

Getting your patients to quit:

Smoking cessation interventions in the dental setting



September 16, 2021

12:00 PM - 1:00 PM

WEBINAR

1 of 2

Housekeeping

- This presentation is being recorded.
- All participants are muted.
 No video is needed for today.
- Please direct your questions to the moderator in the chat box.





Quitline Moderators and Presenters

- MODERATOR: Paula Celestino, MPH
 Director of Client Relations and Outreach
- PRESENTER: Patricia Bax, RN, MS, NCTTP
 Marketing and Outreach Coordinator
- <u>TECHNICAL/CHAT</u>: Tony Astran, MPA, APR, TTS Public Information Specialist

SMOKERS' 1-866-NY-QUITS (1-866-697-8487) nysmokefree.com

Our Featured Presenter

Elizabeth Kapral, DDS, MS

Director of Special Needs Dentistry
Erie County Medical Center
Department of Oral Oncology /
Maxillofacial Prosthetics



* Member of the Quitline's Healthcare Professional Task Force *

Objectives

At the conclusion of this webinar, attendees will be able to:

- Recall the morbidity and mortality of tobacco use
- Summarize the oral sequelae of tobacco use
- Apply tobacco cessation counseling to their dental practice
- Utilize motivational interviewing techniques to encourage patients to quit tobacco-use
- Identify appropriate adjunctive pharmacotherapy

Today's Topics Include:

- Morbidity and mortality of tobacco use
- Oral manifestations of tobacco use
- Opportunities to motivate your patients
- Review of pharmacotherapy
 - To be continued in Webinar #2 on October 7, 2021
- Motivational interviewing

Dental Education Credit

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Erie County Medical Center designates this webinar for 1.0 credit hour of continuing dental education.

