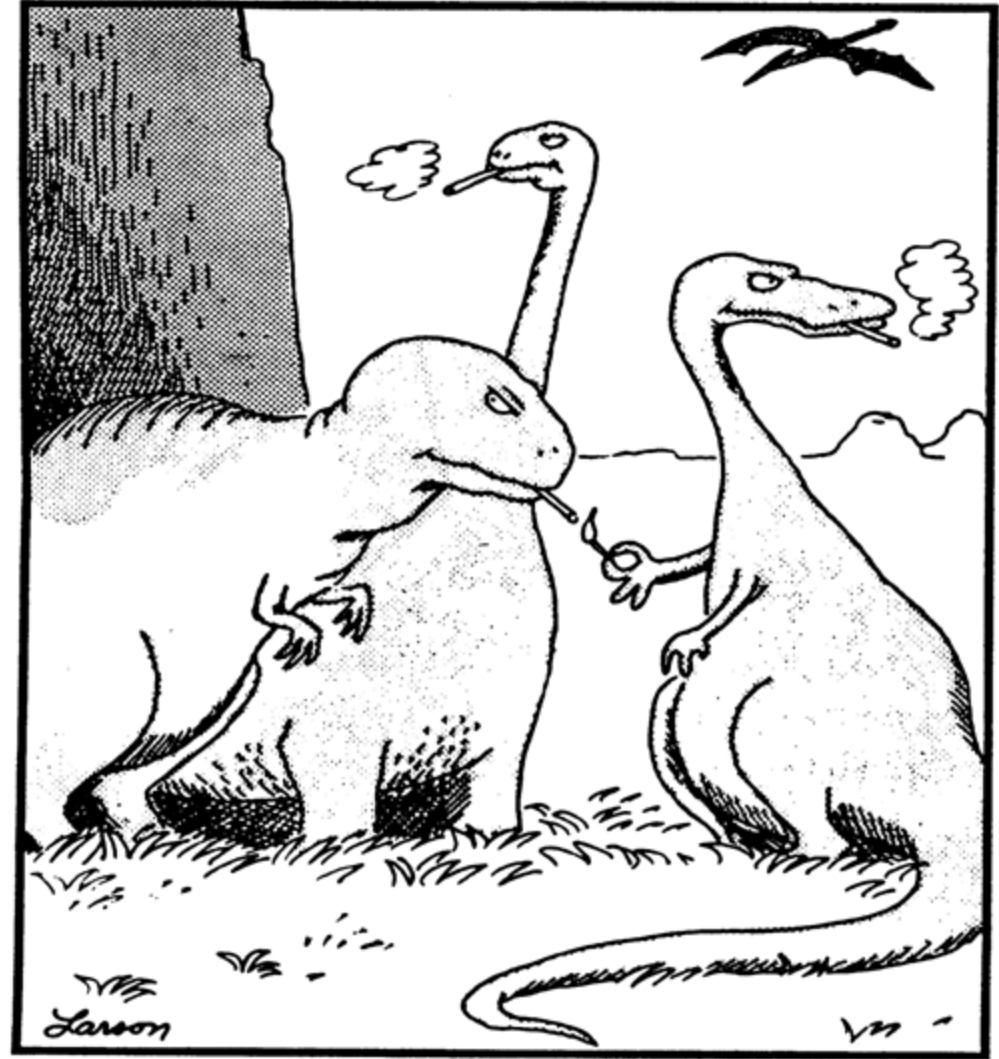


Beating Joe Camel: The ASA Smoking Cessation Initiative

David O. Warner, M.D.



