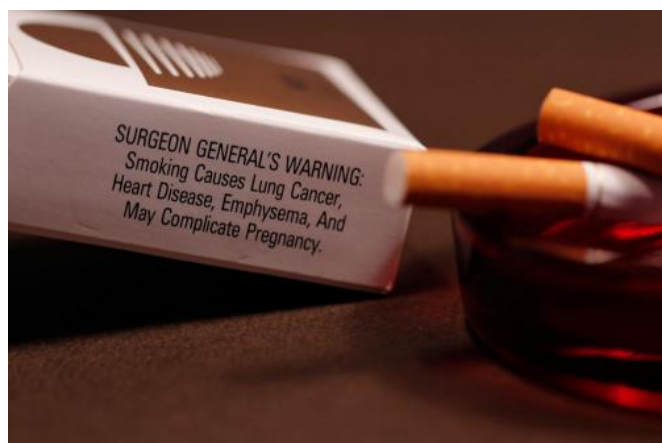


# Smartphone apps lack proven strategies to help smokers quit

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Smoking harms nearly every organ in the body and causes many diseases. Credit: CDC/Debora Cartagena

An estimated 11 million smokers in the United States own a smartphone and increasingly they're turning to apps in an attempt to quit. But many of the most popular anti-smoking apps for iPhones or Androids lack some basic strategies that are known to help smokers quit, according to a new study in the *American Journal of Preventive Medicine*.

"Quit-smoking apps are an increasingly available tool for smokers," says lead author Lorien Abrams, ScD, an associate professor of Prevention and Community Health at the George Washington University School of Public Health and Health Services (SPHHS). "Yet our study suggests these apps have a long way to go to comply with practices that we know can help people stub out that last cigarette."

Abrams, J. Lee Westmaas, PhD at the American Cancer Society, and others on the team collected data on quit-smoking apps for the iPhone and Android, the two leading smartphone operating systems.

They found apps for smartphones were in high demand around the world, with more than 700,000 such apps downloaded every month for Android phones alone. The popularity of such apps may speak to the high level of desire smokers have to quit. According to the Centers for Disease Control and Prevention, more than half of all smokers tried to quit in 2010, the most recent year that statistics were available.

The researchers identified 414 quit-smoking apps for iPhones and Androids and then zeroed in on 50 of the most popular ones from each operating system. The team analyzed each app's approach to smoking cessation, including their adherence to guidelines established by the U.S. Public Health Service on treating tobacco use. The guidelines review decades of scientific studies and offer recommendations on the most effective ways to beat a tobacco habit.

Overall, the study found that the most popular apps were not giving smokers the best treatment options—at least from a clinical practice standpoint. For example, none of the apps in this study recommend that smokers call a quit-line, usually a toll free number that has trained [public health](#) counselors on hand that provide advice on quitting smoking. According to the U.S. Public Health Service such counseling can more than double a smoker's chance of successfully ending their habit.

And less than one in 20 apps recommended that smokers try medication to help them resist the cravings for a smoke. Researchers know that nicotine replacement therapy can be a highly effective tool, especially when used in conjunction with a quit-line. In fact, the use of such counseling along with medication can more than triple a smoker's chances of joining the ranks of former smokers. Most apps also lacked basic advice on how to quit smoking and did not provide assistance in setting up a quit plan, the authors said.

This study had some limitations, including the fact that it does not offer any insight on how the apps are being used once downloaded and whether people are using them in combination with other effective methods. The research suggests that people should use popular apps with some level of caution and probably not as a stand-alone method for quitting.

In fact, Abrams suggests [smokers](#) might want to consider taking the new technology a step back by using their phone not just to download an app but to make a call. "They should simply pick up their smartphone and call a quit-line now to get proven help on how to beat a tobacco addiction."

**More information:** The study, "A Content Analysis of Popular Smartphone Apps for Smoking Cessation," is available online now and will be in the December print edition of the *American Journal of Preventive Medicine*.

Smokers can access a toll-free help line run by the state they live in by calling: 1-800-Quit-Now. Or they can access a phone-based coaching program to help them quit run by the American Cancer Society by calling: 1-800-227-2345.

Provided by George Washington University

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