Poll Everywhere

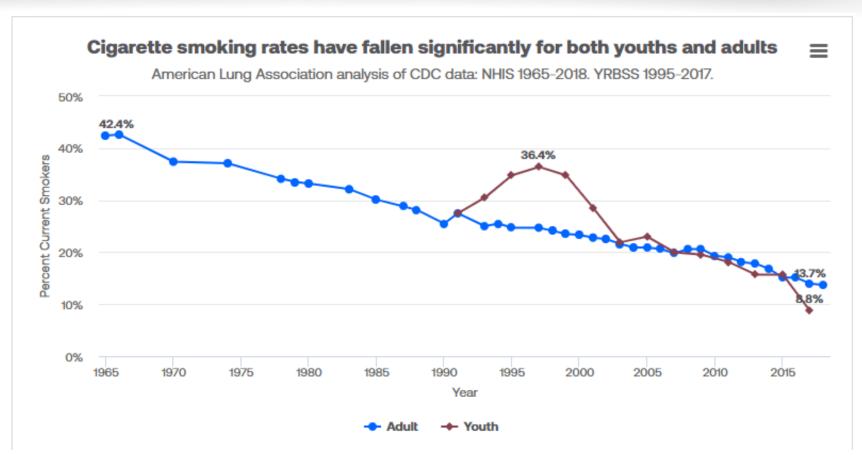
• PollEv.com/elizabethkap214

TEXT "ELIZABETHKAP214" to 37607

State of smoking

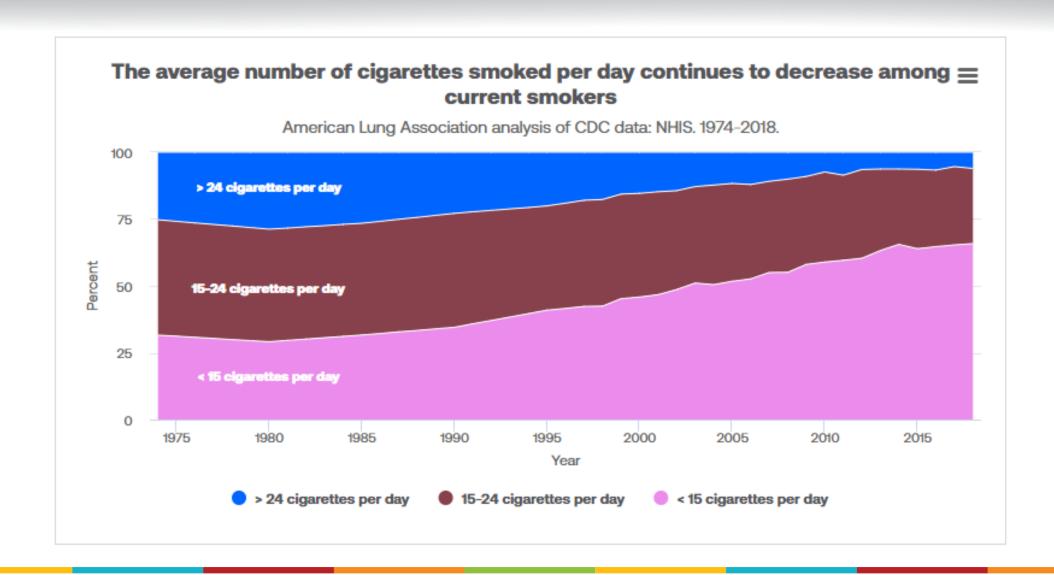
In 2019, 14% of all adults smoked

- 34.1 million people
- NYS 12.8%



U.S. Department of Health and Human Services. <u>The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General</u>. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, National Center for Chronic Disease Prevention and Health Promotion

State of smoking



Smoking Morbidity/Mortality

- LEADING CAUSE OF PREVENTABLE DEATH WORLDWIDE
- 1 in 5 deaths annually due to smoking
- 16 million Americans living with a disease due to smoking
- Causation: Cancer, heart disease, stroke,
 lung disease, diabetes, COPD, erectile dysfunction
- Correlation: Tuberculosis, immune disease (RA), infertility



U.S. Department of Health and Human Services. <u>The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General</u>. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014

Head and Neck Cancer

- Estimated 14,620 deaths per year
 - Men > Women
 - 4% of all cancers

American Cancer Society: Cancer Facts & Figures 2021

Oral Sequelae of Tobacco Use

- Hairy tongue
- Candidiasis
- Xerostomia
- Halitosis
- Staining/ Melanosis









Dentistry Today; 2008

James WD et al "Andrews' Diseases of the Skin" Clinical Dermatology p. 308

Glick, et al. 2015. Burket's Oral Medicine

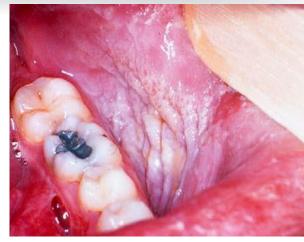
American Academy of Oral Medicine

Oral Sequelae of Tobacco Use

- Nicotinic stomatitis
- Submucous fibrosis
- Periodontal disease
- Impaired healing









American Academy of Oral Medicine Krakowiak P. "Alveolar Osteitis and Osteomyelitis of the Jaws" Oral and Maxillofacial Surgery Clinics, 2011

Oral Sequelae of Tobacco Use

- Leukoplakia
- Squamous Cell Carcinoma





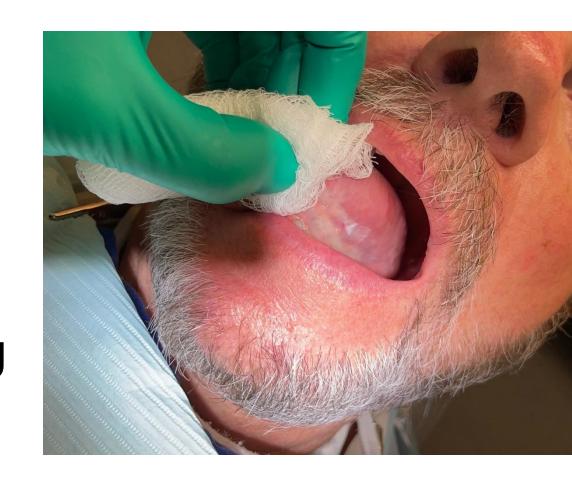


Tobacco cessation in your practice

- Ask and ACT
 - Every hygiene visit
 - Every new patient exam
- Simple recommendation on cessation
 - "As your dentist, I need to tell you that quitting smoking is the most important thing you can do for your health."

Tobacco cessation in your practice

- Show patients changes in their mouths
- Set quit date
- Tell friends & family of upcoming quit date
- Change up timing of smoking
- Relapse is a part of quitting



Pharmacotherapy (in brief)

- Nicotine Replacement Therapy
 - Patch, Gum, Lozenge, Inhaler
 - Titrated for amount the patient smokes
 - Combination therapy
- Prescribed Medications
 - Bupropion (Welbutrin)
 - Varenacline (Chantix)

Quitline Resources

Smoking Cessation Medication Prescribing Chart

These highlights do not include all information needed for safe and effective use. See full prescribing information for each medication.