The real reason dinosaurs became extinct

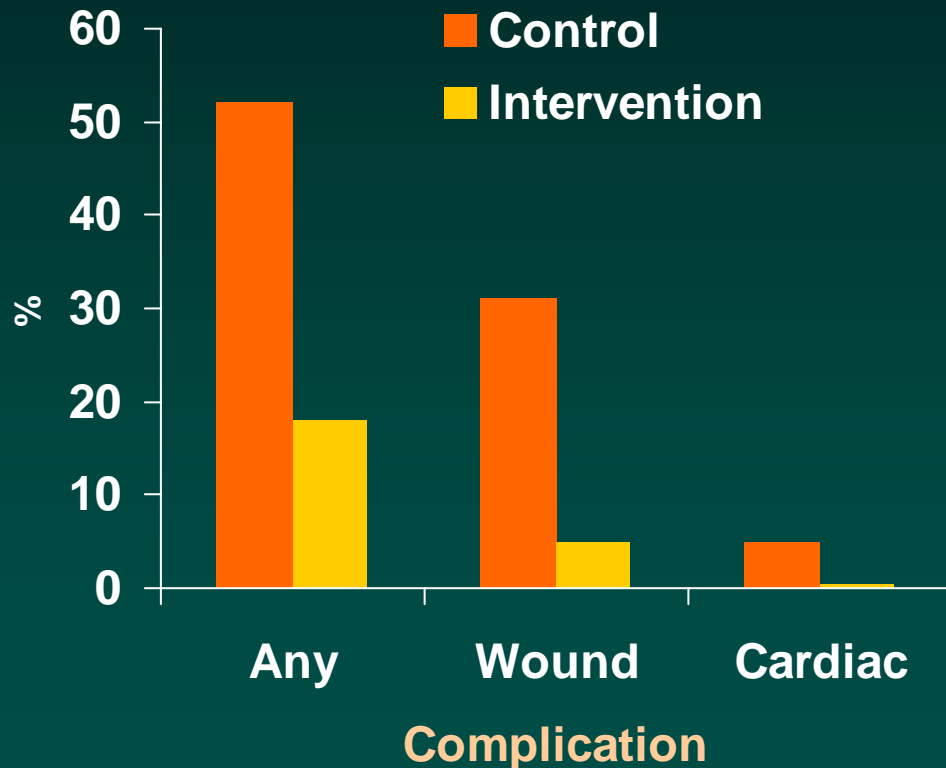
Why Bother?

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graph TD; A[Why Bother?] --> B[Quitting Smoking Improves Surgical Outcomes]; A --> C[Surgery May Promote Quitting Smoking];
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Quitting Smoking
Improves Surgical
Outcomes

