

# Sustained benefit for parental tobacco control program

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(HealthDay)—Practices that are part of a parental tobacco control intervention have higher rates of delivering tobacco control assistance to parents over a one-year follow-up period, according to a study published online Oct. 20 in *Pediatrics*.

Jonathan P. Winickoff, M.D., M.P.H., from the Massachusetts General Hospital for Children in Boston, and colleagues conducted a cluster randomized trial of 20 pediatric practices in 16 states. Practices were randomized to the intervention, which provided training so that they could give evidence-based assistance for parents who smoke. Provision of meaningful [tobacco control](#) assistance was assessed at a 12-month follow-up telephone survey with parents.

The researchers found that during the 12-month implementation period, the [intervention group](#) had significantly higher practice rates of providing meaningful tobacco control assistance (55 versus 19 percent); discussing various strategies to quit smoking (25 versus 10 percent); discussing cessation medication (41 versus 11 percent); and recommending use of quitline (37 versus 9 percent) compared with the control group (all P intervention versus control practices, the adjusted odds ratio for cotinine-confirmed quitting was 1.07 (95 percent confidence interval, 0.64 to 1.78) after adjustment for demographic and behavioral factors.

"Maximizing parental quit rates will require more complete systems-level integration and adjunctive cessation strategies," the authors write.

One author disclosed financial ties to Pfizer and UpToDate.

**More information:** [Abstract](#)  
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