

A CLINICAL REVIEW FOR AN EVER-EVOLVING PHARMACY LANDSCAPE

SMOKERS' HELPLINE: SUPPORTING YOUR PATIENTS WITH SMOKING AND VAPING CESSATION

Why tobacco and vaping cessation?

Although cigarette smoking has decreased in Canada in recent years, the Canadian Tobacco and Nicotine Survey in 2022 revealed the following:

- 10.9% of people living in Canada aged 15 years and older indicated that they smoked cigarettes in the past 30 days, with 8.2% reporting that they smoke cigarettes daily.
- 5.8% of people living in Canada 15 years of age and older indicated that they had vaped in the past 30 days, while 2.9% reported vaping daily.

Smoking is associated with risk of lung, hepatic, breast, and colorectal cancer, and worse outcomes of prostate cancer, respiratory diseases such as COPD, and cardiovascular disease.² Quitting smoking reduces the risk of premature death and can increase life expectancy by up to 10 years. In the short term, heart rate and blood pressure decrease, carbon monoxide levels reduce to normal, and lung function increases. After 10 to 15 years, the risk of certain cancers is reduced, and risk of coronary heart disease is reduced to that of a person who does not smoke.3 Although vaping was thought to be a safer alternative to tobacco smoking, e-cigarettes have been associated with increased blood pressure, heart rate, myocardial contractility, and coronary spasm due to the effect of nicotine on the sympathetic nervous system.4 Vaping has also been linked to upper respiratory toxicity and lung injury, however the long-term effects are still unknown.5-7

A comprehensive and holistic approach to healthcare involves evaluating smoking status and supporting smoking cessation.⁸

What is Smokers' Helpline? (www.smokershelpline.ca)

Smokers' Helpline (SHL) is a free, evidenceinformed, confidential service, staffed by trained tobacco cessation specialists and available seven days a week. It provides individuals with personalized support, advice, and information about guitting smoking, vaping, and tobacco use. This service is operated by the Canadian Cancer Society and funded by the provincial and territorial governments of Manitoba, Ontario, Prince Edward Island, Saskatchewan, and the Yukon and is only available to individuals living in these regions. All services offered are developed and delivered based on current evidence and proven techniques. SHL was launched in April 2000 and has reached more than 250,000 Canadians since inception. The Canadian Cancer Society continues to expand this program to meet the changing needs of Canadians. Talk Tobacco is a sister program for First Nations, Inuit, Métis, and urban Indigenous communities.8

How does Smokers' Helpline support tobacco cessation?

This individualized service is delivered by trained tobacco cessation specialists, commonly known as Smokers' Helpline Quit Coaches. These coaches complete extensive training in motivational interviewing, cognitive behaviour therapy, as well as the TEACH training (Training Enhancement in Applied Counselling and Health, Centre for Addiction and Mental Health tobacco cessation education program).9 They also have training in trauma, grief, mental health, and resiliency, as well as Indigenous relationships and cultural safety. As the backbone of this program, coaches provide support for people who are trying to quit smoking, vaping, and tobacco use, including brief interventions, multi-session proactive counselling, referrals to other credible health and/or support services, as well as chat and text support. These behavioural change interventions are provided via telephone, online, or by text messages. They use motivational interviewing and cognitive behavioural therapy in their interventions, and actively moderate the SmokersHelpline.ca online support community.8 It is important to note that individually delivered telephone smoking cessation counselling





has been shown to be more effective than brief advice or provision of self-help materials, and internet-based interventions may be more effective than usual care or self-help but more data is needed.^{10,11}

While an individual can access SHL on their own, as a pharmacist, you can also help patients use this service as an adjunct to your counselling and/ or pharmacotherapy. In fact, referrals are important because sixty per cent of SHL clients surveyed said that they would not have connected with

this service if they were not referred by a healthcare professional.⁸ And a Health Canada 2016 evaluation of Smokers' Helpline quit lines in Manitoba, Ontario, and PEI showed a 22%, 28%, and 39% quit rate (respectively) measured at seven months for people who used a telephone-based service.¹²⁻¹⁴ An individual can connect with a Smokers' Helpline Quit Coach by telephone, text, and online in MB and SK; via text and online in ON; and via telephone and online in YT and PEI, as outlined in table below.⁸

