

## Campus Partners Pool Funds for Pilot to Snuff Patient Smoking

University of Colorado Hospital, the University of Colorado Cancer Center and the University of Colorado School of Medicine have contributed a total of \$100,000 to a package of grants that will fund a one-year hospital-based smoking cessation program.

The program will provide medications and counseling to cancer, cardiology and pulmonary medicine patients, said Arnold Levinson, PhD, of the University of Colorado Cancer Center and an associate professor of Behavioral and Community Health with the Colorado School of Public Health (CSPH).

Levinson, who developed the concept for the pilot and pieced together the funding for it, has worked on population-based and more recently individual smoking-cessation research and programs at the Cancer Center and the CSPH.

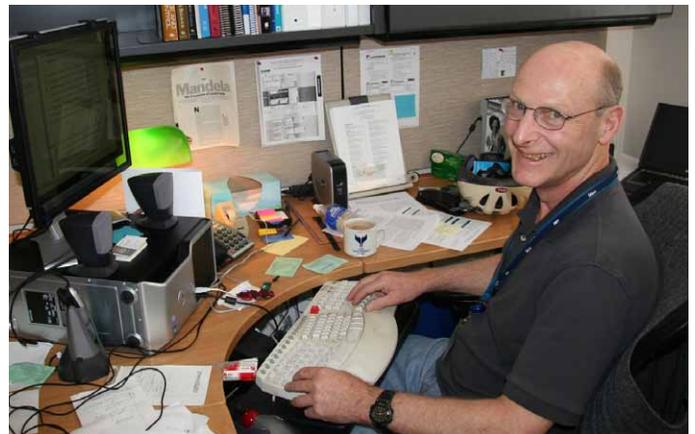
**Healthier patients and bottom lines?** The idea for the new pilot is to demonstrate that a hospital-based program can not only help some patients who smoke to quit, but also improve their outcomes, Levinson said.

*“We know in the inpatient population, there are a substantial number of patients who smoke and that smoking can interfere with their treatment and increase risk of recurrence of disease,” he said. “The pilot will help determine how much quitting smoking helps patients live longer and keeps them free of recurrent tumors, heart attacks [and other conditions].”*

Levinson said there is evidence that smoking complicates some treatments, such as chemotherapy. Reducing treatment time and costs could eventually improve cost-effectiveness as the Centers for Medicare and Medicaid Services and other payers move to so-called bundling arrangements that pay providers a flat amount for a course of treatment.

“We want to study the return on investment of smoking cessation,” he said.

**Two-prong approach.** The program will offer patients nicotine replacement products and prescription medications, such as bupropion (trade name Zyban) and varenicline (trade name Chantix®). “Both [types of medications] have been shown to be effective in increasing the likelihood of smoking cessation,” Levinson said. “The program will make them available and more easily accessed, which is important to a patient-centered approach.”



*Levinson wants to test the effectiveness of a hospital-based smoking-cessation program.*

Patients will also get support from a clinical provider trained in smoking-cessation counseling and motivational interviewing to help them quit smoking.

“We won’t be there to nag you, scold you, be your conscience or tell you what to do,” he said. “Smokers are ambivalent about quitting. We want to give them respect and empathy, see both sides of the story and reinforce the side that wants to quit.”

The first visit might last 20 to 30 minutes, with patients possibly getting the option for additional counseling at appointments for follow-up care or through telephone visits. The question, Levinson maintained, is not how many session patients get, but their willingness to take the help they are offered.

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"It all depends on what they are motivated to do," he said.

The medication/counseling combination is proven to give patients the best chance to quit smoking, Levinson said, adding a reasonable success rate is 30 percent who are not smoking after six months.

The program could start as early as August, Levinson said, but key issues still have to be worked out, including whether the counseling role will be filled by hospital staff or by counselors from outside the organization.

A second question is how patients will be selected for the pilot program. "We have enough money for the pilot, but not for every patient," he said. "If the pilot proves successful – as I believe it will – we hope to find the means to provide this level of smoking cessation service to every UCH patient, which is the gold standard of care for tobacco dependence."

Providers on the Cancer, Cardiology and Pulmonary units might take the lead in identifying smokers and connecting patients with counselors who would assess their desire to quit smoking, he noted.

"I believe there will be considerable interest on the part of patients," Levinson concluded.

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