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THE BUTT STOPS HERE

Trying To Quit Smoking?

**Attention Hudson Headwaters Patients:
Join Us For A FREE 7-Week Group Program**



EVALUATING THE EFFECTIVENESS OF A SMOKING CESSATION SUPPORT GROUP

Holly Bachilas

Longitudinal Integrated Clerkship
Larner College of Medicine
at the University of Vermont
Hudson Headwaters Health Network
Glens Falls, NY
2017-2018

PROBLEM IDENTIFICATION [NATIONAL/STATE]

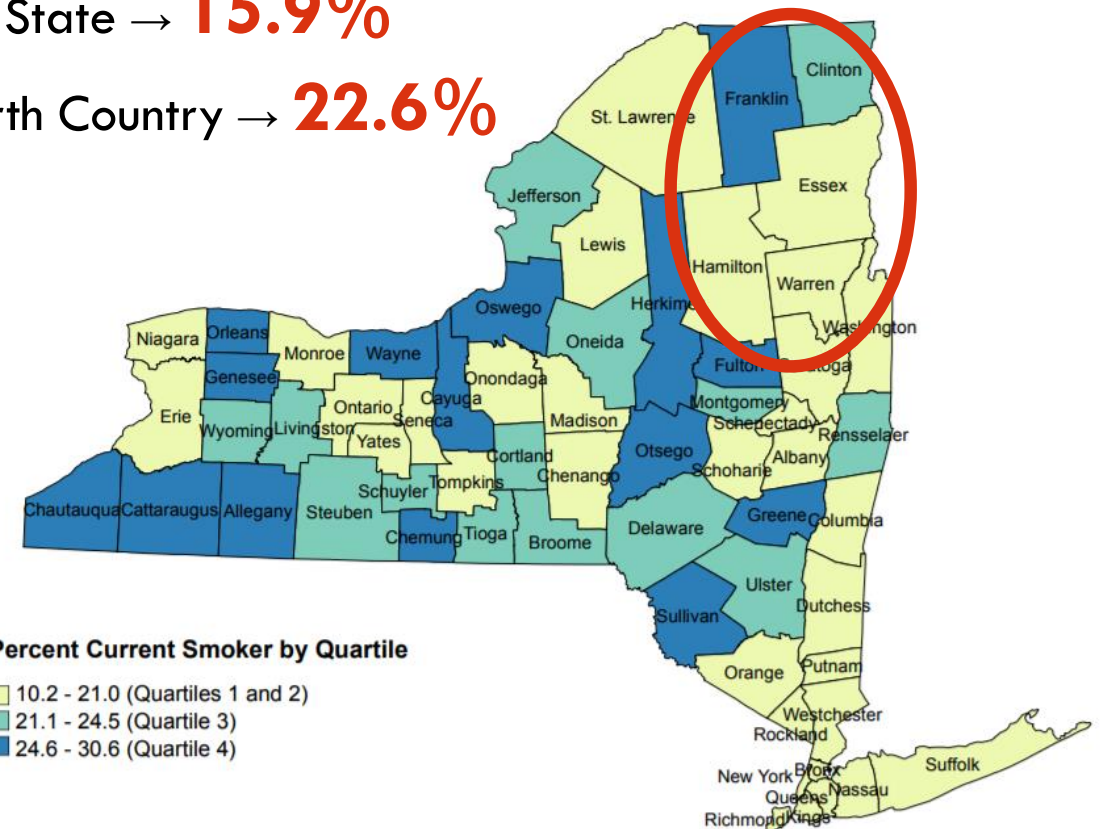
US

- In 2015 → **15.1%** of US adults smoked
- Smoking is the leading cause of preventable disease and death in the United States and accounts for more than 480,000 deaths every year, or 1 of every 5 deaths.
- Healthy People 2020 Goal: **12%**

NY

Prevalence of Current Smoking Among Adults in NYS by County, eBRFSS 2013-2014

- NY State → **15.9%**
- North Country → **22.6%**



PROBLEM IDENTIFICATION [LOCAL]

