Adolescents and Tobacco Prevention and Cessation: Jonathan D. Klein, MD, MPH

Section B

Counseling Young People about the Dangers of Smoking

Adolescent and Adult Smokers

- Adolescent and adult smokers know they are addicted and want to quit
- Many have tried to quit without success
- Younger smokers are less likely to think there are resources to help
- Many clinicians feel unprepared to help
- With advice, most parents say they would be able to set strict smoking policies


Counseling

- Confidentiality
- Ask each time
- Repeated brief messages
- Assess motivation to change
- Reinforce and follow-up

Five “As” Counseling

The 5 As
- Ask
- Ask: About friend’s use
- Ask: About patterns of use
- Ask: About school programs
- Ask: About confidentiality
- Advise
- Advise: To quit for short term reasons
  - Athletic capacity
  - Cost, smell, etc.
  - Reinforce non-use
- Arrange
- For cessation services and follow up

Source: www.surgeongeneral.gov/tobacco/; www.aap.org/richmondcenter/resourcesclinicians

Adolescents

- Goal:
  - Prevent onset and promote cessation
- Anticipate:
  - School performance
  - Overestimating prevalence
  - Poor coping resources
  - Peer influence
  - Smokeless tobacco

Adolescent Intervention

- Ask
  - About friend’s use
  - About patterns of use
  - About school programs
  - Reassure about confidentiality
- Assess
  - Motivation and readiness
- Advise
  - To quit for short term reasons
    - Athletic capacity
    - Cost, smell, etc.
    - Reinforce non-use
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Adolescent Intervention

- Assist
  - Set quit dates
  - Provide self-help materials
  - Encourage problem-solving, refusal skills
  - Encourage activities incompatible with tobacco

- Consider pharmacology

- Arrange
  - One to two week follow-up after quit attempts

Public Health Service Guideline

- An inquire
  - If smokes
- Assist
  - Readiness to quit
- Assess
  - To quit
- Aid
  - in quitting & finding services
- Arrange
  - For cessation services

Adolescent Oriented Office Materials

- Self-help handouts
  - Targeted to adolescents and to stages of change/motivation
- Trigger questionnaires
- Internet resources

Interventions and Quitting?

- Cessation among adolescent smokers is half of the adult rate (approximately 4% per year)
- Smokers aged 16-24 years rely more on unassisted methods rather than on effective methods recommended by PHS guidelines
- Two year success with adolescents referred to an intensive expert counseling “system” after brief primary care advice (OR = 2.43)

Changing Evidence: Youth and Nicotine

- Adolescents are more likely to become addicted than adults
- Signs of nicotine dependence often starts within two months after onset of smoking and before adolescent are daily users
- Quitting is harder for teens but still possible; adolescents are more likely to choose less effective methods for quitting


What Can Be Done?
- Ask all parents about smoking
- Educate parents about SHS
- Offer treatment or referral (quitline or local system)
- Advocate for smoke free areas
- Advocate for tobacco control

Evidence Based Response to Patients Who Smoke
- Unacceptable: “I don’t have time.”
- Acceptable
  - Refer to a quitline
  - Establish systems in office and hospital
  - Become a cessation expert
- Ask, advise, refer

International Tobacco Issues
- MPOWER Initiative (WHO) goals
  - Raise taxes
  - Outlaw public smoking
  - Outlaw advertising to children
  - Fund antismoking advertising campaigns
  - Offer NRT and cessation assistance

Missed Opportunities for Adolescent Prevention
- Most have source of care and have made visits
- Nearly half had not spoken with MD privately
- Many had missed needed care
- Many were too embarrassed to discuss topics with MDs
- Fear of disclosure is reason for 35% of missed care
- Much of desired content is not discussed

AAP Bright Futures Guidelines

Image source: Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, 3rd Edition

Improving Preventive Service Practices
- Decision tools
  - Trigger questionnaires
  - Chart forms
- Information systems
- Patient self-care
  - Effective counseling techniques
  - Patient education resources
- Community resource
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**Policy: School Curriculum**

- At least five sessions per year over two years
- Should include the following:
  - Social influences
  - Short term health effects
  - Refusal skills
- NOT self-esteem or delay based
- Be aware of dilution and confusion strategies by tobacco interests
- School policies should reinforce goals

Source: [http://www.cdc.gov/HealthyYouth/tobacco/guidelines/index.htm/](http://www.cdc.gov/HealthyYouth/tobacco/guidelines/index.htm/)

**Community and Public Health**

- Make tobacco control for children and youth a priority
  - Include secondhand smoke
- Age of sale restrictions and enforcement
- Advertising limitations
- Smoke-free movies
- Public smoke exposure reduction
- Do not allow preemptive efforts by tobacco industry
- Reduce social acceptability of smoking


**Movies and Adolescents**

- Adolescents whose favorite movie stars smoke on-screen are more likely to become smokers
- Smoking is seen in more than 75% of youth rated films
- Non-smoking teens are 16 times more likely to develop positive feelings towards smoking if they see their favorite stars smoking on screen

Source: [http://smokefreemovies.ucsf.edu/](http://smokefreemovies.ucsf.edu/)

**Tobacco Use in Movies and Smoking, 5th-8th Graders**


**Smoke-Free Movies**

- Rate new smoking movies “R”
- Certify no pay-offs
- Require strong anti-smoking ads
- Stop identifying tobacco brands
- Guidelines are endorsed by AAP and many other organizations

Source: [http://smokefreemovies.ucsf.edu/](http://smokefreemovies.ucsf.edu/)

**Conclusions**

- Many missed opportunities for SHS prevention in primary care
- With advice, many parents would set smoking rules
- There is no safe “experimental” smoking
- Policies are needed to protect adolescents
- Tobacco control efforts should include interventions in child health care for secondhand smoke and tobacco control for all household members

Source: [http://smokefreemovies.ucsf.edu/](http://smokefreemovies.ucsf.edu/)