

Tobacco Screening and Cessation Intervention Information for Providers

Indian Health Service
National GPRA Program

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GPRA Measure: Tobacco Cessation Intervention

- ▶ Formerly “Tobacco Use Assessment” measure; changed to “Tobacco Cessation Intervention” in FY 2006
- ▶ “During 2007, maintain the proportion of tobacco-using patients that receive tobacco cessation intervention.”
- ▶ FY 2006 national results (baseline year): 12%

Costs of tobacco use

- ▶ Tobacco use causes more than 440,000 deaths every year among adults in the United States.
- ▶ Tobacco use costs \$157 billion in annual health-related economic losses.

Health effects of tobacco

- ▶ Smoking cigarettes causes chronic lung and heart disease, and cancers of the lung, esophagus, larynx, mouth, and bladder.
- ▶ Smoking also contributes to cancers of the pancreas, kidney, and cervix.
- ▶ Smokeless tobacco can lead to cancers of the gum and mouth, and contributes to periodontitis and tooth loss.

Tobacco and Nonsmokers

- ▶ Nonsmokers are also adversely affected by environmental tobacco smoke.
- ▶ Each year, because of exposure to environmental tobacco smoke, an estimated 3,000 nonsmoking Americans die of lung cancer, and 300,000 children suffer from lower respiratory tract infections.

Tobacco and Children

- ▶ About half of people who begin smoking under the age of 18 continue to use tobacco products as adults
- ▶ If current tobacco use rates continue, an estimated 5 million to 6.4 million children alive today will die prematurely from a smoking-related disease.