Surgery May
Promote Quitting
Smoking

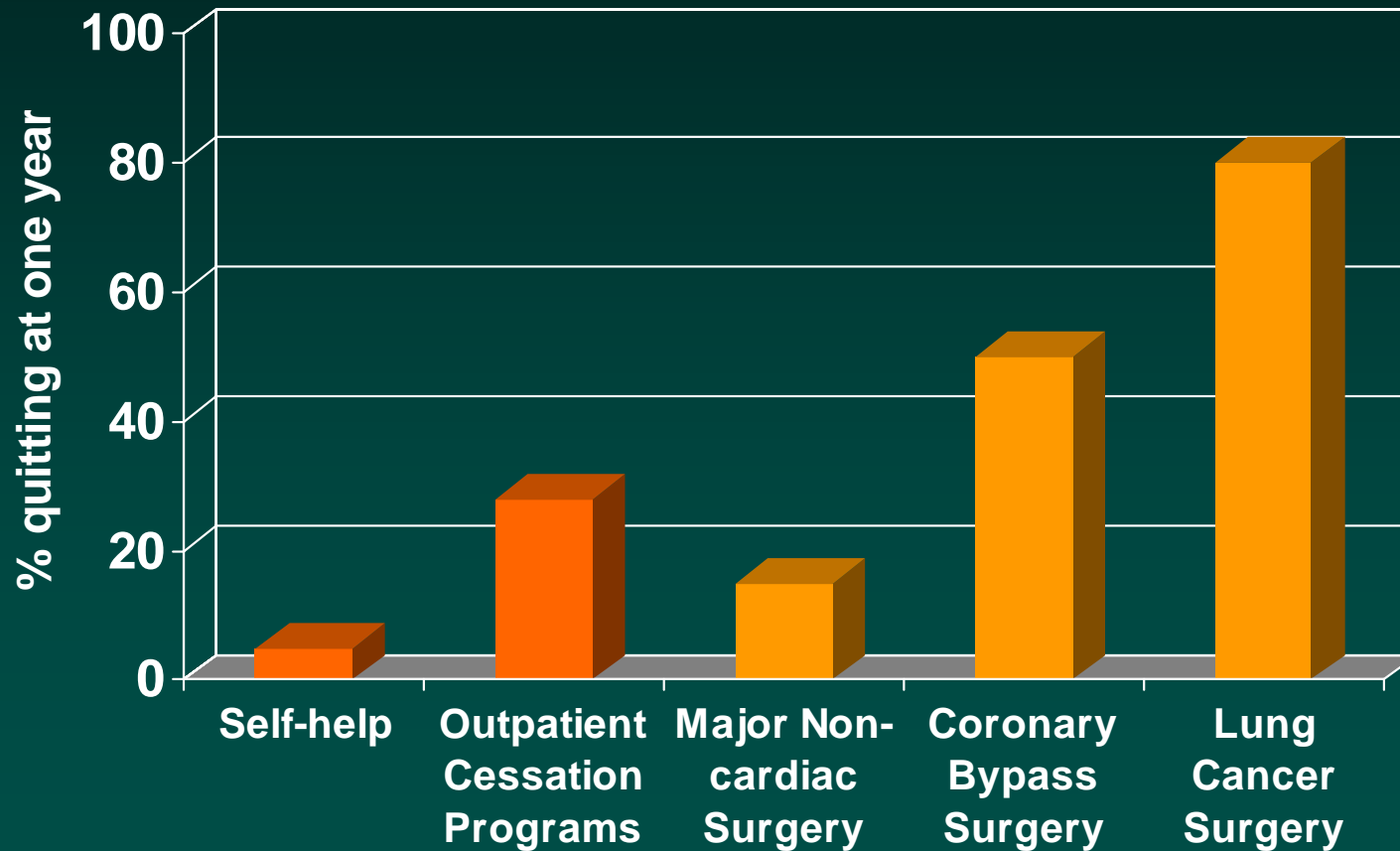
Smoking Cessation Reduces Postoperative Complications



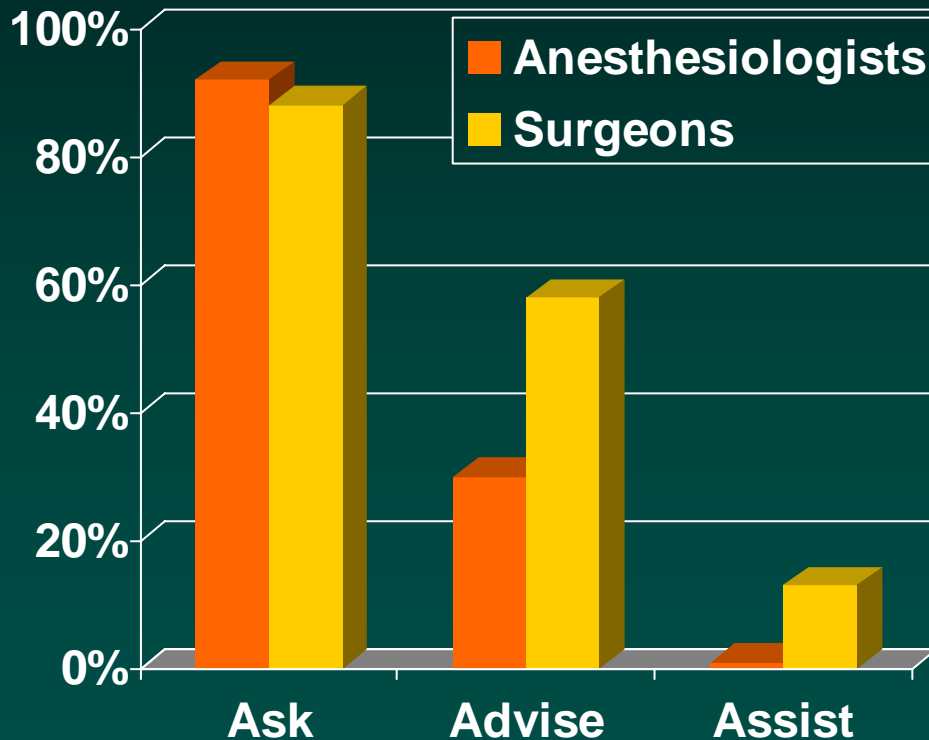
- 120 Orthopedic patient randomized to tobacco intervention or control, 6-8 weeks prior to surgery
- ~80% of intervention patients were able to quit or reduce smoking

