

# Supporting Tobacco Cessation

Edited by Sofia Belo Ravara, Elif Dağli, Paraskevi Katsaounou, Keir E. Lewis and Charlotta Pisinger

> Editor in Chief John R. Hurst

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### **Preface**

John R. Hurst 📵

If you care about respiratory health, then you have to care about reducing the harm associated with tobacco smoking and nicotine addiction. At one level, this might be feeling confident to deliver very brief advice about quitting to the next person you see in clinic, but it might also be about lobbying for tobacco control and implementing health-system changes. This isn't just about health and disease; this is about politics, and about economics, and the field is moving quickly – what is the latest evidence around heated tobacco products, for example. The debate here is all too often polarised and we all require access to summaries of the best available evidence – and that is where this latest edition of the *ERS Monograph* really excels.



The Guest Editors Sofia Belo Ravara, Elif Dağli, Paraskevi Katsaounou, Keir E. Lewis and Charlotta Pisinger have done a great job steering this edition to completion during challenging times. Sincere thanks, on behalf of the Society, to all the chapter authors for their contributions and to the peer reviewers, whose comments have been carefully considered. Thanks also to the staff at the ERS Publications Office – there would be no *Monograph* without their hard work and dedication.

In whichever branch of respiratory medicine or science you work, or elsewhere, indeed as a human being and a citizen, there is a topic here that deserves to be of interest and importance to you. From epidemiology through to treatment for nicotine addiction, from tobacco control policy to reviews in specific disease areas, this is an excellent, comprehensive, state-of-the-art collection that deserves to be read widely.

**Disclosures:** J.R. Hurst reports receiving grants, personal fees and non-financial support from pharmaceutical companies that make medicines to treat respiratory disease. This includes reimbursement for educational activities and advisory work, and support to attend meetings.



## **Guest Editors**

Sofia Belo Ravara

Sofia Belo Ravara is Consultant of Pulmonology and Assistant Professor of Preventive Medicine and Epidemiology at the University Hospital/University of Beira Interior, Covilhã, Portugal. She is also associate researcher at the National School of Public Health, NOVA University, Lisbon, Portugal. Her research interests are the prevention and control of respiratory diseases, lifestyle medicine and medical education. Her work as a respiratory physician in major hospitals has given her an understanding of how tobacco harms the population's health. She holds a masters degree in tobacco control (University of Cantabria, Santander, Spain) and has worked in hospital-based smoking-cessation clinics, workplace cessation programmes, hospital smoke-free networks and health professional training. As a consequence, she was naturally grounded in health policy and advocacy, and works passionately in these fields.



Sofia Belo Ravara collaborates with several medical scientific societies and tobacco control non-governmental organisations and networks across Europe.

To date, she has co-authored over 50 peer-reviewed papers and 17 book chapters, supervised 25 masters dissertations, and participated in research projects submitted to the Portuguese Government, the European Commission and the pharmaceutical industry.

Sofia Belo Ravara has been a European Respiratory Society (ERS) officer and a member of the ERS Tobacco Control Committee (2012–2020). She has collaborated with the World Health Organization (WHO) in supporting countries to strengthen health systems in tobacco-dependence treatment and gender policies. She is: a member of the National Committee on Health Literacy, Portuguese Directorate of Health; a board member of the International Network of Women Against Tobacco (INWAT) Europe; and an editorial board member of Tobacco Prevention & Cessation, the Journal of Substance Use and Preventión del Tabaquismo.

