



Title Smoking Cessation in General Practice

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Aim

To find the most cost-effective intervention on smoking cessation in general practice.

Conclusions and results

We found no significant effect of GP referral to free smoking cessation groups or an Internet-based smoking cessation program as compared with usual smoking cessation activities in general practice. Although both the patients and the GPs were positive toward the study and referral to other smoking cessation activities, few actually made use of them. Hence, we concluded that routine referral is not cost effective, and we cannot recommend changing usual practice. However, we cannot exclude that the selection of doctors and patients could have influenced the results of the study. We suppose that the brief intervention offered in general practice, ie, a few minutes of smoking cessation counseling, is not sufficient to increase the smoking cessation rates in general practice. Intensifying counseling for smoking cessation and, eg, arranging a date for a smoking cessation group before the smoking patient leaves the practice, could possibly increase the quit rates.

Methods

All general practitioners in a selected area in a suburb of Copenhagen were prerandomized to 1 of 3 groups (A, B, or C). GPs allocated to *group A* were to briefly talk with all smokers about smoking and refer all motivated smokers to a smoking cessation group for an 8-week period. GPs allocated to *group B* were to briefly talk about smoking with all smokers and refer all motivated smokers to an Internet-based smoking cessation program (interactive, individual advice) for an 8-week period. GPs allocated to *group C* (control group) were to continue to give smoking cessation advice and assistance to quit "as usual" (not necessarily to all smokers). Only 40% of the GPs agreed to participate in the study, and those who agreed to participate were a selected group, already more active in smoking cessation counseling. Furthermore, registered smoking prevalence among patients was only 17%, which was almost 10% lower than the national smoking prevalence. This could represent a selection in patients. More than 1500 smokers were included. About half expressed a wish to join a smoking cessation group, or to try the Internet-based smoking cessation program. However, only 7% attended the smoking cessation groups, and only 16% of those given the opportunity tried the Internet-based smoking cessation program. We measured both self-reported and validated abstinence and corrected for baseline differences in sex, age, socioeconomic status, motivation to quit, and tobacco consumption in the 3 groups.