

Stigmatization of smoking-related diseases is a barrier to care, and the problem may be on the rise

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The stigma that patients face when diagnosed with lung cancer is associated with poorer psychosocial outcomes, including distress and

isolation, delayed help-seeking, and concerns about the quality of care, according to research presented today at the International Association for the Study of Lung Cancer (IASLC) 2023 World [Conference](#) on Lung Cancer in Singapore.

The study, conducted by a team of researchers led by Nathan Harrison, a behavioral scientist and Ph.D. student from Flinders University, in Australia, aimed to identify and synthesize existing interventions to combat [stigma](#) associated with [lung cancer](#) and smoking-related [respiratory diseases](#), including [chronic obstructive pulmonary disease](#) (COPD).

Meanwhile, IASLC Patient Advocate Jill Feldman presented data at the same press briefing that showed a significant percentage of lung cancer researchers have embraced the [IASLC Language Guide](#). The lung cancer community recognizes that some commonly used words and phrases used in medicine may be contributing to the lung cancer stigma problem. As a result, advocates are working collaboratively with clinicians and scientists toward changing the language used when discussing topics regarding smoking, tobacco use, and related topics.

In 2021, IASLC published the IASLC Language Guide detailing preferred language and phrasing for all oral and written communications, including presentations at IASLC conferences. Feldman's analysis of 519 presentations at the IASLC World Conference on Lung Cancer 2022 in Vienna found that 177 presentations discussed smoking status, 77 presenters used non-stigmatizing language, while 100 presenters used the stigmatizing term "smoker."

Thus, in only one year of implementation, a significant number of presenters had already adopted the recommended changes that play an important role in creating a patient and advocate-friendly environment at IASLC meetings and activities.

Stigma linked to smoking-related respiratory diseases often leads to externalized devaluation, such as discrimination or judgmental comments, and internalized self-blame or shame.

As denormalization strategies have been central to population-level tobacco control responses that discourage smoking, evidence suggests that stigma around lung cancer and respiratory diseases may be on the rise. To address this issue, developing stigma-reducing interventions for affected individuals has been identified as a priority.

Harrison and his colleagues conducted a [systematic review](#) that identified 10 studies, describing nine distinct interventions from 427 records, aimed at reducing stigma related to lung cancer and smoking-related respiratory diseases. Most interventions focused on guiding [behavior change](#) through group programs, providing formal psychotherapeutic intervention, or offering information/instruction and reference materials to individuals. These interventions primarily targeted symptomatic individuals or higher-risk groups in high-income countries.

The researchers searched four electronic databases (PsycINFO, CINAHL, PubMed, and Scopus), focusing on lung cancer, COPD, and stigma-related terms, for relevant records published up to December 2022. Eligible studies described an intervention designed to reduce externalized or internalized stigma associated with smoking-related respiratory disease and were assessed using JBI critical appraisal tools as appropriate for the varied (case report, qualitative, quasi-experimental, and randomized controlled trial) study designs.

Notably, the study revealed that most of the identified interventions reported achieving reductions in stigma. Both remote and digital [intervention](#) delivery showed similar effects to traditional in-person modes, indicating promise in increasing accessibility for individuals with comorbidities or respiratory disease-related functional impairments.

"We need to further develop and evaluate stigma-reducing interventions with larger samples in diverse socio-cultural contexts," Harrison said.

"Additionally, including validated stigma assessments in a wider variety of interventional studies could help identify more effective techniques for targeted stigma reduction."

Provided by International Association for the Study of Lung Cancer

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