

**NZMA
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Quitline: Smoking Cessation Strategies

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Bruce Bassett
Director Strategy and Communications

Amanda Campbell
Relationship Manager, Health Sector

Overview

- There is a tobacco epidemic – it is deadly
- It is being tackled across a number of policy and societal levels
- *Smokefree Aotearoa 2025 goal*
- The tobacco addiction is very difficult to overcome and we have too many smokers in New Zealand
- How we can work together to make a difference for your patients

The presentation will set out how you can support your patients to quit and leverage the power of the doctor/patient relationship

Tobacco Epidemic

650,000 adult smokers, of whom

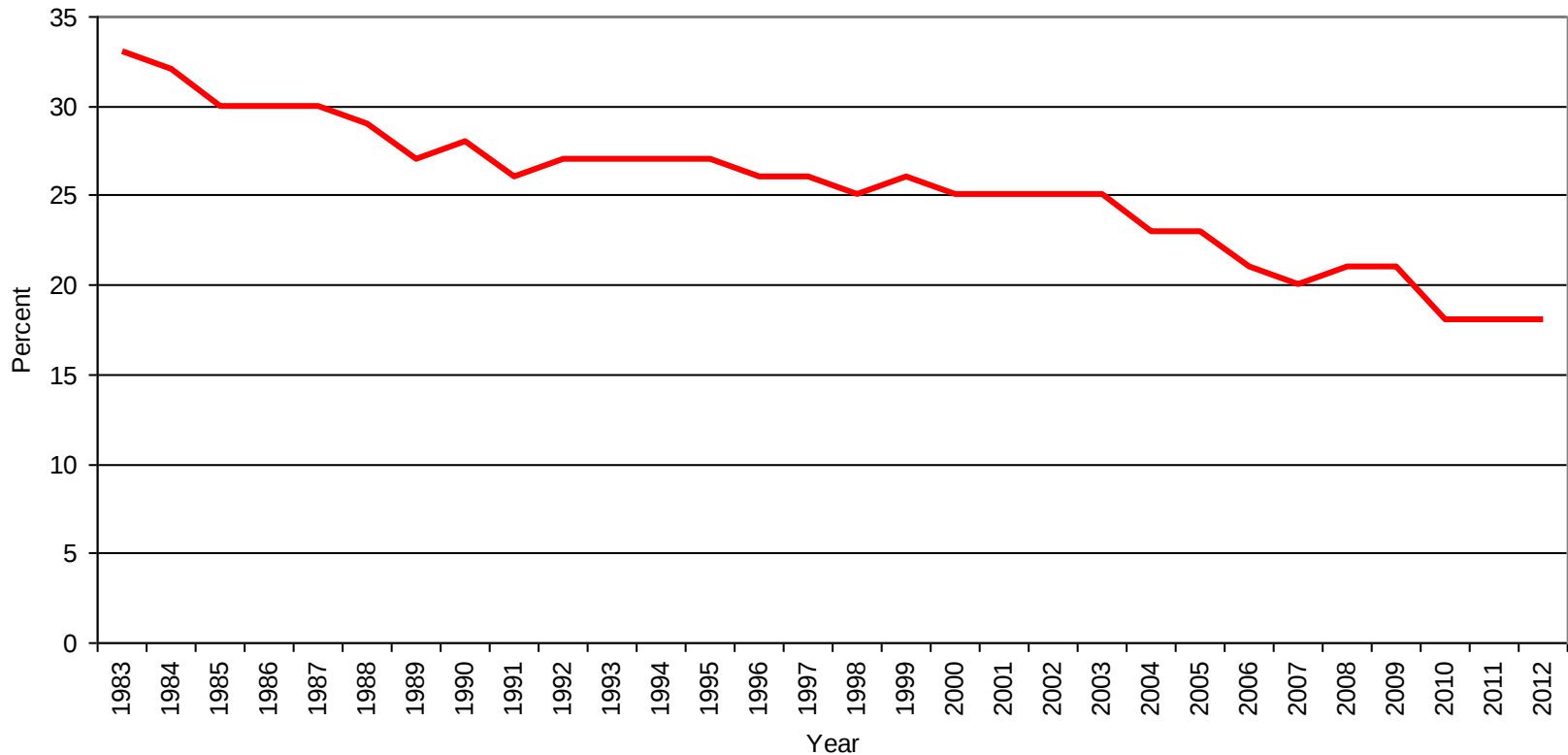
- 182,000 adult Maori smokers
- 54,000 Pacific smokers