#### Elif Dağli



Elif Dağli graduated from Hacettepe University Medical Faculty (Ankara, Turkey) in 1980 and completed her residency in paediatrics at the same university. She was appointed at Marmara University (Istanbul, Turkey) as Assistant Professor in 1987 and became Associate Professor in 1988. She then went on to work as Research Fellow at the Department of Paediatric Allergy and Respiratory Medicine, at the Royal Brompton Hospital (London, UK) in 1988-1990. During her training in London she worked with ASH (Action on Smoking Health) and Professor Sir John Crofton on smoking prevention. In 1990, she established the Department of Paediatric Pulmonology at Marmara University and was appointed as Professor of Paediatrics in 1994. Between 2000 and 2010 she worked as Chair of the Department of Paediatrics and Head of Paediatric Pulmonology at Marmara University Hospital (Istanbul, Turkey). She lectures on the health effects of tobacco, nicotine and novel products, tobacco control strategies, chronic lung diseases of childhood, differential diagnoses by respiratory symptoms, cystic fibrosis and tuberculosis.

At the European Respiratory Society (ERS), Elif Dağli served as Secretary of the Long Range Planning Committee of the Paediatric Assembly during 1996-2000, as Executive Member-at-Large in 1998-2002, and as founder and Chair of the Smoking Prevention Committee in 1999–2002. She served as Chair of the Scientific Coordinating Committee and Secretary General at the International Union Against Tuberculosis and Lung Disease (IUATLD). She was a founding member of Tobacco Control and Paediatric Pulmonology Working Groups and became Scientific Committee Chair and board member in 1993-2013 at the Turkish Thoracic Society. She is a member of the American Thoracic Society (ATS) Tobacco Action Committee.

Elif Dağli has received the following recognition: the American Cancer Society Global Smoke-free Partnership award in 2009; IUATLD Honorary Membership in 2011; the Bloomberg Initiative Smoke-free award for representing a national coalition on tobacco or health in 2012; and the Luther Terry Award for outstanding leadership in 2018.

#### Paraskevi Katsaounou



Paraskevi Katsaounou is Assistant Professor of Respiratory Medicine at the National and Kapodistrian University of Athens Medical School (NKUA) (Athens, Greece) and does clinical work at the Pulmonary and Respiratory Failure Department of the first ICU of Evangelismos Hospital (Athens, Greece). She holds an MSc on ergospirometry and rehabilitation, a PhD on oxidative stress during exercise and resistive breathing and did a post-doc at the National

Heart and Lung Institute of Imperial College London (London, UK). Her current research interests include smoking cessation, asthma, respiratory infections, public health, ergospirometry, exercise and rehabilitation.

Paraskevi Katsaounou has worked as: Chair of the European Respiratory Society (ERS) Tobacco, Smoking Control and Health Education Group; a member of the ERS Tobacco Control Committee; Chair of Smoking Cessation and Public Health Group of the Hellenic Thoracic Society (HTS); lead in the World Health Organization (WHO)–ERS Train the Trainer Project in Tobacco Cessation; and a member of ERS task force on e-cigarettes. She is currently Chair of the Infection Group of the HTS and board member of the Hellenic Thoracic Society Council.

Her passion for efficiency by leveraging technology for health knowledge transfer led to her successfully launch an e-learning module for smoking cessation at NKUA.

Paraskevi Katsaounou is: a recipient of grants – Aristeia, a Global Research Awards for Nicotine Dependence Grant and collaborator at Eurest-Plus, Joint Action for Tobacco Control grants; a reviewer of peer-reviewed journals; and a member of the editorial board of *Tobacco Cessation and Prevention*. She is certified with Mayo Clinic Tobacco Treatment Specialist Training and is a qualified trainer in smoking cessation for the WHO, the HTS and ERS. Paraskevi is an ardent advocate of tobacco control and collaborates with international tobacco control non-governmental organisations and networks across Europe and several medical scientific societies.

Keir E. Lewis

Keir E. Lewis is a Professor at Swansea University (Swansea, UK) and Respiratory Lead for a group of hospitals (Hywel Dda University Health Board) in Wales, UK.

As a pulmonologist, he set-up and leads his hospital network of smoking cessation, sleep apnoea and respiratory failure services. He was a Regional Director of NHS R&D (2009–2019), expanding the service by over 1000% in both income and staff, and winning several awards. He has co-authored UK and European Guidelines on Smoking Cessation and was Chair of the British Thoracic Society (BTS) Tobacco Speciality Advisory Group. He has advised Welsh and UK governments on smoking and tobacco control.

