

Collaborative study of uninsured smokers finds benefit from pairing nicotine patches with quitline support

July 29 2014, by Deborah Pettibone

Uninsured smokers who used nicotine replacement therapy (NRT) patches in combination with NRT lozenges nearly doubled their quit rates when using the support of a quitline, according to a study published online ahead of print in the Journal of Smoking Cessation.

A team of scientists from Roswell Park Cancer Institute (RPCI), the Medical University of South Carolina, Yale University School of Medicine and the University at Buffalo (UB) evaluated the smoking quit rates of more than 3,000 daily tobacco users who contacted the New York State Smokers' Quitline. One group of [heavy smokers](#) was given a free two-week supply of nicotine patches. A second group of heavy smokers was provided a free two-week supply of both [nicotine patches](#) and lozenges. Supportive counseling and follow-up calls were provided by trained Quitline specialists.

The results indicated that combination NRT was no more effective in a single-type therapy overall. However, subgroup analyses provided useful insights into reaching and assisting heavy and uninsured smokers. For example, the use of [combination therapy](#) can result in higher quit rates among groups reporting a lower socioeconomic status (SES) and lower nicotine dependence.

"We know that people with lower socioeconomic status are more likely to start smoking, more likely to smoke more heavily and less likely to

quit. This study found that the group of heavy smokers benefited more from combination NRT coupled with Quitline counseling, and therefore were more successful in their quit attempts," said senior author Shannon Carlin-Menter, PhD, now a Research Assistant Professor in the Department of Family Medicine at UB, who conducted the research as director of evaluation for the Quitline.

"This study offers significant public health implications for the delivery of evidence-based cessation treatment," added Andrew Hyland, PhD, Director of the New York State Smokers' Quitline, Chair of the Department Health Behavior at RPCI and a co-author of the study.

"Quitlines reach underserved populations that often have limited access to in-person cessation treatments. The combination of nicotine replacement when offered in context of a quitline may offer real advantages to smokers from lower socioeconomic strata," continued Dr. Hyland, who also holds a faculty appointment at UB.

Findings of note:

- Quit rates were higher for those given combination therapy compared to those given a single therapy, although they were not significantly different overall.
- Specific subgroups, including uninsured smokers, using combination therapy compared with uninsured smokers using a single therapy had significantly higher quit rates.
- The offer of a free supply of nicotine medication was rated as "very important" by smokers in both groups.
- NRT usage was higher among those who received combination therapy compared to those who received a single type of therapy.
- Reported relief from cravings was significantly greater among those who received the combination therapy.
- The estimated cost of providing NRT was lower among the uninsured participants receiving combination therapy versus

those receiving a single therapy, due to the difference in the quit rates.

"In an analysis of subgroups of smokers, researchers found that the smoking quit rates of uninsured participants who received combination NRT were significantly higher than the smoking quit rates of uninsured participants who received a single type of NRT. These data provide insights on the ability of quitlines to reach and assist disadvantaged groups with quitting," added co-author Laure Krupski, PhD, a Training and Development Content Manager at RPCI.

"This study provides valuable insights for quitline managers who are coping with declining budgets and increased demand for services," continued Martin Mahoney, MD, PhD, a Professor of Oncology in the Departments of Medicine and Health Behavior at RPCI who also holds a faculty title at UB and is a co-author on the paper. "These findings and future research provide quitlines with the ability to make targeted and informed decisions regarding providing [nicotine replacement therapy](#) to callers."

Smokers who participated in the study were callers to the New York State Smokers' Quitline, which is part of Roswell Park Tobacco Cessation Services. The Quitline offers evidence-based and innovative tobacco cessation services that help tobacco users break their addiction to nicotine. Telephone and technology-based services are provided and include quit coaching, stop-smoking medications and information or referrals to additional resources. For more information, call 1-866-NY-Quits or visit www.nysmokefree.com.

The study is "Cost and Effectiveness of Combination Nicotine Replacement Therapy Among Heavy Smokers Contacting a Quitline."

Provided by Roswell Park Cancer Institute

Citation: Collaborative study of uninsured smokers finds benefit from pairing nicotine patches with quitline support (2014, July 29) retrieved 26 April 2024 from <https://medicalxpress.com/news/2014-07-collaborative-uninsured-smokers-benefit-pairing.html>

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