

Smoker type 5: 52-year-old woman, recently had a 24-hour admission with 'chest pain' diagnosed as acid reflux

Nancy is a 52-year-old woman. She was recently admitted to hospital with chest pain that was diagnosed as acid reflux. She has been prescribed a PPI and has come to clinic to talk through her diagnosis with you. She has type 2 diabetes mellitus that is well controlled with diet and an oral antidiabetic agent; she has a BMI of 37. Nancy works as a personal assistant to an executive in a large financial company. Her 72-year-old husband died suddenly 12 months ago. Nancy has been a smoker since her early 20s and has indicated at previous visits that since her husband's death she wants to quit but has not felt ready. You decide to implement a VBA

ASK: "Are you still smoking Nancy?" Yes, but I think I might be ready to at least try and quit

ADVISE: "That's great. The best way to quit is with medication and support through our stop smoking service which many of my patients have found useful" **Can I just take the pill?** "You can, but the support you will get from the stop smoking service will improve the likelihood of you being able to quit and quit for good"

ACT: Ideally Nancy will be willing to go to the stop smoking service who can help her. If not, it is best to ask her to come back for a dedicated stop smoking appointment with you or someone else in the practice to go through all the treatment options, give her a prescription and follow her up while she tries to quit. At this next visit all the available treatments should be discussed, CO should be checked if possible, any prescriptions should be given and be of sufficient duration until the next scheduled visit. Ideally, there should be between 2 and 4 further follow-up visits over 2–3 months to provide support, encouragement and congratulations on success, check breath CO and prescribe further treatment. A final visit should also be planned for and arranged at which you can reassure that patient that the door is always open if they do go back to smoking and that they are welcome to come back for your help at any time. Nancy is quite highly dependent having smoked for around 39 years, currently smoking around 15 cigarettes each day with her first cigarette shortly after she wakes. She is likely to need significant support, as well as a choice from the full range of treatments. This can not be done properly as part of a review appointment for her reflux and she needs a dedicated appointment about stopping smoking. Record in Nancy's notes that **VBA** was performed, and a referral made to a **stop smoking service or to come back to discuss cessation properly**. Schedule a follow-up visit

Key resources:

- <http://www.ncsct.co.uk/usr/pub/NCST%20STP.pdf>
- <https://www.nice.org.uk/guidance/ng92/>
- <https://bnf.nice.org.uk/drug/varenicline.html>
- <https://www.theipcr.org/display/TreatP/Video+clips+and+link+to+Vimeo+channel>

Expert commentary:

Tobacco dependence is one of the most prevalent long-term conditions as measured by the UK GP Quality and Outcomes Framework (QOF) registers in 2017 at **15.1%** in comparison to hypertension **13.9%** and **Diabetes Mellitus 5.4%**.²⁵ Performing a **VBA** for smoking for all patients with chronic health conditions has the potential to instigate quit attempts in those most likely to benefit from stopping smoking. Nancy, while accepting **pharmacotherapy** to help with her quit attempt, was less accepting of **behavioural support**. Nancy's high BMI along with the other indicators of high dependence warrant a concerted effort to support Nancy to move to a more effective intervention with the addition of behavioural support.



PCRS Pragmatic Guides for Clinicians

Diagnosis and Management of Tobacco Dependency

Expert team: Darush Attar-Zadeh, Noel Baxter, Alex Bobak, Hazel Cheeseman, Rachael Hodges, Steve Holmes, Duncan Keeley, Andy McEwen, Oonagh Potts, Louise Restrick, Ailsa Rutter, Vicky Salt, Kamran Siddiqi, Hilary Wareing, Andy Whittamore, Siân Williams

In partnership with:



For more information & advice download the PCRS tobacco dependency pragmatic guide please go to <http://bit.ly/39F8OEx>

PCRS is grateful to Pfizer for providing an educational grant to support the work of the expert group and to develop this publication.

Publication date: 23 January 2019