Keir E. Lewis is the UKCRN Speciality Lead for Respiratory Research for Wales. He leads several multicentre trials, including



the largest prospective cohort study (LungCast) looking at stopping smoking after a diagnosis of lung cancer. He is lead or co-applicant on grants worth over  $\mbox{\ensuremath{\ensuremath{\mathbb{C}}}25}$  million, has given invited lectures worldwide on smoking cessation and has written two textbooks. In 2019, he helped create and is the first Medical Director of a government project, Respiratory Innovation Wales (riwales.com).

#### Charlotta Pisinger



Charlotta Pisinger is a medical doctor, has a PhD and a masters in public health and is Denmark's first professor in tobacco prevention. She is a Professor at the University of Copenhagen (Copenhagen, Denmark) and Adjunct Professor at the University of Southern Denmark (Odense, Denmark). She often provides testimony as a national tobacco expert, has written the national smoking cessation guidelines, has published many tobacco-related reports and has presented scientific evidence in the European Union (EU) Parliament. She has written a background paper on e-cigarettes and health for the World Health Organization (WHO) and has been investigator in several large intervention trials.

Charlotta Pisinger was, until recently, Chair of the Tobacco Control Committee of the European Respiratory Society (ERS) (2017–2020) and served on the Board of the Danish Society of Public Health (2016–2019). She has also served as a member of the Research Assessment Committee of the Danish Heart Foundation (2015–2017), Vice-President of the Danish Society of Epidemiology (2011–2014) and President of the Danish Society of Tobacco Research (2005–2010).



# Introduction: Supporting tobacco cessation – from health policy to health system reorientation and patient care

Sofia Belo Ravara <sup>1,2,3</sup>, Elif Dağli<sup>4</sup>, Paraskevi Katsaounou <sup>5</sup>, Keir E. Lewis<sup>6,7</sup> and Charlotta Pisinger <sup>8,9</sup>



The Supporting Tobacco Cessation *Monograph* will guide clinicians in the implementation of smoking cessation in their every day practice, and update the reader on the policy and system changes needed for population-wide smoking cessation https://bit.ly/36Hn3YR

In Europe and worldwide, respiratory diseases are an increasing burden to healthcare and societies [1, 2], despite being mostly preventable by tackling their risk factors [1–3]. Tackling risk factors is not only crucial in preventing diseases but also important to the management and treatment of most chronic diseases [3, 4]. Reducing harmful exposures and promoting healthy behaviours should be the first line and an integral component of therapy prescribed by healthcare providers for both prevention and treatment of respiratory and other chronic diseases [2–6].

12 years after the launch of the first *ERS Monograph* on Smoking Cessation [7], tobacco remains the main and the most preventable cause of respiratory diseases, both in adults and children [2, 6]. The "big five" respiratory diseases (asthma, COPD, lung cancer, tuberculosis, pneumonia and other acute lower respiratory tract infections) are either caused or worsened by tobacco use and exposure to SHS [2]. Similarly, and despite amazing progress on the implementation of tobacco-control policies and the strong evidence for their immediate and long-term effectiveness and cost-effectiveness worldwide, smoking-cessation treatments remain poorly implemented in healthcare nearly everywhere [8–10].

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Moreover, the landscape of the tobacco epidemic has dramatically evolved. The tobacco industry continues to oppose all tobacco-control efforts but is faced with a declining cigarette market. It has developed novel, noncombustible products and mass-marketed them specifically to recruit nonsmokers and youths, and to postpone quitting in regular smokers, while promoting the social acceptability of tobacco use [11–14].

However, our respiratory health community is at the forefront in treating current tobacco/ nicotine users, preventing new users, and striving to protect against SHS exposure.