Moller, Lancet 359:114, 2002

Smoking Cessation After Surgery



What are we doing now?



- Survey responses from 329 anesthesiologists and 299 general surgeons
- Proportions that “always” performed intervention
- Actual patient perceptions may differ (e.g., ~30% of patients recall being advised)

Warner et al, Anesth Analg 99:1766,2004

Barriers to Perioperative Smoking Cessation?

- A. Quitting just before surgery increases pulmonary complications
- B. Nicotine replacement therapy is dangerous
- C. Surgical patients are already too stressed
- D. Patients don't want to hear about their smoking – they have enough to worry about

The Real Barriers to Intervention

“I don’t know how”

“I don’t have time”

“It’s not my job”

ASA Smoking Cessation Initiative - Rationale

- Smoking cessation improves perioperative outcomes
- Sustained abstinence produced by this teachable moment produces an average 6-8 years of life gained
- Demonstrate to the public that anesthesiologists are perioperative physicians who care about patient health
- Recent CMS changes make it possible to bill for brief tobacco interventions

ASA Smoking Cessation Initiative – Vision and Goals

- Vision
 - ◆ Every smoker cared for by an anesthesiologist will receive assistance in quitting as an integral part of care
- Goal
 - ◆ Increase the involvement of ASA members in smoking cessation efforts, thus increasing abstinence rates for their patients who smoke

ASA Smoking Cessation Initiative – Strategies

- Encourage all anesthesiologists to consistently apply the Ask, Advise, and Refer technique
- Develop anesthesiologists who can serve as leaders for local efforts to provide tobacco intervention services in perioperative practice
- Educate the public regarding the importance of perioperative smoking cessation
- Create partnerships with other healthcare professionals to promote a comprehensive perioperative strategy for patients who smoke

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What should we do for smokers who need surgery?

- **ASK** - assess tobacco use at every visit
- **ADVISE** - strongly urge all tobacco users to quit
- **REFER** – To a tobacco quitline or other resources

ASA “Quitcard”

Be Smoke-Free for surgery



**1-800
QUIT-NOW**
(1-800-784-8669)

Talk to an Expert

- Free
- Effective
- Confidential

For More Information
Visit www.asahq.org/xxxx



1-800-QUIT-NOW
(1-800-784-8669)

Quitting smoking helps you heal better after surgery.

Surgery is a great opportunity to quit for good.