Prevalence

- **18% for total population**
- 41% for Maori
- 26% for Pacific Peoples
- 10% for Asian
- 17% for European/Other

Smoking Rates are Changing

New Zealand Smoking Prevalence – 1983 to 2012



Source: New Zealand Tobacco Use Survey and New Zealand Health Survey

Implications

Smoking is all Bad

- 5,000 New Zealanders die each year from smoking
- Each life-long smoker loses an estimated 10 to 15 years of life
- Smoking is major reason for life expectancy disparity between Maori and the general population

If you Quit, you Recover

By quitting, people regain life expectancy – the earlier you quit, the greater the gain

Stopping at age 30	10 years
Stopping at age 40	9 years
Stopping at age 50	6 years
Stopping at age 60	3 years

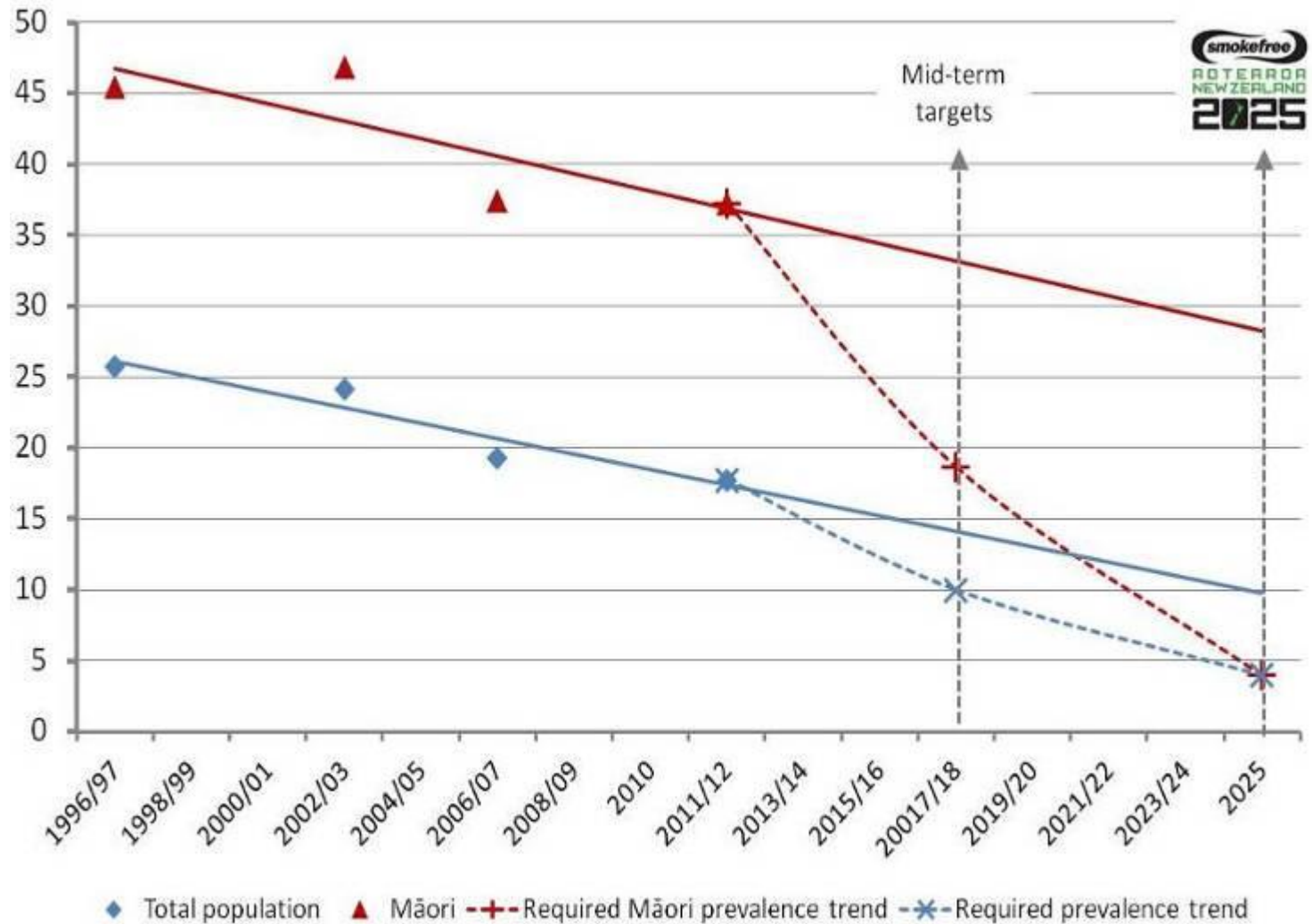
After being quit for 15 years, life expectancy is similar to a person who has never smoked

