



2 Advising on smoking cessation

smoking cessation

Why is this important?

More than one in five Australians who visit a general practitioner smoke.[1] Cigarette smoking is the largest preventable cause of death and disease in Australia. Some 19,000 annual deaths and 20 per cent of cancer deaths can be attributed to tobacco use.[2,3] It is also estimated to cost the community \$21 billion each year.[4]

Best available evidence

We know that GPs who give brief advice to smokers can have an impact. Pooled data from 16 trials reveals a small but significant increase in the proportion of patients who successfully give up smoking when they have been advised by their GP, compared with those who receive no advice.[5]

There are several strategies that can enhance the effectiveness of advice from a doctor, including pharmacotherapies such as nicotine replacement therapy and bupropion.

Nicotine replacement approximately doubles the odds of quitting and is effective regardless of the amount of advice provided.[6]

Current practice

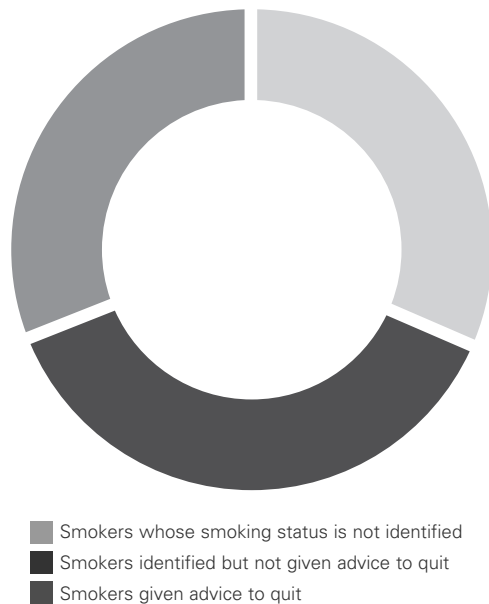
GPs in Australia typically identify 65 per cent of their patients who smoke and provide cessation advice or counselling to only about half of these.[7–9] These figures have remained virtually unchanged for the past 10 years.[10]

Implications

- Giving a patient brief advice on smoking cessation can influence their decision to quit.
- The cost of such advice is small yet can result in significant overall public health benefits. This practice should therefore be encouraged in Australian practices.

Smoking is the largest preventable cause of death and disease in Australia. Giving a patient brief advice on smoking cessation can influence their decision to quit.

Smoking cessation advice in general practice



References

- 1 Britt H, Miller G, Knox S, Charles J, Valenti L, Henderson J et al (2002) General practice activity in Australia 2001–02. AIHW cat. no. GEP 10. Australian Institute of Health and Welfare, Canberra
- 2 English D, Holman C, Milne E, Winter M, Hulse G, Codde J et al (1995) The quantification of drug-caused morbidity and mortality in Australia, 1995 edition. Commonwealth Department of Human Services and Health, Canberra
- 3 Ridolfo B, Stevenson C (2001) The quantification of drug-caused mortality and morbidity in Australia, 1998. AIHW cat. no. PHE 29 (Drug Statistics Series no. 7). Australian Institute of Health and Welfare, Canberra
- 4 Collins DJ, Lapsley HM (2002) Counting the cost: estimates of the social costs of drug abuse in Australia in 1998–99, Monograph no. 49. National Drug Strategy, Commonwealth Dept of Health and Ageing, Canberra
- 5 Silagy C, Stead LF (2003) Physician advice for smoking cessation (Cochrane Review). In: The Cochrane Library, Issue 2, 2003. Oxford: Update Software
- 6 Silagy C, Lancaster T, Stead L, Mant D, Fowler G (2003) Nicotine replacement therapy for smoking cessation (Cochrane Review). In: The Cochrane Library, Issue 2, 2003. Oxford: Update Software
- 7 Dickinson JA, Wiggers J, Leeder SR, Sanson-Fisher RW (1989) General practitioners' detection of patients' smoking status. *Med J Aust* 150: 420–422, 425–426
- 8 Humair JP, Ward J (1998) Smoking-cessation strategies observed in videotaped general practice consultations. *Am J Prev Med* 14: 1–8
- 9 Young JM, Ward JE (2001) Implementing guidelines for smoking cessation advice in Australian general practice: opinions, current practices, readiness to change and perceived barriers. *Fam Pract* 18: 14–20
- 10 Wiggers JH, Sanson-Fisher R (1997) Practitioner provision of preventive care in general practice consultations: association with patient educational and occupational status. *Soc Sci Med* 44: 137–146