Smoking Status	Number of Patients	Label
Current Every Day	12,762	Smoker
Current Some Days	1,235	Smoker
Formerly	19,247	Non-Smoker
Never	31,049	Non-Smoker
Blank/Unknown	307	Non-Smoker
Total	64,600	

Location	Total Patients	Smoking Rate
Bolton Health Center	1242	14%
Chester-Horicon Health Center	2082	16%
Fort Edward-Kingsbury Health Center	4241	30%
Health Center at Broad Street – Primary Care	5511	30%
Health Center at Broad Street – Urgent Care	4694	34%
Indian Lake Health Center	1107	17%
Moreau Family Health	3873	22%
Moriah Health Center	980	25%
North Country Family Health	4426	25%
North Country Ob/Gyn	3423	13%
North Creek Health Center	1671	20%
Queensbury Family Health	375	11%
Schroon Lake Health Center	1068	12%
Ticonderoga Health Center	4248	25%
Warrensburg Health Center – Primary Care	8159	22%
Warrensburg Health Center – Urgent Care	553	22%
West Mountain Health Services – Bldg 1	3682	12%
West Mountain Health Services – Bldg 2	13018	17%

PUBLIC HEALTH COST

- Total economic cost of smoking in the US → more than **\$300 billion/year**
 - This includes nearly \$170 billion in direct medical care for adults and more than \$156 billion in lost productivity due to premature death and exposure to secondhand smoke
- Healthcare costs in NY state → **\$10.4 billion/year**
 - more than a third (\$3.3 billion) is paid for by Medicaid

COMMUNITY PERSPECTIVE

Kate Ormsby, HHHN Prevention Coordinator:

“My perspective is that any behavior change is difficult and it has been proven that social support increases the likelihood of making lifestyle changes.”

Anonymous, Program Participant:

“Having people to talk to is a real plus. It is great to be able to ask questions and have tools. I like the camaraderie and ability to talk with others about the difficulty you face as you try to quit.”

SMOKING CESSATION TOOLS — 6-MONTH QUIT RATES

4%

“Cold Turkey”

16%

Nicotine
Patch

16%

Nicotine
Gum

19%

Bupropion

24%

Nicotine
Nasal Spray

17%

Nicotine
Inhaler

19%

Nicotine
Lozenge

27%

Varenicline

Pharmacotherapy + Behavioral Counseling → 30%

INTERVENTION AND METHODOLOGY

- Established a HHHN-led smoking cessation support group using the 7-week **Butt Stops Here curriculum** developed in NY state. Each session includes topics for group discussion as well as weekly homework.
- Participants were recruited via flyers in HHHN offices/around town and via referral from providers and the NY state quit line.
- Participants received free program workbooks as well as folders containing local smoking-cessation resources.
- Brief paper **surveys** were completed by the participants both before and after the 7-week session to begin to evaluate the effectiveness of the program.
- **Carbon monoxide levels** were also measured for each participant at each meeting to track cessation in real-time.
- So far two 7-week sessions have been completed and a third is currently underway.