Doll R, Peto R, Boreham J, Sutherland I. (2004). ["Mortality in relation to smoking: 50 years' observation on male British doctors"](#). *BMJ* **328** (7455): 1519.

Policy Environment

- Government has a long-standing policy framework to address smoking, including:
 - Advertising restrictions
 - Smokefree environments
 - Point of sale restrictions
 - Cessation support
 - Health targets
- In 2012, Government established the goal of *Smokefree Aotearoa by 2025*
The aim is to create further momentum

2025 Smoking Rate Trajectory



Cessation Sector

- Funded programmes
 - Quitline as national cessation service
 - Face to Face providers (e.g. Aukati Kaipaipa)
 - Subsidised Nicotine Replacement Therapy
 - Subsidised pharmaceuticals (e.g. Champix)
- And there are a lot of other elements such as new NRT sprays, e-cigarettes etc
- Smokers have lots of choice

Quitline

- Supports almost 50,000 clients each year
- 8% of the smoker population
- Delivers to the Ministry of Health's "*Smoking Cessation Services Tier One Level One Service Specification*"
- Clients join a three-month programme
- Minimum of four follow-up contacts and quit status gathered at 4 weeks and three months
- 24/7 service with phone, online and text channels
- Very active Blog community for peer support - 95,000 blogs and comments over the past year

The Quitline Service

- The 'Quitline Support Model' is the heart of the service clients receive
- Evidence-based behavioural approach where clients receive tailored advice depending on their needs through a quitting journey
- Quitline Advisors are well trained
- Electronic services are aligned to this model so that clients get consistent support regardless of the service channels (or combination of channels) used
- Provision of NRT is part of the mix
- Behavioural support for clients using Champix (and others)
- Clients are encouraged to use all services on offer

What is Not Included

- Quitline is required to adhere to the Ministry of Health's

New Zealand Smoking Cessation Guidelines

- As such, it is only able to talk generally to its clients on the pharmaceutical products and in such innovations such as e-cigarettes

How Clients Use Quitline

- Client's use the phone, text and online services interchangeably
 - 65.8% use the phone service
 - 67.4% use the online services
 - 33.1% use the text service
- Two-thirds of clients use multiple services

Quitline Efficacy

- Overall six month quit rate of **24.2%** (7 day point – prevalence, intention to treat)
- The more services used the better the quit rate
 - Phone only 20.9%
 - Online only 26.6%
 - Phone and Online 33.4%
 - Phone, Online and Text 37.0%
- More service use is associated with better cessation outcomes

How Quitline Attracts Clients

Self Referral

- **97%** of clients 'self-refer' in response to advertising and the very high underlying awareness of the Quitline brand

