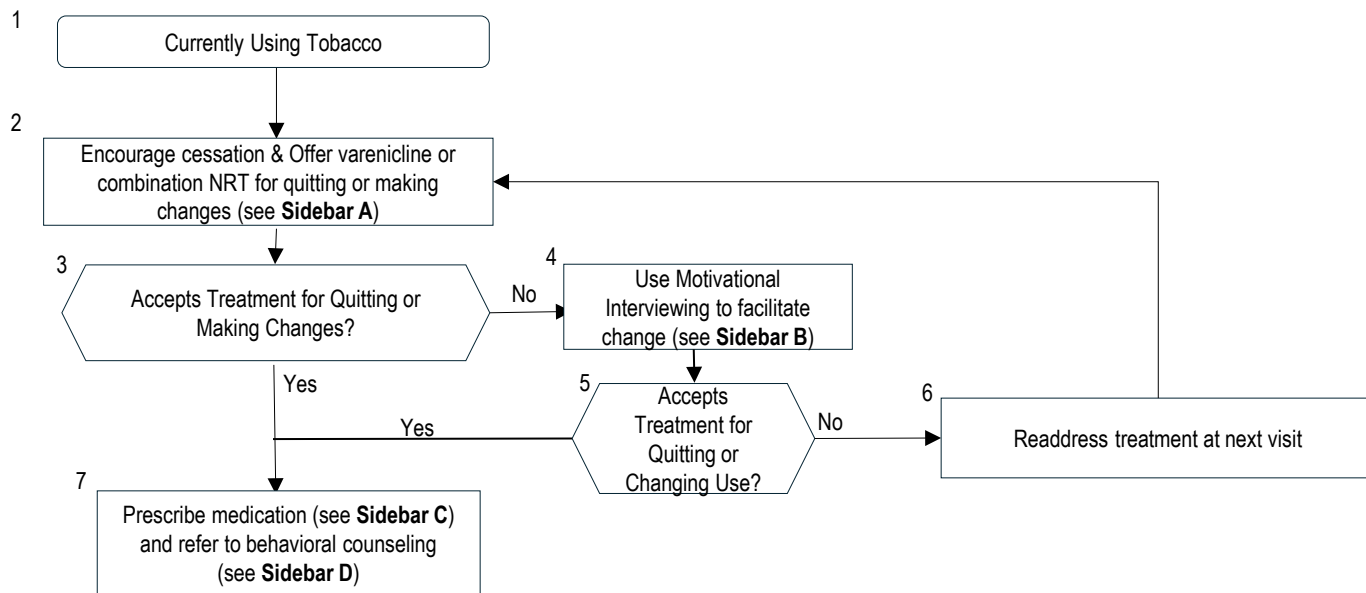




Tobacco Use Treatment

Module A: Initial Treatment



Abbreviations: NRT: nicotine replacement therapy

Sidebar A: Treatment Offer Example Script

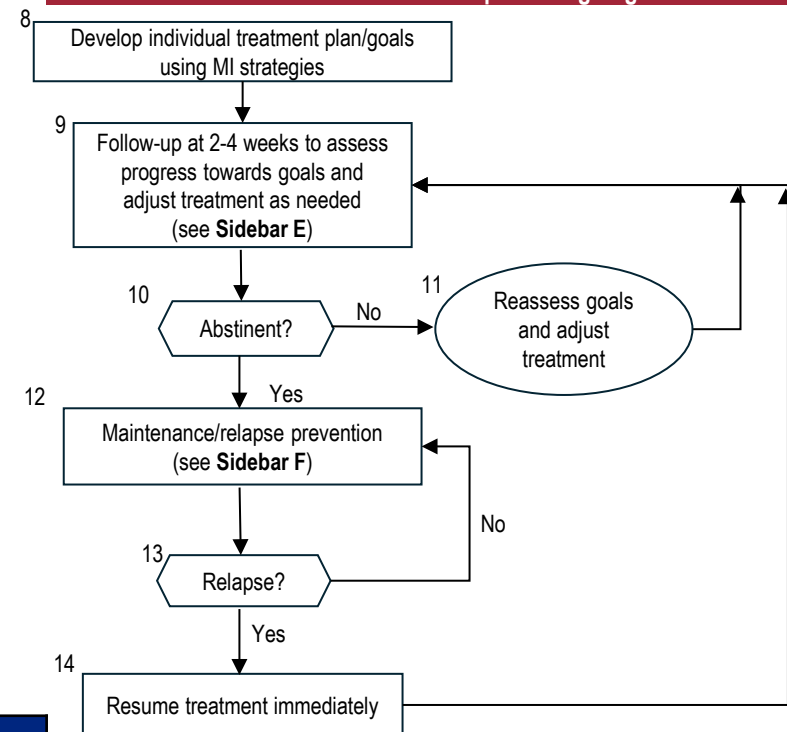
- “Quitting tobacco use is the most important thing you can do for your health.” (How has using tobacco negatively affected your health or your life?)
- “Nicotine replacement therapy or varenicline are medications that can help you quit tobacco use and can be used even if you are not ready to set a quit date.”
- “You can use medication to help you make some changes like cutting back on your tobacco use. It is safe to use these medications while smoking.”
- “What changes would you like to make to your tobacco use at this time?”
 - Engage in shared decision making to decide on medication and behavioral support plan.
 - Use MI Strategies to enhance motivation for change: asking permission, open-ended questions, reflections, affirmations.