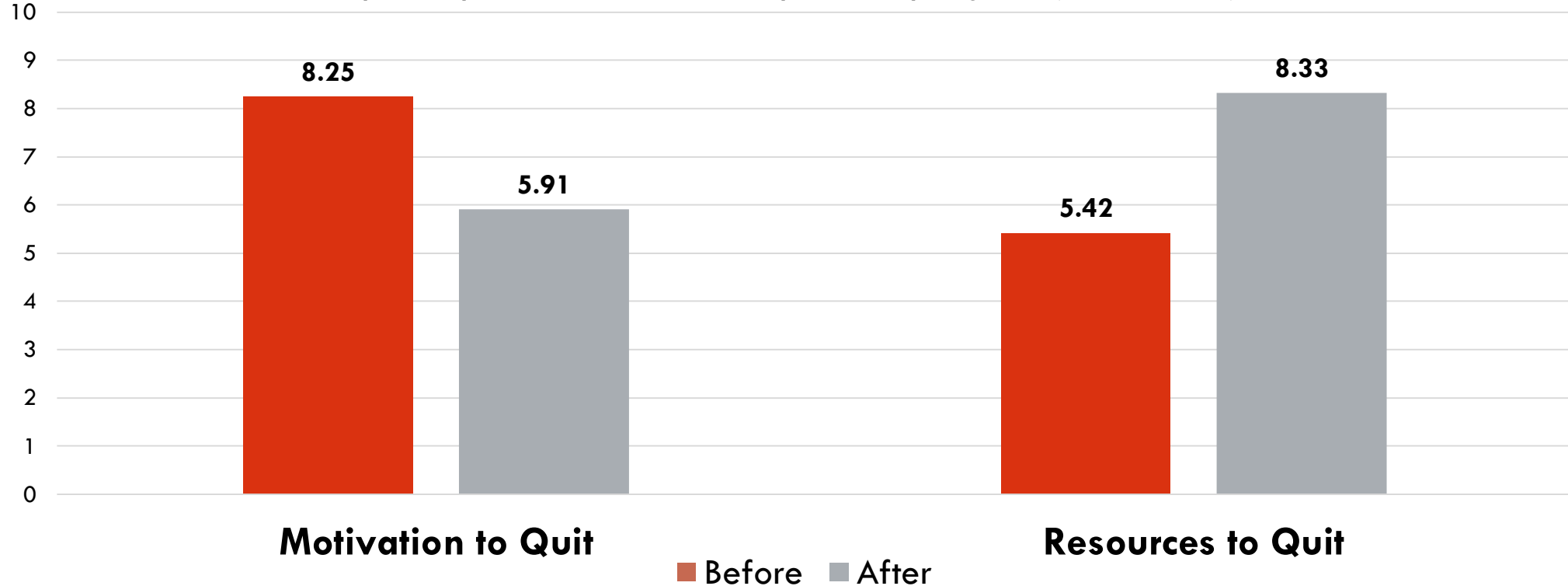


RESULTS

- 8 total participants (2 participated in both 7-week sessions)
 - 4 male, 4 female
 - Ages 42-72, average = 56
 - 4 had at least an Associate's degree
 - 7/8 had smoked for > 20 years
 - Average of <1 ppd
 - All had attempted to quit > 3 times in the past (success ranging from 2 weeks – 8 years)
 - Between them had tried cold turkey, NRT, bupropion, and varenicline
 - All identified health as one reason they wanted to quit, most also identified cost as a motivator

