practitioners (GPs) are missing opportunities to help smokers with mental health disorders to quit. Though smokers with mental health problems are more likely than other smokers to receive cessation support from their GP over the course of a year, this reflects the increased frequency of their consultations. Overall, the total proportion of smokers with poor mental health (indicated by a recorded diagnosis or a prescription for a psychoactive medication) who are prescribed a smoking cessation medication in any one year is low: approximately one in ten is prescribed a smoking cessation medication, and only half are advised to quit.

This is bad news for a group that is particularly vulnerable to poor health. People with severe mental illnesses such as schizophrenia have some of the worst physical health of any section of the population. The research published in *Addiction*, of over 2 million patients, shows that people with mental illness are around twice as likely to smoke as those without and nears 50% in those with more severe illness. Smoking-related illnesses contribute significantly to high sickness and death rates in these groups, with mortality rates up to three times those of the rest of the population.



GPs are particularly well-placed to intervene with patients who have mental health disorders and offer smokers help to quit. The stop-smoking interventions that are known to work in the general population – including nicotine replacement therapy and other medications and referral to a smoking cessation advisor—are also effective in patients with poor mental health, so primary healthcare professionals should offer such interventions routinely to their patients with mental health disorders.

If GPs were to intervene in an equal proportion of consultations regardless of patients' mental health status, smokers with indicators of poor mental health would be advised to quit or prescribed a cessation medication more frequently, which would help to reduce the health inequalities in these vulnerable groups of patients.

More information: Szatkowski L. and McNeill A. The delivery of smoking cessation interventions to primary care patients with mental health problems. *Addiction*, 108: doi: 10.1111/add.12163

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