Referral

- **3%** of clients are 'referred' from the health sector, and this is growing

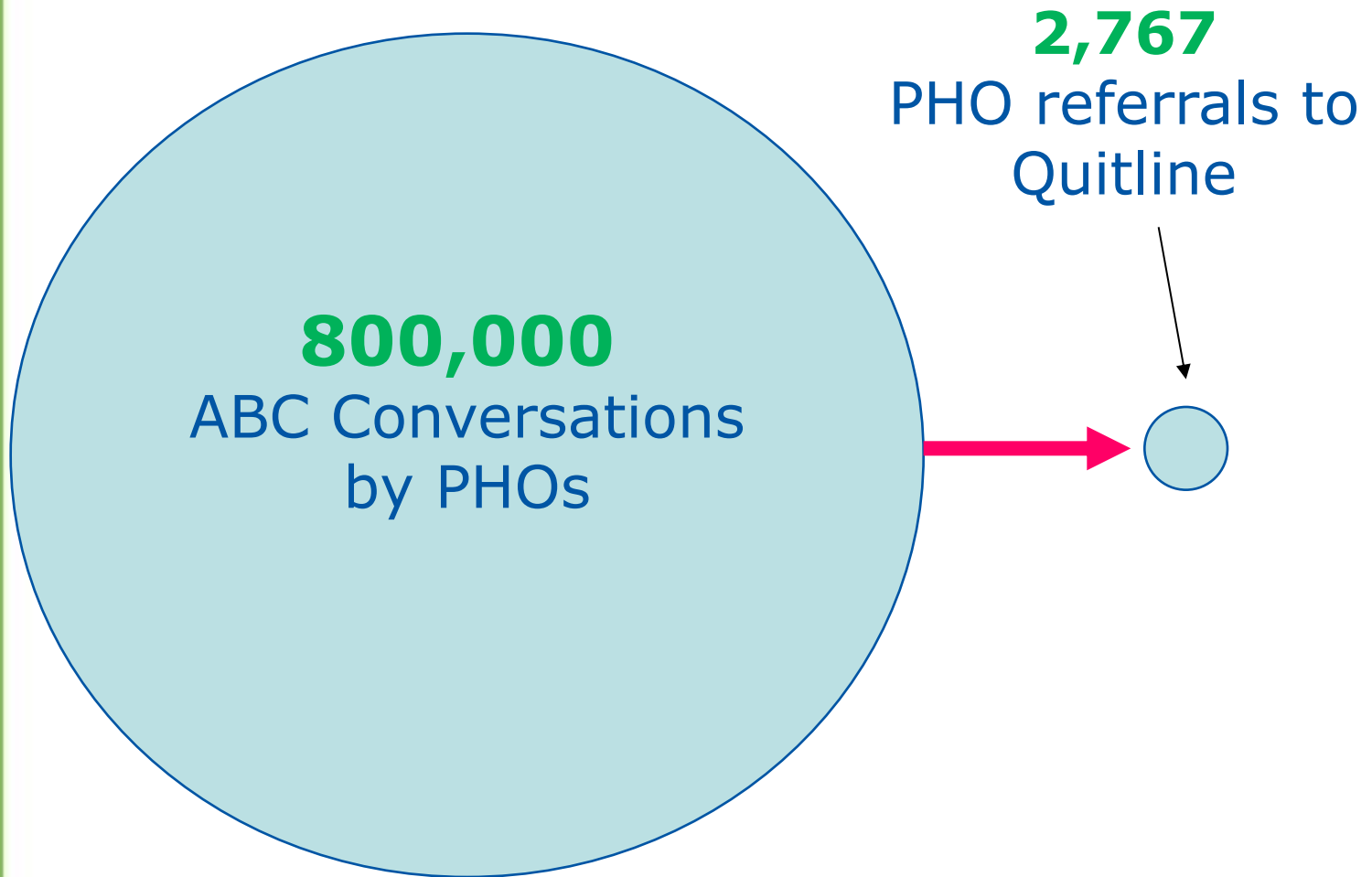
Quitline is working with its partners to significantly increase referral flows

Health Targets

"90% of patients who smoke and are seen by a health practitioner in primary care, are offered brief advice and support to quit smoking."

- Very important driver to ensuring conversations with smokers that encourage them to quit
- Estimated **800,000** ABC conversations by PHOs each year

The Gap



Bridging the Gap

Given that 85% of known Quit Attempts in the cessation sector are supported by Quitline (excluding PHO and DHB's own cessation work), we suspect that the vast majority of ABC conversations are not connecting to cessation support

Quitline is working to bridge that gap

PHO referrals up 215% on year earlier

Strategy for GPs

1. Evaluations show that more service use results in better quit outcomes
2. Research shows that patients GPs referring smokers to an evidence-based quitline service results in increased cessation (Borland, 2008)

- Borland R, Balmford J, Bishop N, Segan C, Piterman L, McKay-Brown L, Kirby C, Tasker C. In-practice management versus quitline referral for enhancing smoking cessation in general practice: A cluster randomised trial. **Family Practice** 2008; 25(5): 382-389.