N	Medication*	Suggested Regimen	Precautions	Contraindications	Potential Adverse Effects			
(NRT)	Patch [†] Long-acting NRT	≤10 cig/d, start with 14 mg/qd x 6 weeks, followed by 7 mg/qd x 2 weeks >10 cig/d, start with 21 mg/qd x 6 weeks, followed by 14 mg/qd x 2 weeks, followed by 7 mg/qd x 2 weeks	 Pregnancy Class D‡ Uncontrolled hypertension Skin disorders (patch) Allergy to adhesive tape (patch) MRI (patch) Advise starting with the highest-dose patch available except for patients weighing less than 100 lbs. TMJ disease, dental work, dentures (gum) Sodium-restricted diet (gum, lozenge, nasal spray) Stomach ulcer (gum, lozenge, nasal spray, inhaler) Sinusitis, rhinitis (nasal spray) 	 Heart attack within 2 weeks Serious cardiac arrhythmia Unstable angina 	 Symptoms of too much nicotine, e.g., nausea, headache, dizziness, fast heartbeat Skin irritation, insomnia (patch) Jaw pain, dry mouth (gum) Hiccups, heartburn (gum, lozenge) Bronchospasm (nasal spray, inhaler) Nasal irritation, tearing, sneezing (nasal spray) Mouth and throat irritation (inhaler) 			
Therapy	Gum [†] Short-acting NRT	1st cig >30 mins after awakening, 2 mg/hr 1st cig ≤30 mins after awakening, 4 mg/hr (both up to 24 pcs/day)						
Replacement	Lozenge [†] Short-acting NRT	1st cig >30 mins after awakening, 2 mg/hr 1st cig ≤30 mins after awakening, 4 mg/hr (both up to 20 pcs/day)						
Nicotine Re	Nasal spray Short-acting NRT	1–2 sprays/hr, as needed (max 40/d up to 3 mos)						
Nice	Inhaler Short-acting NRT	Frequent continuous puffing for up to 20 mins at a time every hour, as needed (6 –16 cartridges/d up to 6 months)	Reactive airway disease (nasal spray, inhaler)					
	Long-acting NRT (patch) can be used in combination with short-acting NRT (gum, lozenge, nasal spray or oral inhaler) or with bupropion SR.							
(2	upropion SR Zyban°, /ellbutrin°)	Days 1–3:150 mg po qd Day 4 to 7–12 weeks (or end of treatment): 150 mg po bid Can be maintained up to 6 months (24 weeks) Can be combined with the NRT patch	 Pregnancy Class C‡ Uncontrolled hypertension Severe cirrhosis – dose adjustment required Mild-mod hepatic & mod-severe renal impairment – consider dose adjustment 	 MAO inhibitor in past 14 days Seizure disorder, bulimia/anorexia Abrupt discontinuation of ethanol or sedatives 	■ Insomnia, dry mouth, headaches, pruritis, pharyngitis, tachycardia, seizures, neuropsychiatric effects and suicide risk As of December 16, 2016, the FDA removed the Boxed Warning for this medication. https://www.fda.gov/Drugs/DrugSafety/ucm532221.htm			
200	arenicline Chantix®)	Starting month pack: (start 1 week before quit date ^s) 0.5 mg po gd x 3 days: THEN	 Pregnancy Class C[‡] Seizure disorder CrCl <30 or dialysis – dose adjustment 	 Known history of serious hypersensitivity or skin reactions to 	Nausea, insomnia, abnormal dreams, constipation, neuropsychiatric effects,			

YOUR WORDS MATTER

Patients who received tobacco cessation counseling at the dental office were 1.4 times more likely to quit and remain abstinent at 12 months or longer.

[OR 1.44; 95% CI: 1.16-1.78]

More than 50% of people who smoke visit the dentist annually.

70% of smokers want to quit.

Approximately 50% of smokers will die of a smoking-related illness.

