

# Physical activity and tailored support fails to deliver lasting benefits for smokers not ready to quit

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Promoting physical activity and other behavioural support can help people wanting to reduce their smoking to quit in the short-term.

However, after nine months, physical activity delivers no noticeable benefits—compared with offering no additional support—in the rates of people stopping [smoking](#), according to the findings of a major national study.

The Trial of physical Activity and Reduction of Smoking (TARS) study, led by the University of Plymouth with funding from the National Institute for Health and Care Research, took place across four cities—Plymouth, Nottingham, Oxford and London—before the COVID-19 pandemic.

Its aim was to provide a definitive answer as to whether future NHS services should be adapted to provide additional support to smokers not ready to quit but who do wish to reduce their smoking, with the hope of increasing sustained abstinence from smoking and associated health benefits.

The study also sought to look into previous suggestions that behavioural support for these smokers can lead to smoking reduction and more attempts to quit.

To answer these questions, half the 915 smokers recruited into the study were offered up to eight, weekly face-to-face or phone motivational support sessions to reduce their smoking and increase moderate to vigorous physical activity. It was an approach which had previously shown encouraging signs in a Plymouth pilot study, and was contrasted against the other half of participants who were offered the usual NHS advice on quitting.

The study showed that engaging with the motivational support had some short-term benefits, with 19% of those receiving the additional support saying they had at least halved the number of cigarettes smoked by three months—14% had still halved their smoking after nine months. By

contrast, around 10% of those receiving the standard advice reported having halved their cigarette intake at both milestones.

However, just 2% of those who received the additional support had abstained from smoking between three and nine months. Less than 1% of those receiving the standard advice managed to abstain from smoking for those six months.

In addition, while after three months people receiving the additional support took part in 81 minutes more physical activity each week than those receiving no support, researchers did not find evidence of sustained differences in physical activity at nine months.

With the additional support costing [health services](#) in the region of £240 per person, the study's authors say their findings show the approach is neither effective for long-term smoking cessation or cost-effective.

The research, published in the journal *Addiction*, also involved the University Hospitals Plymouth NHS Trust, St George's University of London, University of Oxford, University of Nottingham, University of Exeter, and Plymouth City Council.

Adrian Taylor, Professor in Health Services Research within the University of Plymouth's Peninsula Medical School, is the study's lead author. He said, "Generally, the smokers in our study were enthusiastic about the support they received to help reduce their smoking and increase physical activity, which avoided pressuring them to quit. However, they were unable to maintain increases in [physical activity](#) and smoking reduction did not lead to more smokers giving up completely, which is the best thing for an individual's health. Helping [smokers](#) to move from wanting to reduce to quitting completely is far more challenging than other less rigorous studies had suggested."

"This is a further demonstration of the scale of the challenge facing society if we are to achieve the UK Government's stated aim of being smoke free by 2030. However, it is potentially only through additional difficult national policy decisions such as even higher taxation on tobacco, the subsidised promotion of vaping, and increasing the legal age of tobacco purchasing, in line with other countries such as New Zealand, that the huge costs of smoking for our NHS Services will be reduced."

**More information:** Effectiveness and cost-effectiveness of behavioural support for prolonged abstinence for smokers wishing to reduce but not quit: Randomised controlled trial of physical activity assisted reduction of smoking (TARS), *Addiction* (2023). [DOI: 10.1111/add.16129](https://doi.org/10.1111/add.16129)

Provided by University of Plymouth

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