Relevant Research

- Australian trial with two groups:
 - standard in-practice GP management
 - referral to a quitline service as well as in-practice management
- Results (3 month abstinence, Intention to Treat):
 - 12.3% for referral to quitline
 - 6.9% for standard in-practice care
- The benefit is largely due to patients in the referral group receiving more external help than patients solely in the in-practice care

Borland Research

The researchers recommend:

“Where suitable services exist, we recommend that referral become the normative strategy for management of smoking cessation in general practice to complement any practice-based help provided”

How You Can Refer to Quitline

- General referral processes – text, fax, email
- One system developed for patient management systems – Medtech

Quitline wants to build upon these systems and has a project underway to allow next-step developments

Realistic Expectations

- In setting out these tools for you, it is important that we have realistic expectations
- People use a cessation service and ultimately quit only if they want to
- While we can offer cessation support, it is up to the individual to embrace the opportunity
 - 2767 PHO Referrals
 - 1876 Successful contacts
 - 797 Commenced Quit Programme
- **29%** of PHO referrals start a Quit Programme – we all have to work on this

How to Think About Cessation

- GPs are in a unique position to help their patients through the difficult quit smoking process:
 - You are trusted and respected by your patients meaning that you are influential
 - You can prescribe the most effective pharmaceuticals and NRT
 - You often have in-practice support
 - You can connect patients to a range of face-to-face services
 - Now, you can more readily connect to Quitline for multi-service 24/7 support
- You can use all of these approaches
- The key findings from evaluations and research is **'more is better'**

Using Medtech in Practice

Amanda Campbell will now demonstrate how the Medtech to Quitline referral system can work for you

Quitline's Referral Channels and Referral Process

Medtech Referrals

MedTech-32 MMH Test [Terminal]

File Edit Patient Module Report Tools Utilities Setup ManageMyHealth ConnectedCare CAT Window Help

FOWLER Laura (703842.1)
16 Brenton Place, Orakei, 09 521 0866

A3 - R
06 Feb 1979 33 yrs Female

N - Not Funded
0.00

ADM A-?
P

Quitline Referral (ManageMyHealth)

Web

Quitline Referral
For information about Quitline please visit www.quitline.org.nz