Carr AB, Ebbert JO. The Cochrane database of syst rev. (2006)

Poll Everywhere

• PollEv.com/elizabethkap214

TEXT "ELIZABETHKAP214" to 37607

New York State Smokers' Quitline

Opt to Quit

Refer to Quit

New York State Smokers' Quitling

Total Number of Referrals Received for the group Code Count Unspecified 177

Total 177

Total Closed Referrals

Reflects activity in the specified period and may include referrals made before 01/01/2020

Total Closed Referrals	168
Closed after five unsuccessful attempts	79
Wrong Number Number not in Service	19
Moral Support only	1
Refused Interview	31
Agreed to Interview	38

NYS Quitline Refer-to-Quit Online

Please enter your Login Name and password below

You will need to register to log-in.

To register, please contact The New York State Smokers' Quitling 1-866-697-8487 to request a log-in and password. You will need to provide name, organization, address, city, state, email address, phone, mobile number (if applicable) and a fax number (if applicable).

ogin Name:		
assword:		
	LogIn	

Questions





Motivating and Supporting Dental Patients on Their Quit Journey



Thursday, September 16, 2021

Patricia Bax, RN, MS, NCTTP, Marketing and Outreach Coordinator

Think About a Time...



Brief Interventions (3-10 minutes)

Keys for Success:

- Engaging in conversation
- ✓ Providing information about the impact of tobacco use
- ✓ Assessing level of motivation to quit
- Assisting access to resources or referrals to tobacco cessation programs

Motivational Interviewing (MI)

Motivational Interviewing was developed in the late 1980's by William Miller, PhD. and Stephen Rollnick, PhD.

Basic MI skills are helpful; to learn more, visit:

https://motivationalinterviewing.org

https://store.samhsa.gov/product/TIP-35-Enhancing-Motivation-for-Change-in Substance-Use-Disorder-Treatment/PEP19-02-01-003

Motivational Interviewing (MI)

A "way of being" with a person. The "spirit" in which it is delivered is as important as the techniques used.

Characterized by a warm, genuine, and respectful stance supportive of one's self-determination and autonomy.



OARS

Open-ended questions:

You cannot comfortably answer with a yes/no/maybe.



Affirmations:

Identify something positive and gives credit or acknowledgement.

OARS

Reflections:

Statements made to the client mirroring back the content, process or emotion in their communication.



Summaries:

Long reflections, often used to transition in a session, to end a session, to bring together content in a single theme, or for review.

MI Conversation Examples

- "What makes you think it's time for a change?"
- "What helped you be tobacco-free for a few months?"
- "Tell me more about when this first began."
- "What was quitting like for you?"
- "What's different about becoming tobacco free now?"

Helpful Phrases

- Tell me more....
- It sounds like...
- What I'm hearing you say is...
- On a scale of 1 to 10....



The good life is a process, not a state of being. It is a direction not a destination. ~ Carl Rogers



What if One Chooses to Continue Their Tobacco Use?

"The man who moves a mountain begins by carrying away small stones."
- Confucius

The "5 R's"

Tobacco users not ready to make a quit attempt may respond to a motivational intervention.

Motivate with the "5 R's": Relevance, Risks, Rewards, Roadblocks, and Repetition.



The "5 R's"

Relevance: Use facts to encourage one to indicate the reason quitting smoking is relevant.



Risks: Ask one to identify negative consequences of tobacco use. Highlight most relevant: shortness of breath, exacerbation of asthma, harm to pregnancy, risk of heart attack, cancer and stroke, increased risk of health complications for others.

The "5 R's"



Rewards: Ask tobacco user to identify potential benefits of quitting. Examples: improve your health, smell, taste, life span, and self esteem. You'll be a good example for your kids, have healthier babies, and reduced wrinkles, etc.

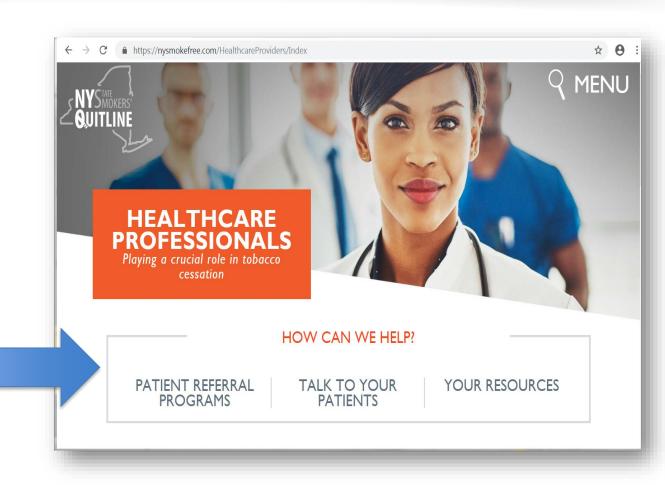
The "5 R's"

