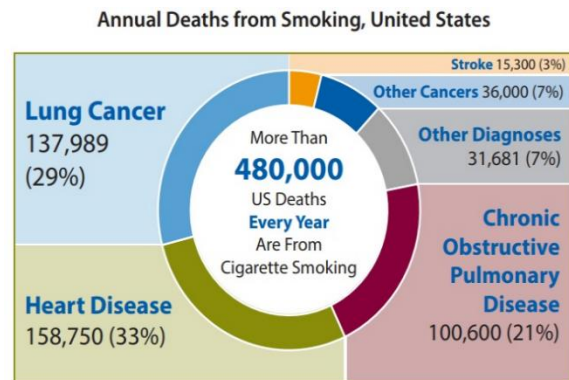


## Helping Our Patients Quit Smoking

### Why should we as physicians give more attention to whether our patients smoke or not?

While it is true that fewer people are now smoking cigarettes than ever before, smoking remains one of the most important public health issues of our time.

*Tobacco smoking is still by far the leading preventable cause of death, disease, and health care costs in our society, and is responsible for more than 480,000 deaths (including from exposure to secondhand smoke) in the U.S. each year.* In fact, many more people died nationwide from tobacco related illnesses in the past two years alone than from COVID-19 and opioid overdose together. *In addition, for each person who dies from a smoking related disease, there are 30 others who are suffering from the health consequences of smoking.*



Note: Average annual number of deaths for adults aged 35 or older, 2005–2009.  
Source: 2014 Surgeon General's Report, Table 12.4, page 660.

Tobacco use can impact virtually every organ in the body and is directly attributed to an increased risk of cancer, respiratory disease, diabetes, rheumatological disorders, dementia, visual and auditory loss, and many, many other diseases. For example, as the leading cause of cancer mortality for men and women collectively, most lung cancer deaths, which are related to smoking, could be prevented through smoking abstinence.

Tobacco use also gets in the way of successfully managing a wide range of health conditions, such as hypertension, diabetes, wound care, COPD, behavioral health, other substance abuse, and osteoporosis just to name a few. Therefore, tobacco cessation is an essential clinical strategy to effectively attain the best treatment outcomes for our tobacco dependent patients.

### What can we do to help our patients quit tobacco use?

In reality, the overwhelming majority (over 70%) of tobacco dependent patients do have a desire to quit, but they need your help. As a physician, you can play a crucial role in their cessation process by

adopting the following simple strategies that work: 1) **Asking** every patient about their tobacco use and on every visit, 2) **Advising** your tobacco dependent patients that they need to quit smoking to ensure improved treatment outcomes and overall better health, and 3) **Referring** your patients to a program that can help them attain long-term tobacco abstinence.

### Quit tobacco with Group Quit.

There's never been a more important time to quit.

**In-Person Group Sessions**      **Virtual Group Sessions**

**Benefits:**

- **FREE** expert-led sessions.
- **FREE** nicotine replacement therapy such as patches, gum, or lozenges.\*
- Covers all forms of tobacco.
- Develop your personalized quit plan.
- More than **DOUBLES** your chances of success.

\*if medically appropriate for those 18 years of age or older

*Research has shown that physicians can make a major difference by spending just a few minutes discussing with their tobacco dependent patient the importance of quitting tobacco, as well as*

*providing them with information on the benefits of quitting and the services that they can easily access to help them quit.\**

When a patient is ready to start on their quit journey, they can be referred to a proven and free tobacco cessation program.

In this regard, **the Florida Osteopathic Medical Association strongly encourages all members to help their patients quit using tobacco and to refer them to *Tobacco Free Florida's Group Quit Program* provided statewide by the Area Health Education Centers (AHECs).** This program is available for free to all Florida residents aged 18 and up. Over 280,000 attendees seeking to quit using tobacco have already been served in all 67 Florida counties by the AHEC *Group Quit* Program since its inception in 2007. An independent evaluation performed annually by the Florida Department of Health has consistently deemed these AHEC services to be highly effective in helping smokers quit their dependence on tobacco. Over 2,000 health care providers have referred their patients to these services in the past two years alone.

### **How can our patients be referred to the AHEC *Group Quit* Tobacco Cessation Program?**

It is very easy to refer any adult tobacco dependent patient to your local AHEC. Referrals can be made by submitting (via fax or email) the [Health Care Provider Referral Form](#) or through the [Tobacco Free Florida Automated Referral Form](#), both available online.

Once referred, your patient will be contacted and enrolled into one of the many AHEC group sessions scheduled locally or virtually in every county of Florida. They will also learn about other options offered by Tobacco Free Florida, including individualized coaching provided through TFF's *Phone Quit* and *Web Quit* options. Regardless of the program your patient selects, they will be eligible to receive free nicotine replacement therapy (patches, gum, lozenges) to help them achieve tobacco abstinence. For more information on the TFF AHEC *Group Quit* Program, please visit <https://ahectobacco.com>.

### **How about electronic cigarettes or vapes?**

While vapes (also known as e-cigarettes) are considered to be less harmful than combustible cigarettes, they should not be deemed a safe alternative to smoking regular cigarettes or be used as a smoking cessation aid, as they have not been approved for such use by the FDA. The vapor inhaled into the lungs from these devices still contains nicotine and other harmful substances including heavy metals, organic compounds, carcinogens, and flavorings that can lead to inflammation, permanent scarring, and widespread damage of lung tissue. E-cigarette vapors have also been linked to an increased risk of heart and vascular problems, as well as deficits in brain development among adolescents. Therefore, patients who vape should be encouraged to quit using these devices to break their dependence on nicotine and avoid any potential health consequences. AHEC's *Group Quit* Program also addresses a wide range of tobacco products including e-cigarettes and other electronic nicotine delivery devices.

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\* Treating Tobacco Use and Dependence: Public Health Service (PHS) Clinical Practice Guideline. Content last reviewed December 2012. Agency for Healthcare Research and Quality, Rockville, MD. Available at: <https://www.ahrq.gov/prevention/guidelines/tobacco/systemclin.html>