ACCESSING SMOKERS' HELPLINE SERVICES AND TOOLS⁸

TYPE OF SUPPORT	HOW TO ACCESS	DETAILS
Telephone	1-877-513-5333	 Bilingual + 100 languages (including 24 Indigenous languages) with an interpreter service One-on-one coaching and practical information including working with the client to develop a quit plan, talk about coping and withdrawal symptoms, managing stress, dealing with slips and relapses, accessing local support services and self-help materials No limit to length or number of calls
Text	Text iQuit to 123456	 Scheduled delivery of motivation, advice, and exercises Up to 13 weeks of messages Automated keyword responses provide support in the moment (e.g., craving, stress) Clients tailor their messages by entering quit date or remain in "thinking" stage Registration by short-code or online at Smokershelpline.ca
Online	Register at smokershelpline.ca	 Create a personal quit plan Participate in community forums (https://smokershelpline.ca/forums) Access articles Sign up for motivational emails Access tools such as Quit Map (directory of Pan-Canadian quit resources at https://csl.cancer.ca/smokershelpline/en) or quit cost calculator (an online tool that demonstrates cost savings that can be realized with quitting) Live chat with a coach during business hours Leave a message after hours for support or information





Practice and Counselling Tips

- Know Your Role in Tobacco Cessation: As a pharmacist you can work with your pharmacy team to ask patients about tobacco use, provide health promotion and education, assess readiness to quit, provide behaviour change support, prescribe and counsel on pharmacological interventions, and refer patients to other providers. Ensure that your pharmacy team has a plan to collaborate and leverage their scope of practice to reach more people and deliver effective interventions. 16
- Use a Structured Approach: The 5As are the key steps that can be included in brief interventions at the pharmacy to support tobacco cessation. They include:
 - **Ask** (about tobacco use at every encounter),
 - Advise (urge everyone who uses tobacco to quit).
 - Assess (determine a person's readiness to quit by asking if they would like to quit and if they think they can be successful),
 - Assist (set a quit date and outline a quit plan), and
 - **Arrange** (set a date for follow-up and refer the patient to other resources such as SHL for additional support).^{3,8}
- Exercise Your Prescribing Authority: Pharmacists in all provinces and the Yukon have authority to prescribe medications for tobacco cessation. For patients who are candidates for pharmacotherapy:¹⁷⁻¹⁹
 - Offer nicotine replacement therapy (NRT) if they have not tried other treatments
 - Prescribe/recommend varenicline or bupropion sustained release if the patient prefers them over NRT and they are safe with their comorbidities and medications

- Follow up in 1-4 weeks post quit date
 - If there is a response, continue for 12 weeks
 - If there is no response or partial response, assess adherence, adjust the dose, switch pharmacotherapy or consider combination therapy (e.g., two types of NRT or varenicline plus NRT)
- Refer your patient to a primary care physician or nurse practitioner if they do not respond to therapy

Points to Ponder:

Connecting Your Patient with Smokers' Helpline for Additional Support

The conversation can start at the pharmacy.

• Ask about smoking at every encounter at the pharmacy, as the gateway to the 5As. This can open the door to further discussion and opportunities to refer. According to the WHO, if all primary care providers routinely "Ask" and "Advise," they can identify more than 80% of people who use tobacco and encourage 40% of them to attempt to quit. For those who smoke cigarettes, the Fagerström Test for Nicotine Dependence can help you determine the severity of nicotine addiction and the recommended dose of nicotine replacement therapy. For the same placement therapy.

Tobacco cessation is a team effort.

• While pharmacists and pharmacy teams are well-positioned to encourage and assist with tobacco cessation, patients can be more successful if they have access to an additional layer of support, especially those who are more challenged to quit. As an adjunct to the cessation support provided at the pharmacy, consider referring patients with more complex needs or with a greater burden associated with quitting to SHL to enable seamless care and collaboration. Refer patients via the online tool available here or by faxing a referral form to SHL. Be sure to get your patient's consent to enable a quit coach to contact them directly.





- Request printed materials <u>here</u> to facilitate referrals to SHL, including a referral pad or referral cards for patients.
- Tell your patients about SHL incentives including:
 - First Week Challenge Contest where individuals who quit for the first week of the month are entered for a chance to win \$500. This contest is built on the fact that people are nine times more likely to quit for good if they can quit for one week. This contest is open to people who live in the provinces/territory where SHL is offered or who identify as Indigenous and live in British Columbia.²¹
- Nicotine Replacement Therapy Trial Pack Offer includes 2 nicotine patches (21 mg), 1 sleeve of nicotine gum (2 mg), a coupon for a discount on NRT products, and an information card about combination therapy. This offer is available in all provinces and territories of Canada, excluding Quebec.²²

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^{*}The online pdf includes this typographical error.