Roadblocks: Ask tobacco user to identify barriers or impediments to quitting; note elements of treatment (problem solving, pharmacotherapy) to address these barriers. Typical barriers: withdrawal symptoms, fear of failure, weight gain, lack of support, depression, and enjoyment of tobacco.

Repeat: Repeat motivational interventions as needed.

Quitline as a Treatment Extender

Healthcare professionals (HCPs) can directly refer tobacco-using patients by utilizing our free, secure, and easy-to-use Patient Referral Program.



Benefits of a Patient Referral Program

 Onsite tobacco dependence treatment interventions are enhanced, as part of a continuum of care.



- HCPs can utilize Quitline feedback to follow up with patients and support ongoing tobacco cessation attempts.
- Healthcare systems can leverage with Quitline services in a more seamless, consistent, and effective way.

Source: U.S. Department of Health and Human Services. Smoking Cessation: A Report of the Surgeon General—Executive Summary. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2020.

Easy to Use

Referral Options:

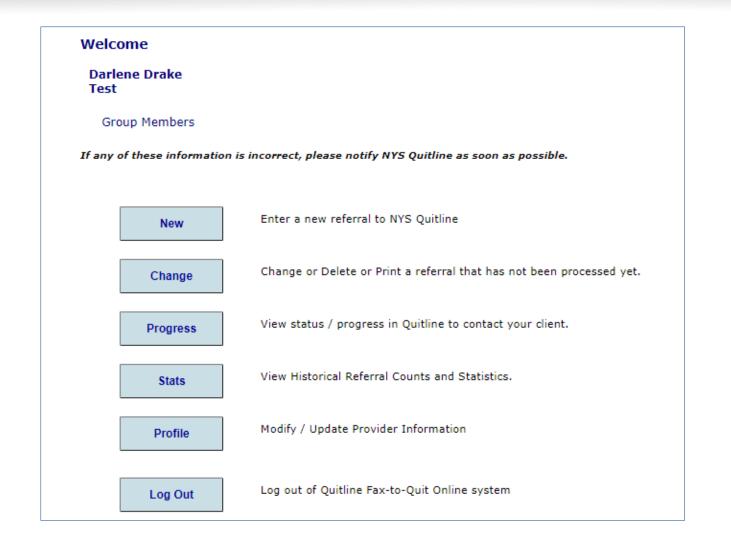
- Automated referrals from Clients' Data System to secure NYS Smokers' Quitline Web services
- Secure online site
- E-fax or traditional fax

Technical Assistance:

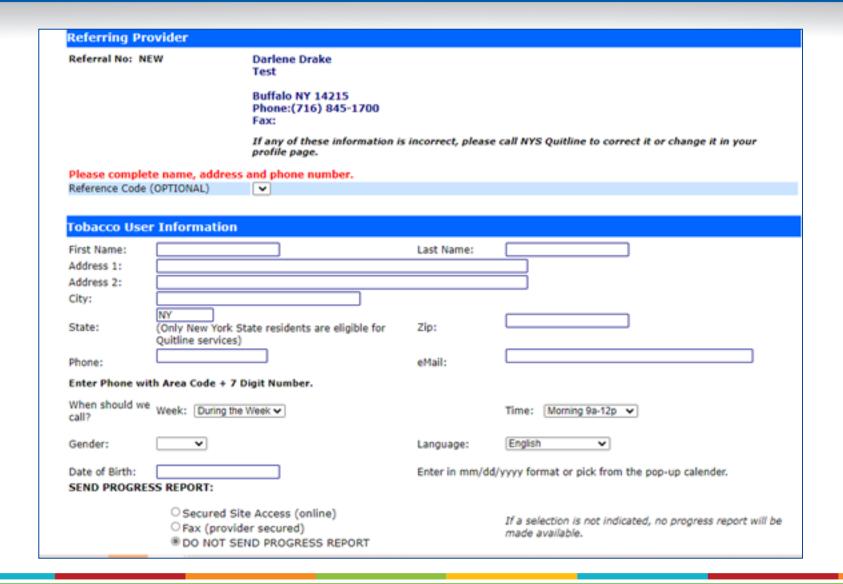
- Customize referral for healthcare site
- Training available



