



LEAVE THE PACK BEHIND

Campus-Based Brief Tobacco Intervention

Winter 2008
Volume 4

Special Interest:

- Tobacco use *still* a health concern on campus
- You can enhance smokers' odds of quitting
- Learn more about Champix (*varenicline tartrate*)

Contributors

Valerie Jaeger, PhD, M.D.
M Shick-Porter, RN BA(Com Nurs)
Kelli-an Lawrance, PhD
Sharon Lawler, RN, MEd

www.LeaveThePackBehind.org

Students Still Smokin' After All These Years

According to the Canadian Tobacco Use Monitoring Survey, the proportion of young adults using tobacco has crept up steadily over the past few years with 25%

of young adults now using tobacco. An anonymous, online survey completed by 6,736 university students and 1,737 college students in Ontario revealed that 22%

of university students and 33% of college students smoke at least occasionally. Clearly, tobacco remains one of the determinants of students' current and future health.

Smoking Cessation Assistance

Many university and college students use the services of their campus health clinic. Among the Ontario students completing the online survey, it was determined that less than half recalled being asked by their campus healthcare provider about tobacco use. In a separate study of physicians working in Ontario university campuses (Lawrance & Lawler, 2008), 20% of doctors reported asking all or almost all of their

patients about tobacco use; while 25% asked fewer than half. Describing how they responded to patients identified as smokers, 96% of physicians said they advised cessation, 72% offered assistance, and 64% arranged for follow-up. Pharmaceutical and nicotine replacement therapies were rarely offered to patients wanting to quit.

BARRIERS. It can be tempting to forego

opportunities to offer cessation support if you're worried about patient resistance, or time constraints. But, there is robust evidence to show even a *brief* intervention by a physician significantly increases smokers' odds of successfully quitting (USDHHS). Furthermore, most students who smoke want to quit; they trust the advice of campus health professionals; and they believe professionals can provide the help they need to quit.

Got A Minute?

You can make a genuine difference to your young adult patients who smoke. Take less than 1 minute in every patient visit to make these CDC clinical guidelines part of your standard of patient care.

- 1** ASK every patient about their tobacco use
- 2** ADVISE every smoker to quit smoking
- 3** ASSIST by offering LTPB's 'Clinic Package'
- 4** ARRANGE a follow-up visit or make a referral

After Asking & Advising... Something New To Offer



University students are quite amenable to using pharmacological aids to help them quit smoking. In the past, nicotine replacement therapy and Zyban have been the mainstays of pharmacotherapy for tobacco cessation. Now, a new medication varenicline tartrate, marketed under the trade name **Champix**, has added another dimension to clinicians' pharmacopeia.

In clinical trials, Champix was more effective than Zyban while having fewer contraindications or drug interactions. Champix can be used with a wide range of students with caution for patients with renal disease. The side effects profile is generally benign, but discontinuation symptoms may occur when treatment ends. (See "Potential Side Effects," below).

How Does Champix Work?

Champix acts as a partial agonist of nicotinic acetylcholine receptors while simultaneously preventing nicotine binding. Because of this dual action, Champix: (1) Prevents cravings by releasing enough dopamine, and (2) Eliminates the pleasurable rush following the first few drags of a cigarette by blocking the access of nicotine to the nicotine receptors. As a

result, smokers who use Champix report cigarettes seem less pleasurable and appealing.

As with any medication, risks and benefits must be balanced. Given that 2 studies show quit rates of 22% and 44% respectively, Champix is certainly worth considering as one strategy that could help your student patients quit smoking!

Potential Side Effects

Side effects to watch for include: nausea; abnormal dreams; constipation; and vomiting.

Nausea may be decreased by drinking a large glass of water with the medication. Tapering the dose at the end of the 12-week

treatment cycle may be necessary to decrease the 3% incidence of discontinuation symptoms such as irritability, urge to smoke, depression, and insomnia. Champix should not be used in conjunction with nicotine replacement therapy.

Find out more

LTPB offers Continuing Health Education that is accredited by the Canadian Association of Physicians. *To schedule a CHE for your clinic, contact LTPB: 905.688.5550 x.4992*

References

USDHHS. Treating Tobacco Use and Dependence Clinical Practice Guideline. <http://www.ncbi.nlm.nih.gov/books/bv.fcgi?rid=hstat2.chapter.7644>
 CTUMS Annual Report. http://www.hc-sc.gc.ca/hl-vs/tobac-tabac/research-recherche/index_e.html
 Lawrence, K. & Lawler, S. (2008). Campus physicians' tobacco interventions with university students. *Patient Education and Counseling*, 70, 187-192.

How is Champix Used?

- Set a quit date with the student
- 1-2 weeks prior to quit date, Start Champix at 0.5mg bid
- After the first week, increase dose to 1.0mg bid as tolerated
- Continue therapy for 12 weeks