Abbreviations: MI: motivational interviewing

Sidebar D: Behavioral Support

- Behavioral support can be delivered individually, in groups, over the phone, or digitally.
- Effective behavioral support includes the following components:
 - Enhance motivation for change
 - Help develop a plan for making a quit attempt or making changes
 - Discuss strategies for coping with craving and triggers (e.g., alcohol, other people who use tobacco at home, stress)
 - Encourage use of additional resources for support (e.g., 1-855-QUIT-VET or SmokefreeVET text)
- Referral Resources:
 - Quit Lines (1-800-QUIT-NOW; 1-855-QUIT-VET (for VHA enrollees))
 - Digital Interventions (Veterans.Smokefree.gov; ycq2.org)

Module B: Treatment Follow-up and Ongoing Care



Abbreviations: MI: motivational interviewing

Sidebar E: Assessing Treatment Plan Progress

- Ask open-ended questions about making changes or quitting
 - E.g., “How have you been doing since we last talked?”
- Ask about experience with taking cessation medications
 - “Are you noticing any side effects?”
 - “How are the medication(s) helping with withdrawal or resisting the urge to smoke?”
- Ask about needing medication refills
- Ask about use of behavioral strategies
 - “What coping strategies are working for you?”
- Ask patients who were working on making changes to their smoking if they are now ready to make a quit attempt
 - If yes, connect patient to cessation-focused treatment
 - If no, encourage continued medication use for making changes and provide motivational counseling

Sidebar B: Enhancing Motivation

If ambivalent or not ready for change:

- Enhance motivation:
 - Assess importance of making changes: *"How important is it for you to stop using tobacco (1=not important, 10= very important)"*
 - Elicit change talk:
 - If important (>=8) *"what makes it so important?"*
 - If less important (<8): e.g., *"why is it a 6 and not a 3?"*. This helps patient to articulate their reasons for considering cessation.
 - Reflect concerns/change talk (state and wait for response): *"X makes it important for you to stop using tobacco"*
 - With permission, discuss your concerns about their use: *"Can I share with you some concerns I have about your tobacco use?"*
Link use to concerns relevant to reasons for visit or patient's health issues e.g., physical health and disease, mental health, substance use recovery.
 - Ask what changes patient is considering making
 - Provide menu of change options: *"How do you feel about making changes to your tobacco use? Changing can include cutting down, changing use patterns, using medications before stopping, or stopping entirely. What, if any, of these changes would you like to make?"*
 - Reflect selected goal and affirm willingness to make a change, e.g., *"Right now you're ready to cut down. You've taken an important step by setting this goal. That shows a lot of commitment."*
 - If patient still declines to set a goal, reflect and ask permission to revisit in future: *"I understand that right now you don't want to make any changes to your tobacco use. Is it ok if we discuss this again at our next appointment?"*
 - If change goal selected, restate and confirm identified goal: e.g., *"right now you want to work on cutting down"*

If declined treatment OR has set new change goal:

- Offer medication and counseling assistance for meeting selected goal(s)
 - Discuss value of medications and counseling: *"We know that using medications and counseling significantly increases your likelihood of success"*
 - *"What are your thoughts about using medications or counseling?"*
 - *"When you are ready, I can provide you with medications and/or connect you with behavioral support to help you reach your goals"*

* MI Strategies to employ: asking permission, open-ended questions, reflections, affirmations

Sidebar C: Pharmacotherapy

- **Varenicline:**
 - Start at 0.5 mg daily for 3 days, then increase to 0.5 mg twice daily, then increase to target dose of 1 mg twice daily
 - **Nicotine Replacement Therapy:** A combination of long acting (patches) and short acting (gum or lozenges) is preferred
 - Nicotine patches: 21 mg, 14 mg, and 7 mg
 - Moderate to high nicotine dependence or >10 cigarettes/day; start with 21 mg/day then taper
 - Low nicotine dependence or <10 cigarettes/day; start with 14 mg/day then taper
- PLUS 1 of the following:
- Nicotine gum: 2 mg and 4 mg
 - Bite 1 piece (bite intermittently and park between cheek and gums)
 - May use up to 10-12 pieces of gum per day as needed
 - Nicotine lozenges: 2 mg and 4 mg
 - Dissolve 1 lozenge orally between cheek and gums
 - May use up to 10-12 lozenges a day as needed
 - Nicotine nasal spray: 0.5 mg per actuation
 - For one dose use with 1 spray in each nostril
 - May use up to 10-12 doses a day as needed
 - Max dosing is 5 doses per hour
 - **Bupropion (sustained release):**
 - 150 mg daily for 3 days; then increase to 150 mg twice daily

* See Appendix H for a more detailed discussion of pharmacotherapy.

Abbreviations: mg: milligrams

Sidebar F: Maintaining Tobacco-Free Lifestyle

- Congratulate patient on achieving abstinence and discuss immediate improvements to their health
- Discuss and reinforce positive changes:
 - Ask about any improved symptoms, since early "wins" help promote cessation.
 - Improved health and feeling better physically
 - Financial savings and benefits
 - Improved appearance including reduced wrinkling/aging of skin and whiter teeth
- Discuss triggers and how to manage or avoid them, such as:
 - Withdrawal symptoms
 - Fear of failure
 - Weight gain
 - Enjoyment of tobacco
 - Being around other people who use tobacco
- Discuss Improved Health Benefits
 - Improved taste and sense of smell
 - Heart rate and blood pressure will decrease
 - Circulation improves and lung function increases
 - Coughing and shortness of breath decrease
 - Risk of coronary heart disease and stroke decreases
 - Risk of mouth, throat, bladder, esophagus, cervical, pancreatic, and lung cancer decreases
- Focus on new health activities that can be enjoyed
 - Walking, biking, hiking, swimming, dancing, gardening or yoga

Recommendations can be accessed in the full guideline.

Available at: <https://www.healthquality.va.gov/>.