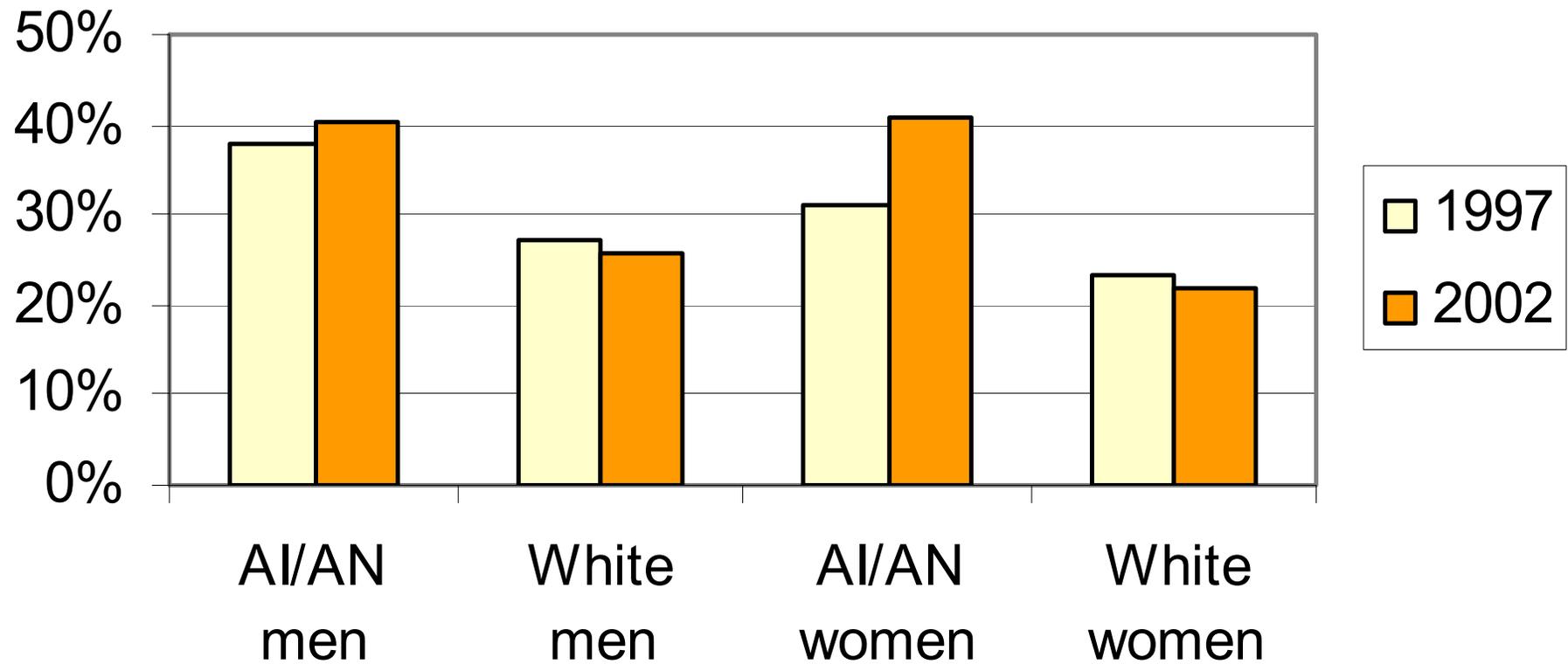
AI/AN use of tobacco

- ▶ The 1997 National Health Interview Survey showed that 34.1% of American Indians and Alaska Natives smoked; this rate was higher than any other group.
- ▶ In 1997:
 - 37.9% of AI/AN men smoked, compared to
 - 27.4% of white men
 - 31.3% of AI/AN women smoked, compared to
 - 23.3% of white women

Tobacco use rates increasing

- ▶ The 2002 National Health Interview Survey showed that 40.8% of American Indians and Alaska Natives smoked; this rate was higher than any other group, and 6.7% greater than the 1997 AI/AN rate.
- ▶ In 2002:
 - 40.5% of AI/AN men smoked, compared to
 - 25.5 % of white men
 - 40.9% of AI/AN women smoked, compared to
 - 21.8% of white women

Tobacco Use 1997- 2002

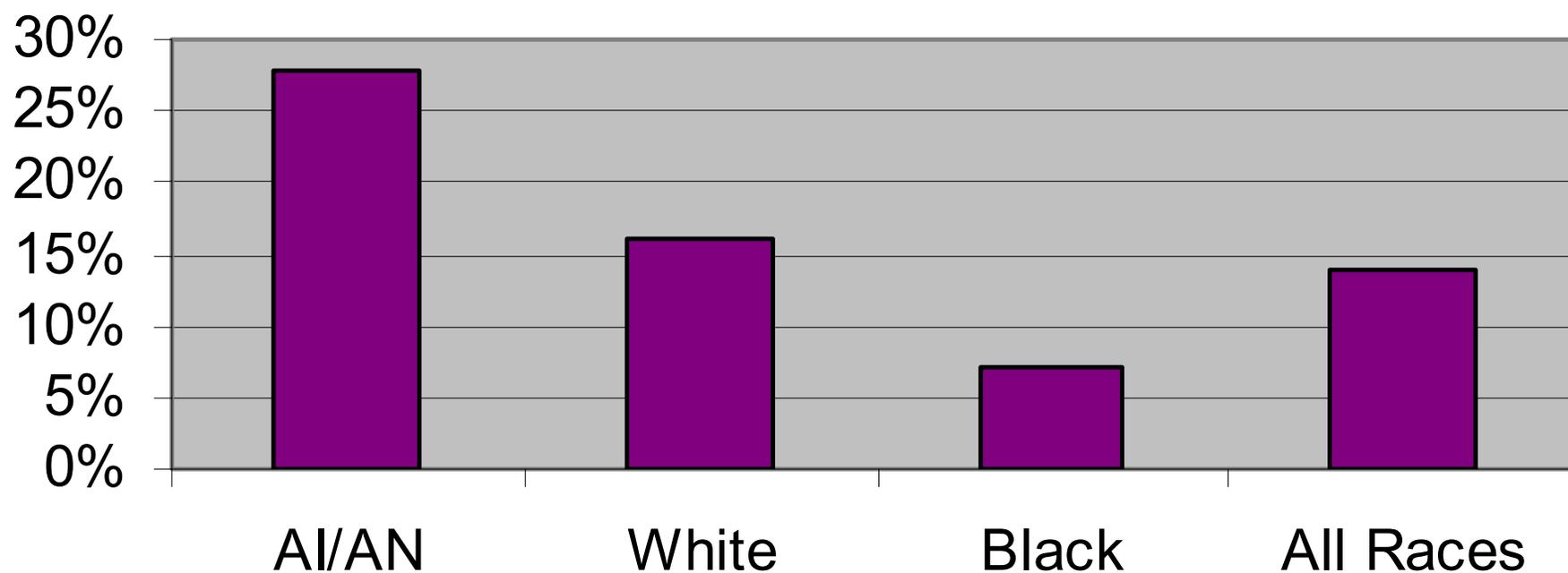


Source: National Health Interview Survey 1997, 2002
(CDC: MMWR 1999, 2004)