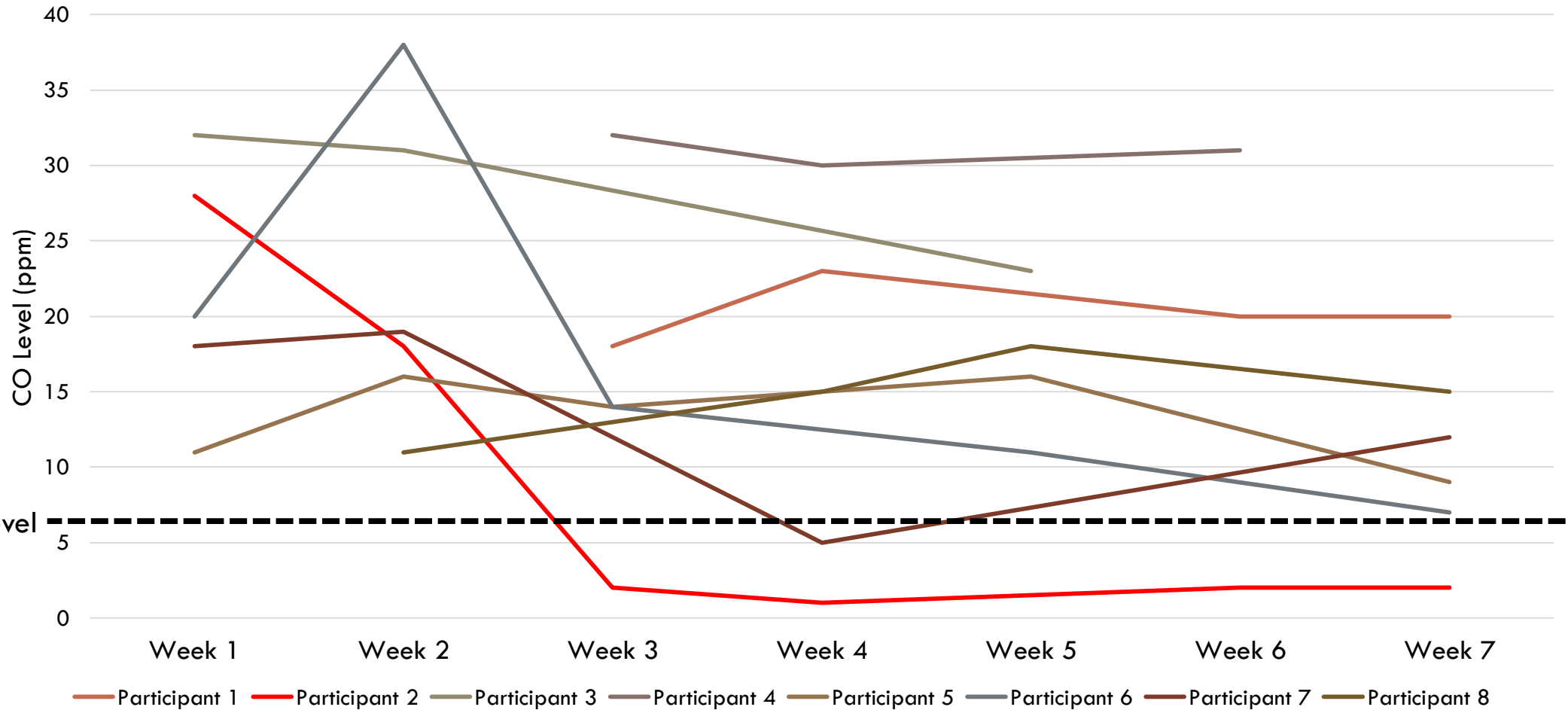
RESULTS — MOTIVATION AND RESOURCES

Participant-reported level of motivation and resources to quit before and after participation in the Butt Stops Here program (0-10 scale)



RESULTS — CO LEVELS

Carbon monoxide levels per participant per week



RESULTS — CESSATION RATES

- Participant 1 – cut back slightly, now smoking a little less than 1/2ppd
 - Participant 2 – was able to quit entirely and is still a non-smoker (> 2 months out)
 - Participant 3 – was able to quit entirely for 3-4 weeks, but is now back to smoking 1/2ppd
 - Participant 4 – was smoking 2ppd, now closer to 1ppd
 - Participant 5 – has decreased to about 5 cigarettes per day (was smoking 10)
 - Participant 6 – was able to quit for 1-2 weeks, but is now back to smoking 1/2ppd
 - Participant 7 – was still smoking at the end of one session, but has been a non-smoker for about 2 weeks
 - Participant 8 – came to a few sessions, but was unable to continue
-
- **One participant was able to quit entirely (12.5%)**
 - **Nearly all participants reduced their level of smoking**

LIMITATIONS

- Sample size
- Need for longer follow-up
- People who seek out a group program may be more motivated to quit in general

RECOMMENDATIONS

- Work on recruitment
- Consider a program with rolling admission
- Continue to evaluate effectiveness as number of participants increases
- Integrate pharmacologic efforts more
- Emphasize referral to more intensive behavioral counseling/CBT
- Consider having a former smoker run the program



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HHN HUDSON
HEADWATERS
HEALTH NETWORK

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