AMERICAN SOCIETY
OF ANESTHESIOLOGISTS

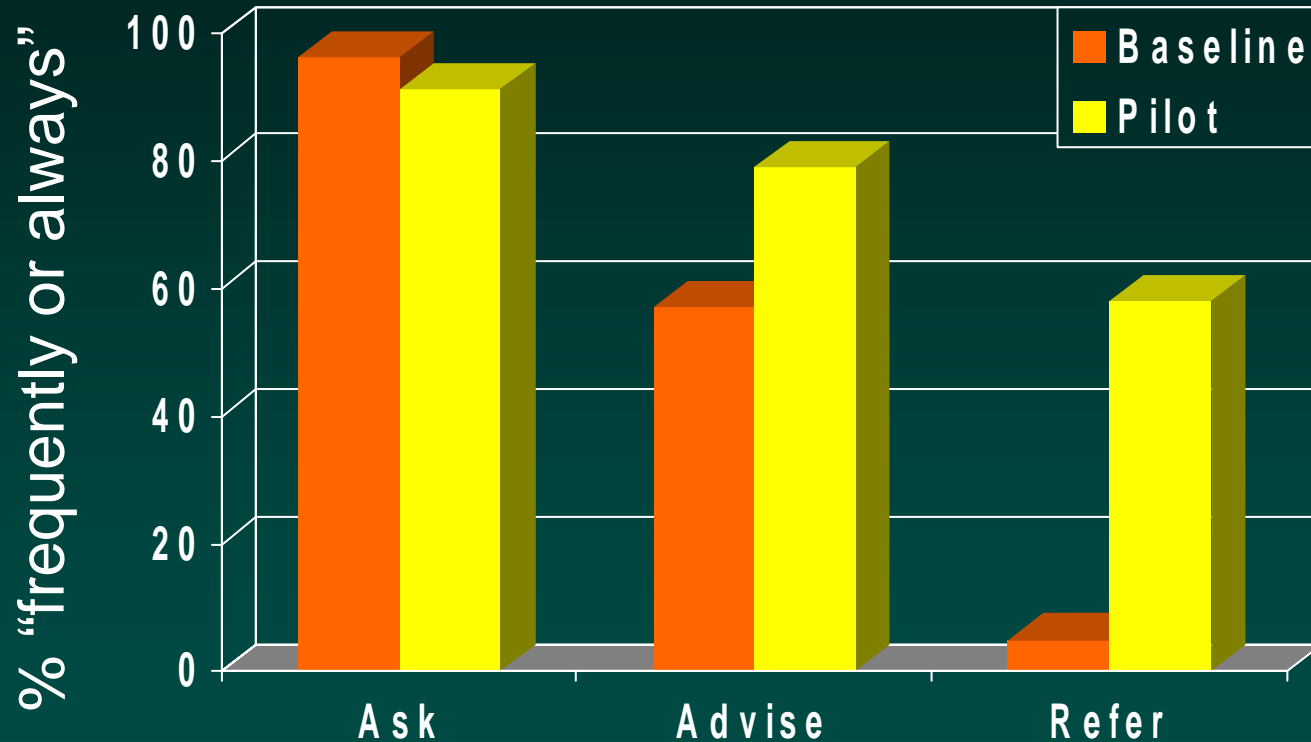
ASA Smoking Cessation Initiative Task Force – Pilot program

- Identified 14 practices nationally
- Identified a champion within each practice to promote the Ask-Advise-Refer strategy
- Implemented strategy for 3 months, beginning October 2007
- Surveyed practices after this period to determine effects on practitioner behavior and gather feedback

Preliminary Highlights (n=58)

- ~50% expressed increased self-efficacy
- ~75% agree that they would incorporate AAR in their practice
- High acceptance of materials
- ~80% agree that the ASA should encourage

Self-reported respondent behavior



“Baseline” – 2004 national survey
Warner et al, A&A, 99:1766, 2004

Next steps...

- Approval by Board of Directors to perform national marketing campaign
- Develop educational materials in partnership with Rx for Change
- Partnerships with other surgical providers

http://www.asahq.org/patientEducation/smoking_cessationProvider.htm

Lessons learned....

- Articulate a compelling rationale
- Appeal to professionalism
- Provide the data
- Consider financial incentives
- Tear down barriers
- Get help
- Organize, organize, organize

What about Joe Camel?