Patient Referral Program



Patient Referral Program



Patient Referral Program

Additional Provider to	o Receive Quitline Reports:		
Additional Provider t	o Receive Quitille Reports:		
Mark and complete this	s section, ONLY if you wish the follow-	un report to be sent ALSO to a	another person
	LLY WILL GET THE REPORTS.	op report to be sent nead to a	
(Please provide complete a	ddress including phone and fax numbers)	
Provider First Name:		Provider Last Name:	
Group/Agency/ Hospital/Organization:			
Address:			
City:		State:	
Zipcode:			
Phone:		Fax:	
	bers with Area Code + 7 Digit Number.		
enter Phone and Pax num	bers with Area Code + 7 Digit Number.	•	
			his/her information, agrees to be contacted
with this provider.	ine and allows the Quitiline to send a folk	ow-up report to the designated	provider(s). This verified consent is on file
For more info, call 1-866-N	Y OUITS (1-866-697-8487)		
	Darlene Drake		
	Darlene Drake Test		07/13/2021
PEDIATRICS ONLY:			07/13/2021
PEDIATRICS ONLY:		® Not Applicatble	07/13/2021
PEDIATRICS ONLY:		○ Mother	07/13/2021
PEDIATRICS ONLY: Tobacco users' relationship	Test	O Mother O Father	07/13/2021
	Test	○ Mother	07/13/2021
Tobacco users' relationship	Test to child:	O Mother O Father	07/13/2021
Tobacco users' relationship Child/Children's name: (to	Test to child: help with recordkeeping)	O Mother Father Other	07/13/2021
Tobacco users' relationship Child/Children's name: (to	Test to child:	O Mother Father Other	07/13/2021
Tobacco users' relationship Child/Children's name: (to	Test to child: help with recordkeeping) ddress and phone number.	O Mother Father Other	

Outcome Report

Content:

Reached/not reached
Outcome and quit status
NRT eligibility/status

Report Data:
Individual and
aggregated patient
activity data available

New York State Smokers' Quitline

1-866-NY-QUITS (1-866-697-8487)

Refer-to-Quit

Patient stamp, label, OR info (name, record number, DOB, date)

Progress Report

1-866-QUIT-FAX (1-866-784-8329

The Quitline has a secure **Online Referral Service**, allowing providers to refer tobacco users electronically with a valid provider e-mail address and to also access downloadable progress reports.

For more information, or to register for the **Online Referral Service**, please contact the Quitline at 1-866-NY-QUITS (1-866-697-8487).

Reaching Referred Clients:

- A minimum of five telephonic attempts are made to reach a tobacco user.
- · When contact is made, the tobacco user is offered free Quitline cessation services.
- If no contact, a letter is sent encouraging the tobacco user to contact the Quitline for help to quit.
- The outcome of the intervention or attempt to reach the tobacco user is documented below.

Call Outcomes

Date Progress Report Generated:

Status:

- o Reached/ Completed
- Declined services at this time
- A minimum of 5 attempts were made with no response from client
- Wrong number or client no longer lives there
- Phone disconnected

Ouit Status

- Already quit
- Client wants to quit
- Client has chosen a quit date
- Client has not determined a quit date but plans to quit with in 30 days
- Not ready to quit at this time

NRT Eligibility/Status

- Eligible- sent a 2 week supply of:
- Ineligible for a 2 week supply of NRT
 - Reason.
- Already received NRT and is using NRT
- Already received NRT and not using NRT yet
- Sent NRT but has discontinued use of NRT