CDC study 1999-2001

- ▶ Among youths, AI/ANs had the greatest cigarette smoking prevalence (27.9%)
- ▶ Among adults, AI/ANs had the greatest cigarette smoking prevalence (40.4%)

Prevalence of Cigarette Use Among Youths, Ages 12-17 (1999-2001)



Source: National Survey on Drug Use and Health
(CDC, MMWR 2004)

Use of tobacco, cont.

- ▶ A study of 1,369 American Indians at 18 Indian health clinics in Northern California in 1991 showed that 40% of the adult population in the sample smoked cigarettes.
- ▶ The same study found that American Indians held lenient attitudes toward smoking and began smoking at an early age.
- ▶ A related study found that American Indians living in urban areas in northern California reported higher smoking rates than rural Indians.

AI/AN tobacco use, continued

- ▶ American Indians and Alaska Natives have the highest rates of smokeless tobacco use among Americans.
- ▶ Pipe and cigar smoking is also more common among AI/AN men than in other populations

Tobacco Use during Pregnancy

- ▶ AI women have the highest rate of smoking during pregnancy (19.9%) of all race and ethnic groups.
- ▶ Maternal smoking rates among AI women declined by 11% between 1990 and 2001.
- ▶ However, in the same period, maternal smoking rates declined by:
 - 26% among whites
 - 43% among blacks
 - 49% among Asians

Tobacco use during pregnancy

- ▶ Studies have also demonstrated that women who use tobacco during pregnancy are more likely to have spontaneous miscarriages.
- ▶ Smoking during pregnancy has also been linked to Sudden Infant Death Syndrome (SIDS) and low birth weight.

Possible link between maternal smoking and childhood obesity

- ▶ A study of American Indian women in Wisconsin found that smoking during pregnancy was correlated with higher BMI in their children at age 3 years.
- ▶ Of the 3 year olds, 22.2% were overweight and 18.7% were at risk of overweight. Of their mothers, 42.5% had smoked during pregnancy.
- ▶ Smoking at the initial prenatal visit significantly predicted overweight and risk of overweight in children at age 3.

Maternal smoking and overweight children

- ▶ Despite being smaller at birth, the children of smoking mothers had a significantly greater increase in weight-for-length score between birth and age 3 than did children of nonsmokers.
- ▶ This greater increase was due to a significantly greater increase in weight in children of smokers than in those of nonsmokers and not to a relatively slower increase in height.

Tobacco and Cancer

- ▶ Lung cancer is the leading cause of cancer death among American Indians and Alaska Natives.
- ▶ The rate of death from cancers of the lung, trachea, and bronchus among American Indian and Alaska Native men is 33.5 per 100,000. Among AI/AN women, the rate is 18.4 per 100,000.

Tobacco and CVD

- ▶ Cardiovascular disease is the leading cause of death among American Indians and Alaska Natives, and tobacco use is an important risk factor for this disease.

Health benefits of tobacco cessation

- ▶ Tobacco users who quit enjoy longer and healthier lives, on average, than those who do not.
- ▶ Even a long-time smoker can significantly reduce their risk of heart disease and other complications by quitting.

Cost benefits of tobacco cessation

- ▶ Tobacco-cessation programs are more cost-effective than other common prevention interventions.
- ▶ Cost analyses have shown tobacco cessation programs to be either cost-saving or cost-neutral

Tobacco cessation intervention

- ▶ Advice from a health care provider and group and individual cessation counseling can help smokers quit.
- ▶ Smoking cessation treatments, including nicotine replacement therapy and bupropion SR (e.g. Wellbutrin) have been found to be safe and effective.

Tobacco cessation and comprehensive health care

- ▶ Documenting tobacco use on a patient's medical record and offering cessation assistance are important components of comprehensive health care.

Documenting Tobacco Cessation Intervention in CRS

- ▶ GPRA measure counts active patients identified as current tobacco users prior to the report period who have received tobacco cessation counseling during the report period.
- ▶ Tobacco Cessation Counseling includes patient education.
- ▶ Documented refusal of patient education must occur within the report period.

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