View Previous Referrals

Refer to Quitline

Fields marked with * are mandatory Help

Patient

Patient Details

First Name *LAURA

Surname *FOWLER

NHI

Date Of Birth *06/02/1979

Gender ☒ Male ☐ Female ☐ Other

Contact Information

Daytime Phone *095210866

Home Phone

Mobile

Email Addresslaura.fowler@mmh-demo.com

Pregnancy

Is the Patient

Residential Address

Street Address *16 Brenton Place

Suburb *Orakei

City *Auckland

Post Code *1071

Postal Address

Street Address16 Brenton Place

SuburbOrakei

CityAuckland

Post Code1071

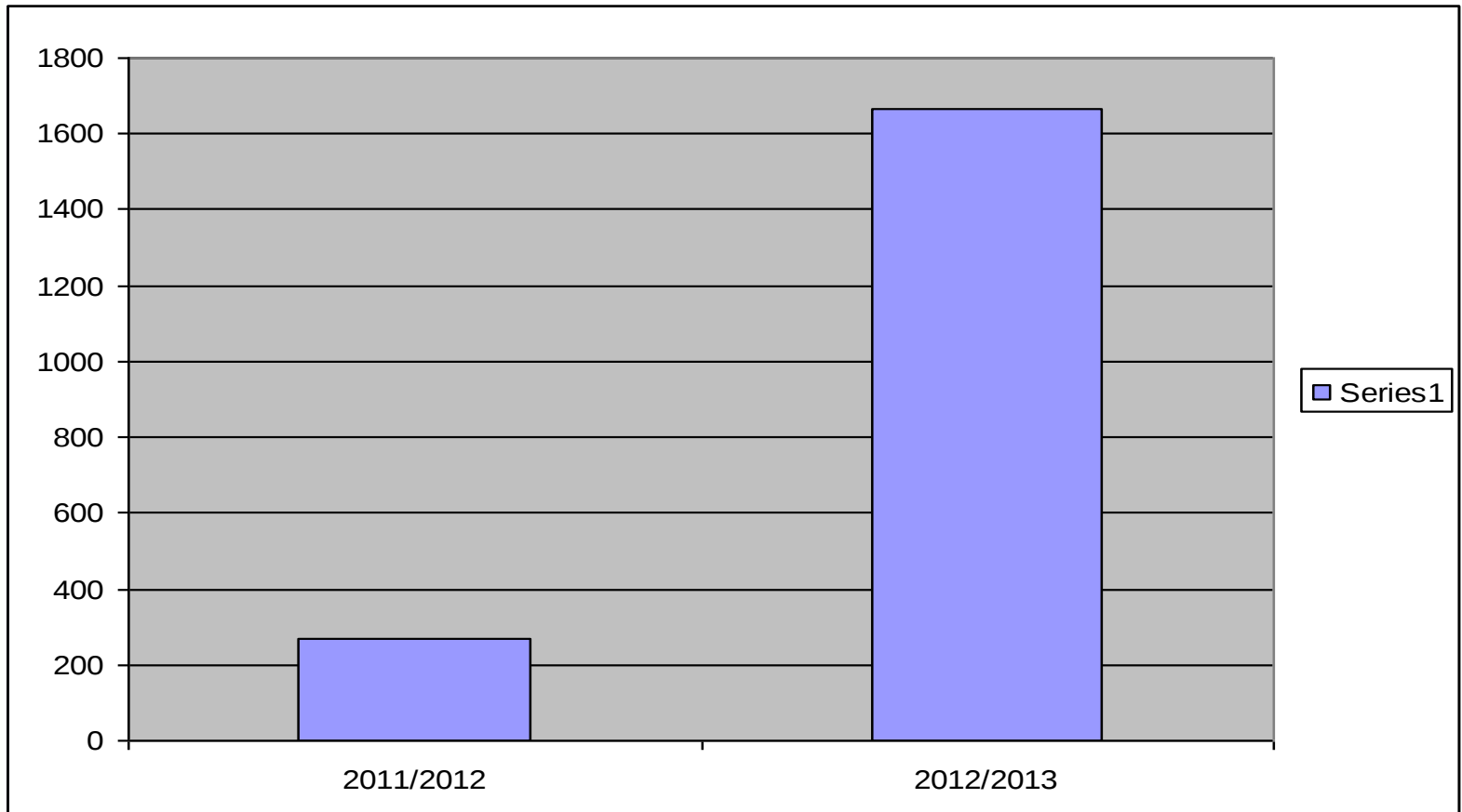
Patient/Guardian Consent

Has Patient/Guardian

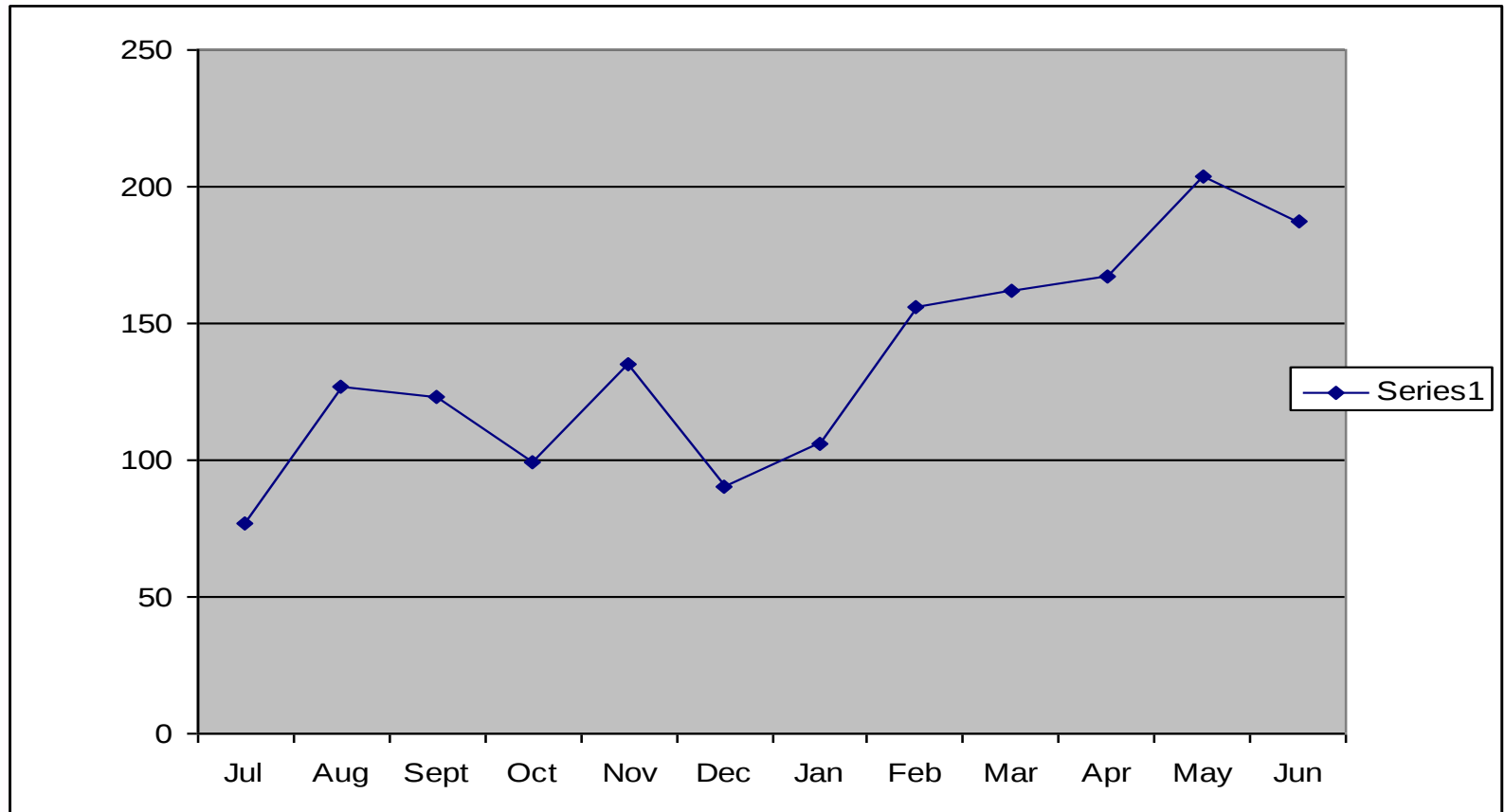
What are the benefits for Medtech users?

