



## TOOLS AND RESOURCES TO HELP PATIENTS QUIT SMOKING

### COUNSELING/SUPPORT/RESOURCES

PROGRAM	HOW TO ACCESS
Stop Smoking for Life	1-810-342-5370 valerie.mcleod@mclaren.org
Quit Line*	1-800-QUITNOW (1-800-784-8669)
Plan My Quit*	www.planmyquit.com/McLaren
Quitter's Circle®**§	<ol style="list-style-type: none"> <li>Download Quitter's Circle from <b>App Store/Google Play</b></li> <li>Enter personal Email and create a password</li> <li>Follow and respond to prompts</li> <li>Enter code provided by organization <b>McLaren</b></li> </ol>

### PHARMACOLOGICAL AIDS\*\*

TYPE	REGIMEN	HOW TO ACCESS
Non-nicotine pills	As directed by a healthcare provider	By prescription
Nicotine replacement therapy (NRT)— Nicotine gum, lozenge, patch, or inhaler	As directed by your healthcare provider, or consult with a healthcare provider about how best to use	Available over the counter and by prescription

\*\*Please consult the product labeling for the risks and benefits of each product.

\*A Pfizer-sponsored program.

\*An American Lung Association–sponsored program.

†Pfizer does not own or operate the quitline and is not responsible for the information provided.

§Quitter's Circle is a registered trademark of Pfizer Inc.

**REFERENCES:** 1. Fiore MC, Jaen CR, Baker TB, et al. Clinical Practice Guideline: Treating Tobacco Use and Dependence: 2008 Update. Rockville, MD: US Dept of Health and Human Services, Public Health Service; 2008. 2. Centers for Disease Control and Prevention. Quitting smoking among adults—United States, 2000–2015. *MMWR*. 2017;65(52):1457–1464. 3. American Cancer Society. Deciding to quit smoking and making a plan. <http://www.cancer.org/healthy/stayawayfromtobacco/guidetoquittingsmoking/deciding-to-quit-smoking-and-making-a-plan>. Accessed January 12, 2018. 4. CDC. Smoking & tobacco use. Benefits of quitting. [http://www.cdc.gov/tobacco/quit\\_smoking/how\\_to\\_quit/benefits/index.htm](http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/benefits/index.htm). Accessed January 12, 2018. 5. Miller WR, Rollnick S. *Motivational Interviewing: Preparing People for Change*. 2nd ed. New York, NY: The Guilford Press; 2002:33–42.



FLINT

# HOW TO HELP PATIENTS QUIT SMOKING



## Start with the 5 As

Public Health Service guidelines recommend following the 5 As for an effective brief intervention in a busy primary care setting<sup>1</sup>:

**A**sk about tobacco use

**A**dvice to quit

**A**ssess willingness to quit

**A**ssist in the quit attempt

**A**rrange a follow-up



## IDENTIFYING PATIENTS' WILLINGNESS TO QUIT

If your patient is a current smoker, you can ask these questions to help understand his or her willingness to quit smoking.

If you could quit smoking, you would.

- Completely disagree  
  Somewhat disagree  
  Neutral  
  Somewhat agree  
  Completely agree

You want to quit smoking because you worry about how smoking affects your health.

- Completely disagree  
  Somewhat disagree  
  Neutral  
  Somewhat agree  
  Completely agree

You would be willing to make a plan to quit smoking.

- Completely disagree  
  Somewhat disagree  
  Neutral  
  Somewhat agree  
  Completely agree

You would be willing to cut down your number of cigarettes before quitting.

- Completely disagree  
  Somewhat disagree  
  Neutral  
  Somewhat agree  
  Completely agree



The Public Health Service guidelines recommend the combination of counseling and medication, which is more effective than either alone.<sup>1</sup>

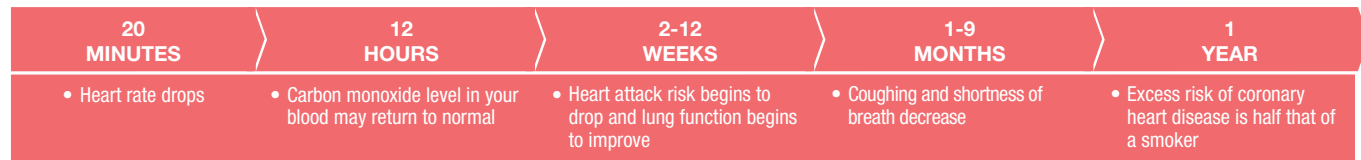
- Approximately 70% of adult smokers want to quit<sup>2</sup>
- Approximately half of adult smokers made a quit attempt in the past year<sup>2</sup>
- Only 4% to 7% of people who attempt to quit smoking are able to do it cold turkey<sup>3</sup>

### Support can help a smoking cessation quit attempt



Advice and support from a healthcare provider, which includes medication and counseling, can double your chances of quitting successfully.<sup>1</sup>

## 🕒 SMOKERS WHO QUIT BEGIN EXPERIENCING HEALTH BENEFITS WITHIN MINUTES.<sup>4</sup>



## HOW TO ENGAGE WITH YOUR PATIENTS TO HELP THEM MAKE A QUIT ATTEMPT

Four principles of motivational interviewing<sup>5</sup>

### Roll with resistance

- Avoid arguing for change and opposing resistance
- Invite new perspectives; don't impose them

### Express empathy

- Accept patients as they are
- Listen and reflect
- Understand that ambivalence is normal

### Develop discrepancy

- Patients should be the ones to present arguments for a health behavior change
- Show your patients the gap between their current behavior and their goals

### Support self-efficacy

- Patients believe the possibility of change is an important motivator
- Patients are responsible for choosing and carrying out change but your belief in their ability to change can have a powerful effect on outcome