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3 **Letter To Editor (Original Research)**
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6 **TITLE:**
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9 **Parental smoking and support in the NICU**
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3 26% of UK women report smoking in the 12 months before pregnancy, but only half manage
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5 to quit during pregnancy.[1] In 2017, 10.8% of UK mothers were still smokers at delivery.[2]
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7 Babies born to smoking mothers are more likely to be low birthweight/preterm, require
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9 admission to a neonatal intensive care unit (NICU), and have an increased risk of respiratory
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11 problems during infancy.[3,4]
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17 Postpartum smoking relapse is high among mothers who stopped during pregnancy.[4]
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19 Relapse is associated with stress and social/health inequalities. The NICU period is often
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21 highly stressful for parents.[5] Recent ex-smokers with babies in NICU may be at increased
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23 risk of relapse, while those still smoking may find it a particularly challenging time to stop.
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25 National Institute for Health and Care Excellence (NICE) guidance[4] and a recent Royal
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27 College of Physicians report[6] both recommend smoking cessation referral and support for
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29 all patients, carers and visitors in secondary care settings and postpartum.
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34 The often-lengthy NICU admission presents a unique opportunity for healthcare
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36 professionals to support positive health behaviour change. It is unclear whether smoking
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38 cessation support is routinely broached with parents during the NICU stay, or whether
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40 intervention would be acceptable. Between July and October 2017 we surveyed NICUs to
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42 understand current practices, and also conducted a study exploring parents' experiences and
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44 opinions regarding potential smoking cessation support in the NICU.
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49 By telephone survey we contacted 20 UK tertiary NICUs to ask a senior nurse about their
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51 unit's smoking policies and practices. 15 (75%) centres responded: none had its own
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53 dedicated no-smoking policy, and most deferred to their NHS Trust's general policy; only
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55 three units (20%) reported that they *did* routinely ask parental smoking status and offer
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57 smoking cessation support; seven (47%) offered some advice at discharge.
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3 We invited a convenience sample of parents of babies admitted to our NICU to discuss
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5 smoking, experiences of cessation support, and views about receiving support. With written
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7 consent and ethics approval, we interviewed 32 parents of current NICU babies (gestations:
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9 25–39 weeks). 10 (31%) were current smokers, 9 (28%) were recent ex-smokers (quit during
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11 pregnancy), and 13 (41%) were non-smokers. This smoking rate was considerably higher
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13 than would be expected in a general population of new parents.[2] 25/32 (78%) recalled being
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15 asked about smoking status during pregnancy, but only 3/32 (9%) reported being asked at the
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17 time of delivery, despite enquiry about smoking status at delivery being a national
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19 requirement.[2] No parent recalled ever being asked by any NICU staff member during their
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21 baby's current admission whether they smoked. 15 (47%) parents stated that they would
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23 welcome smoking cessation support during the NICU stay.
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29 Our exploratory research indicates a clear need for routine and improved smoking cessation
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31 support within NICU. These data will inform the design and delivery of a dedicated smoking
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33 cessation intervention for parents and family members of neonates admitted to the NICU.
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35 Promotion of smoke-free homes is a potentially achievable goal that will benefit the lives and
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37 health of many preterm babies and their families.
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