

Smoke signals

With smoking still high on the healthcare agenda, MATTHEW JANE considers what is in store for smoking policy and how practices can help patients kick the habit

The harmful effects of smoking are well documented. It is responsible for around 90,000 deaths each year in England alone, kills half of all long-term users and is the biggest single cause of health inequalities between the rich and poor. The economic cost is also considerable: smoking is a £2.7bn annual burden on the NHS.

Fortunately, government action and an increased awareness throughout society are helping to chip away at the problem. Today there are 2m fewer smokers than a decade ago and proactive measures by the NHS and government raise optimistic predictions over future trends.

Last month, Health Secretary Andy Burnham announced ambitious plans to halve the number of smokers from 21 per cent to 10 per cent of the population by 2020. Similar government action in the past has contributed to the number of smokers falling by a quarter over the past decade, with 337,000 people kicking the habit last year alone. The most high profile recent activity saw virtually all enclosed places become smoke free in 2007.

Research shows that 70 per cent of smokers want to quit, highlighting the importance of having effective NHS services in this field. The government guidance outlined in the report, *A smokefree future: a comprehensive tobacco control strategy for England*, stresses that every smoker, no matter what their level of addiction or the number of attempts they have made to quit in the past will be able to get help from the NHS. It is also acknowledged that smokers will need different levels of support and some will need long-term help. »



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There is set to be more of an emphasis on prevention, with a clampdown on illicit cigarettes being smuggled in, a ban on cigarette vending machines, plain tobacco product packaging and a possible extension of the smokefree law to extend to building entrances. The government is also considering offering NHS help to all smokers, with new types of support available at times and places to suit the individual.

No two smokers are the same and all addicts will have different triggers and levels of addiction, hence the government proposal for more bespoke help. Some of the different methods to be used will include nicotine replacement therapy for longer periods of time.

Discussing the government strategy, Burnham said: “We will always help people to quit, and smokers should never stop trying. That’s the beauty of the NHS – it’s there to help everyone. One day, in the not too distant future, we’ll look back and find it hard to remember why anyone ever smoked in the first place.”

Bryan Stoten, chairman of the NHS Confederation said the strategy is a step in the right direction, but more could be needed. “It is right that politicians are engaging seriously with issues around the packaging, promotion and use of tobacco products, but this is only part of the solution. What is needed is nothing less than a society-wide effort to educate, persuade and prompt people to either give up smoking, or better still, not take the habit up in the first place.”

JUST BEAT IT

This month provides practices with the perfect platform to support smokers to quit as No Smoking Day takes place on March 10 and is designed to help support people in breaking the habit. This could be a good time to inform your patients about the services you provide or warn them of the health risks of smoking.

As the popularity of New Year’s resolutions testifies, setting a date to quit is often a good first step. Encouraging patients to get involved with No Smoking Day, or alternatively, arranging a no-smoking event in your practice could help provide a spur for people to quit and a platform for them to base their actions on.

Teamwork can be a huge help in combating the lure of cigarettes. By creating a community or buddy system, patients will have someone to support them and help them develop systems that best suit their requirements.

Smokers that receive NHS support are four times more likely to stop than those who receive no

support, and there are plenty of QOF points on offer (see box out). There are also a host of products on the market designed to make the quitting process easier. Nicotine patches, gum, inhalators and lozenges are all useful ways of weaning smokers off cigarettes. It can also be useful to encourage a more holistic approach, with relaxation techniques, breathing exercises and distractions to help avoid situations that could trigger the desire to smoke. ■

See www.nosmokingday.org.uk for more information and resources



Smoking QOF

INDICATOR	POINTS	THRESHOLDS
Smoking 3: The percentage of patients with any or any combination of the following conditions; coronary heart disease, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorders or other psychoses whose notes record smoking status in the previous 15 months.	30	40-90 per cent
Smoking 4: The percentage of patients with any of the diseases as above who smoke and whose notes contain a record that smoking cessation advice or referral to a specialist service, where available, has been offered within the previous 15 months.	30	40-90 per cent