

Design of an intervention to improve smoking cessation assistance from health professionals

BACKGROUND

Adult's prevalence of daily smoking is about 25% in France and is marked by significant social inequalities. More than a quarter of smokers attempt to quit each year, most of them without any assistance. Brief advice and support from healthcare professionals increase quit rates, but are not systematically conducted.

OBJECTIVE

To present the design and first elements of evaluation of an intervention, which aims at increasing general practitioners' involvement (GPs) in screening and providing smoking cessation support, with a focus on low socioeconomic status (SES) patients.

METHODS

Identification of smoking cessation barriers and opportunities in low SES smokers and health professionals thanks to interviews of experts from several French institutions, as well as a brief literature review of academic papers, reports and previous studies conducted by Santé publique France (SpF), the French National Public Health agency.

Selection of an intervention from an initial list of solutions informed by behavioural science literature and creative workshops with experts from SpF.

Qualitative pretest to assess acceptability and perceptions of the intervention and the feasibility of its implementation, as well as to collect suggestions for improvement. Design: 2 focus groups of 3-4 GPS + 10 individual interviews of GPS + 15 individual interviews of smokers. Thematic analysis.

A further larger-scale quantitative impact evaluation is under consideration.

RESULTS

Selected intervention: distribution of an information sheet for patients and GPs and a patient questionnaire before consultation where they can indicate their smoking status, desire to quit and wish to discuss this with their GPs.

Barriers that the intervention is designed to address are:

- fear of asking GPs for support, low perceived self-efficacy in quitting, and negative opinion regarding support's perceived effectiveness (for low SES smokers);
- underestimation by the GPs of the impact of their support for smoking cessation and of the patient's desire to quit smoking, and fear of upsetting patients.

To summarize: bridging the information asymmetry

Figure: Pretested questionnaire and information sheet for patients

MERCI D'AIDER VOTRE MÉDECIN EN REMPLISSANT CE QUESTIONNAIRE MÉDICAL
Questionnaire à lui remettre au début de la consultation.

Tabac

Fumez-vous ?

☐ Oui, tous les jours
☐ Oui, parfois
☐ Non, j'ai arrêté
☐ Non, je n'ai jamais fumé

Si vous avez répondu oui à la question précédente :
Combien de cigarettes fumez-vous par jour ?

☐ 0 ou moins
☐ 1 à 20
☐ 21 à 30
☐ 31 ou plus

Quelle heure était-ce le réveil fumez-vous votre première cigarette ?

☐ Moins de 5 minutes
☐ De 5 à 30 minutes
☐ 31 à 60 minutes
☐ Après plus d'1 heure

Depuis combien d'années fumez-vous environ ?

Avez-vous déjà essayé d'arrêter de fumer ?

☐ Oui Si oui, combien de fois ? _____
☐ Non

Avez-vous déjà utilisé des substituts nicotiniques ? (patchs, gommes à mâcher ou pastilles à la nicotine, autres)

☐ Oui
☐ Non

Vous arrive-t-il d'être mécontent de fumer ?

☐ Jamais
☐ Quelques fois
☐ Souvent
☐ Très souvent

Souhaitiez-vous arrêter de fumer ?

☐ Pas du tout
☐ Un peu
☐ Beaucoup
☐ Extrêmement

Si aujourd'hui vous ne souhaitez pas arrêter de fumer, souhaitez-vous commencer par réduire votre consommation ?

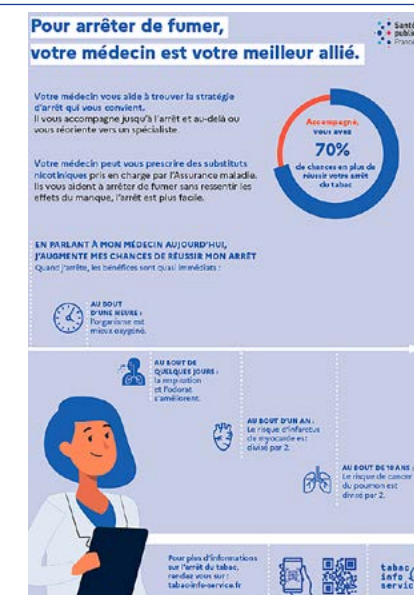
☐ Oui
☐ Non

Souhaitiez-vous abandonner le sujet avec votre médecin ?

☐ Oui
☐ Non

Main results of the pretest study:

- Interviewed GPs are not very proactive concerning smoking cessation, beyond screening. They mainly offer help when the patient asks for it or if they suffer from a tobacco-related pathology.
- The lack of available time during a consultation, which is often dedicated to another problem, is the main barrier for GPs to address smoking.



- Most GPs found this tool useful, mainly as a tool to enhance patient's motivation and possibly trigger a dedicated consultation.
- Rather than making it available in the waiting room, they would prefer a hand-delivery.
- Concerning smokers, the tool was considered the most useful by those who had never discussed their smoking with their GPs or who were not aware their GPs could help them.

CONCLUSIONS

The intervention is deemed acceptable by GPs and smokers, and more detailed avenues for optimizing its content have emerged from the pretest. The variety of ways GPs would distribute and use the questionnaire is to be considered. The tools will be reworked in the light of these results before larger-scale experimentation.

ACKNOWLEDGEMENTS

Laurent Semmel, Julien Le Pendu and
Guillaume Caline (Kantar Public) for the
pretest study fieldwork.

All authors declare that they have no conflicts of interest.

REFERENCES

- Pasquereau A et al. National and regional prevalence of smoking in France in 2021 among 18-75 year olds according to the Santé publique France Health Barometer. Bull Epidemiol Hebd. 2022, [26]:470-80.
- Fekom M et al. Use of Tobacco Cessation Aids and Likelihood of Smoking Cessation: a French Population-Based Study. Preventive Medicine Reports, 2022, 30: 102044.
- Cogordan C et al. Dialogue entre médecin généraliste et patient : les consommations de tabac et d'alcool en question, du point de vue du patient. RESP, 2020, 68: 319-26.

Correspondence:
romain.quignard@santepubliquefrance.fr