- Referrals to Quitline directly from patient management system
- Easy and efficient
- Free for all Medtech users (80% of PHOs)
- Read codes automatically updated
- **Go Live end of August:** Feedback loop provides information on patient quit date and smokefree status

Medtech Referrals



Medtech Referrals



Referral Form

- Referral Form available on our website www.quit.org.nz/healthprofessionals
- E-mail to: referrals@quit.org.nz
- Fax to: 04 460 9879
- Referral Enquiries Hotline: 0508 555 010

Text Referrals

- Currently used by Plunket
- Developing for NZ College of Midwives
- Tailored for each organisation

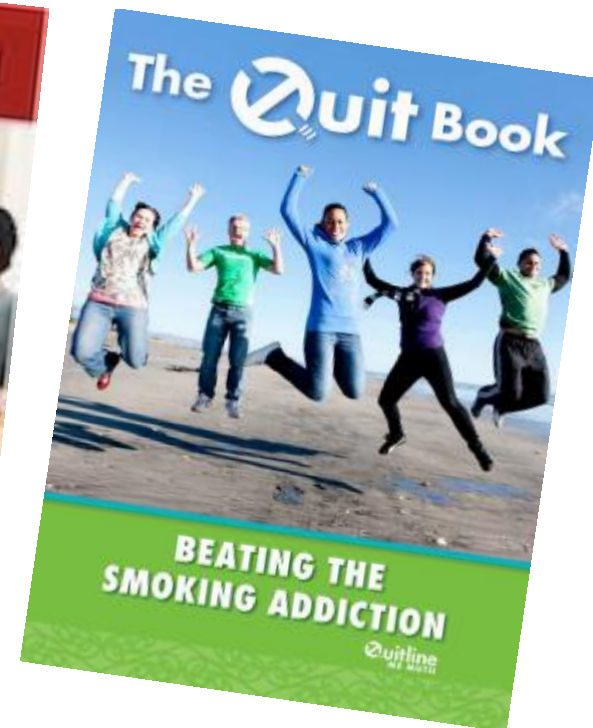
What happens Once a Referral is Submitted to Quitline?

- An acknowledgement of receipt of referral will be submitted
- All patients are contacted within 3 working days
- Register patient on our 3 month programme
- Support from a local face to face provider is offered in addition to our services

Next Steps

- Developing feedback reporting to all referring parties and across all referral channels
- Launch of feedback loop will be communicated via Medtech
- Exploring other Patient Management Systems

Quitline Resources



Further Information

**Please visit the
Quitline stand
No. 18**

Any Questions?

