Tobacco-related diseases are the most preventable cause of death worldwide; smoking cessation leads to improvement in cancer treatment outcomes, as well as decreased recurrence. According to the American Cancer Society, in 2015, nearly 171,000 of the estimated 589,430 cancer deaths in the United States—more than 25 percent—will be caused by tobacco smoking.

To meet the needs of patients who are smokers at the time of a cancer diagnosis, the National Comprehensive Cancer Network (NCCN) has published the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) for Smoking Cessation. The NCCN Guidelines for Smoking Cessation were presented on March 13, 2015, at the NCCN 20th Annual Conference: Advancing the Standard of Cancer Care.

The NCCN Guidelines Panel for Smoking Cessation, chaired by Peter G. Shields, MD, The Ohio State University Comprehensive Cancer Center - Arthur G. James Cancer Hospital and Richard J. Solove Research Institute (OSUCCC - James), recommends that treatment plans for all smokers with cancer include the following: evidence-based pharmacotherapy, behavior therapy, and close follow-up with retreatment, as needed.

"Smoking addiction is a chronic, relapsing disease and many factors contribute to a person's success or failure to kick the habit long-term. Science has shown us that smokers with cancer have a high level of dependence and smoking cessation leads to improvement in cancer
treatment effectiveness and decreased cancer recurrence," said Dr. Shields, Deputy Director of The OSUCCC - James and oncologist specializing in lung cancer.

"Although the medical community recognizes the importance of smoking cessation, supporting patients in ceasing to smoke is generally not done well. Our hope is that by addressing smoking cessation in a cancer patient population, we can make it easier for oncologists to effectively support their patients in achieving their smoking cessation goals," said Dr. Shields.

According to the NCCN Guidelines for Smoking Cessation, combining pharmacologic therapy and counseling is the most effective treatment approach and leads to the best results in smoking cessation. Furthermore, smoking status should be documented in patient health records and updated at regular intervals; smoking relapse is common, and providers should discuss relapse and provide guidance for patients.

"The NCCN Guidelines for Smoking Cessation is a crucial addition to the NCCN Guidelines for Supportive Care," said Robert W. Carlson, MD, Chief Executive Officer, NCCN. "Addressing the physical and behavioral impact of cigarette smoking dependency and offering a support system for people with cancer can positively impact their quality of life, both during treatment and during survivorship."

The NCCN Guidelines for Smoking Cessation joins a library of 10 additional NCCN Guidelines for Supportive Care, which comprise evidence-based treatment recommendations for supportive care areas including, but not limited to adult cancer pain, antiemesis, cancer- and treatment-related anemia and infections, fatigue, distress management, palliative care, and survivorship. NCCN publishes a full library of 61 clinical guidelines detailing sequential management decisions and interventions that currently apply to 97 percent of cancers affecting
people in the United States, as well as cancer prevention, detection and risk reduction, and age-related recommendations.

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