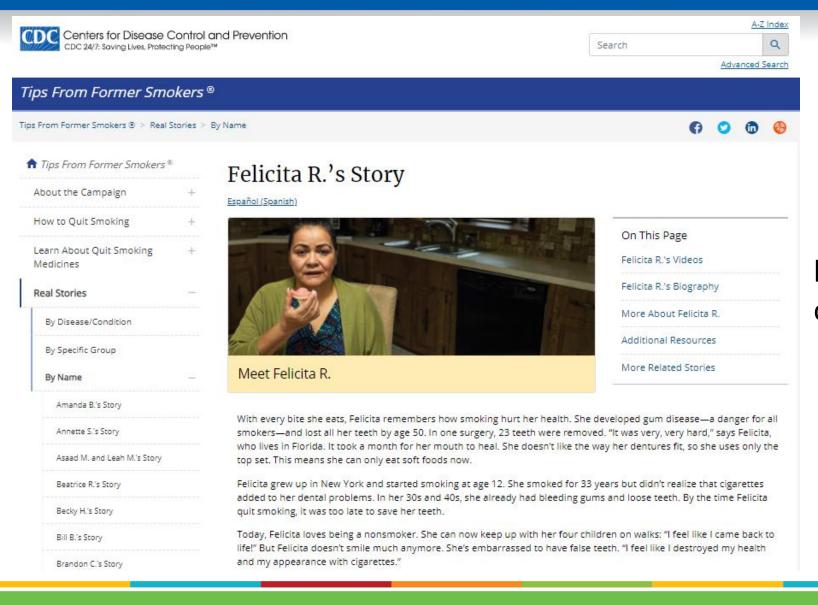
Enhancing the Referral Process

Quitline services are meant to enhance, not replace onsite interventions.



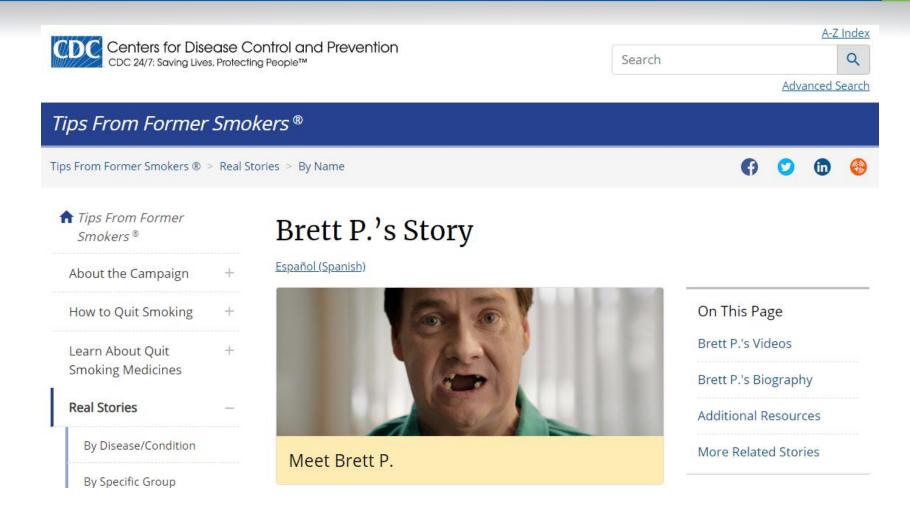
- ✓ Its not always what you say, but what you don't say that might have the greatest impact.
- ✓ What you say to patients and how you say it (using an encouraging and supportive tone), will influence their receptivity to receiving Quitline services.

Tips From Former Smokers®



https://www.cdc.gov/tobacco/campaign/tips/stories/felicita.html

Tips From Former Smokers®



https://www.cdc.gov/tobacco/campaign/tips/stories/brett.html

Remember...





Next Webinar: Thursday, October 7

Tobacco cessation lessons in the dental setting: Perspectives from motivating dental patients to quit

Additional Presenters:

- Dr. Kalpesh Desai, BSc.Pharm, PharmD, Adjunct Assistant Professor,
 State University of New York at Buffalo, School of Pharmacy and
 Pharmaceutical Sciences, Department of Pharmacy Practice
- Marlyce James, CDA, RDH, MSEd, Assistant Professor/Clinical Instructor, SUNY Erie School of Dental Hygiene
- Dr. Michael Krajewski, PharmD, MLS, Adjunct Assistant Professor,
 State University of New York at Buffalo, School of Pharmacy and
 Pharmaceutical Sciences, Department of Pharmacy Practice

Next Webinar: Thursday, October 7

Encourage your professional colleagues to join the Quitline's e-mail listserv by visiting the Quitline's Online News Room at nysmokefree.com/newsroom to receive the webinar registration announcements and webinar details later this month. The registration forms and details will also be posted to the Online News Room.

Contact Our Outreach Team...

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