Notably, only large increases in population-level tobacco cessation will significantly reduce the global burden of tobacco in the short term [15]. Promoting tobacco cessation at a population-level requires a socially supportive environment as well as widespread effective treatments to overcome nicotine addiction. Implementing comprehensive public health policies with broad-reach healthcare interventions will have the greatest impact [9, 10].

This *Monograph* is a comprehensive overview of tobacco cessation, from health policy to health system reorientation and direct cessation treatments for patients. It confirms tobacco as the main cause of respiratory diseases, emphasising the role of respiratory healthcare providers in championing tobacco prevention and cessation. The *Monograph* opens with an overview of the tobacco epidemic and the global strategy to reducing tobacco disease burden, through the World Health Organization (WHO) Framework Convention on Tobacco Control [16]. It goes on to discuss tobacco use as a dependence and a chronic, often relapsing disorder, focusing on nicotine addiction and the harms of nicotine/tobacco beyond addiction [17]. A chapter dedicated to novel tobacco and nicotine products discusses whether they really do help smokers to quit and reduce tobacco harm, or whether they have the contrary effect, and undermine tobacco control [18].

Next, the *Monograph* focuses on tobacco-dependence treatment: a combination of behaviour counselling [19] and pharmacotherapy [20]. A chapter fully dedicated to motivational interviewing discusses the strategies and clinical tools that can be used to engage the smoker in behaviour change and to motivate the reluctant quitter without confrontation [21]. A further chapter in the section illustrates the pragmatic brief clinical models of smoking-cessation advice that can be integrated into everyday practice [19]. The incorporation of patient views and preferences in smoking-cessation respiratory care is also discussed.

While no new classes of drugs to treat nicotine-addiction have been developed since 2007, the evidence of their effectiveness and safety, as well as more effective modalities, has been growing. Chapter 6 in this *Monograph* reviews the evidence of the effectiveness and safety of first-line licensed smoking-cessation pharmacotherapies [20].

However, regardless of the overwhelming evidence of its effectiveness and cost-effectiveness, tobacco cessation remains neglected in healthcare. A greater effort is needed to train healthcare providers and engage whole healthcare systems in tobacco cessation. Chapter 7 presents successful examples of system-level interventions, from primary to secondary care, in community settings and through international collaboration. The role of interdisciplinary healthcare teams, telemedicine and innovative broad-reach community approaches is also discussed [22].

The third section of the *Monograph* focuses on improving the care of patients who smoke. The chapters in this section consider different lung diseases and other comorbidities commonly associated with smoking. There are specific chapters on smoking cessation in

cardiovascular disease [23], diabetes and metabolic disorders [24], and mental health [25]. These clinical chapters: review the epidemiology of tobacco use; discuss the barriers to quitting and the benefits of tobacco cessation; explain how different diseases are either associated with, or caused or worsened by smoking; and include recommendations to help smokers to quit based on the current evidence, for use in specific clinical contexts. Chapters 8, 13 and 14 present real-life smoking-cessation cases in people with asthma, cardiovascular diseases and diabetes [23, 24, 26].

E-cigarette use is increasing globally and has been classified as a youth epidemic in some countries. Nicotine exposure during foetal development, childhood and adolescence is harmful to brain development. The last two chapters of the *Monograph* are dedicated to the challenge of preventing tobacco and nicotine use and SHS exposure among youth and pregnant women [27, 28].

Our main aim when compiling this *Monograph* was to help and guide clinicians in the implementation of smoking cessation into their everyday practice. We also believe this *Monograph* will update the reader on the policy and system changes needed for population-wide smoking cessation. From working with an individual patient to affecting global policies, we can still achieve a tobacco- and nicotine-free world.

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## List of abbreviations

CBT cognitive behavioural therapy

CHD coronary heart disease
CO carbon monoxide
CT computed tomography
EC electronic cigarette

FEV<sub>1</sub> environmental tobacco smoke forced expiratory volume in 1 s HCP healthcare professional

HRCT high-resolution computed tomography

IL interleukin

NRT nicotine-replacement therapy

QoL quality of life

SHS second-hand smoke