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September XX, 2008

NAME
Address
City, Texas ZIP

Dear _____,

The city of Tyler's smoking ban recently took effect, and it presents a great opportunity for physicians to help truly clear the air with a focus on prevention, wellness and smoking cessation.

The Texas Academy of Family Physicians (TAFP) is proud to be a part of the Texas Coalition for Worksite Wellness (TCWW), one of the state's leading voices on health care and business issues with its mission to manage rising health care costs by improving the health status of the Texas workforce. We recognize your recent municipal ban as a prime opportunity to promote a key component of preventive health care—smoking cessation.

As a physician, you know the impact that smoking has on one's health. What you might not know is that an estimated 70 percent of smokers say they want to quit, and each year 30-50 percent of smokers try to quit. Without assistance, only 3 to 5 percent of smokers are successful, but you could help make all the difference.

TAFP encourages you to use the recent ban as a conversation starter to proactively speak with your patients about treatment options to quit smoking. To this end, we have assembled a toolkit to help you communicate with your patients. The resources include:

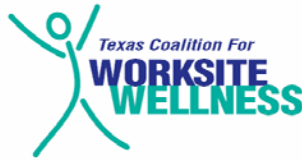
- TCWW Fact Sheet on the updated U.S. Public Health Service Clinical Practice Guidelines
- 5A's Quick Guide from the Texas Department of State Health Services
- TCWW listing of smoking cessation resources for your patients

I hope you will find the materials useful. Should you have any questions, please feel free to contact info@txworksitewellness.org. For more information on helping your patients quit, please visit <http://www.ahrq.gov/clinic/tobacco/clinhlpsmksqt.pdf>.

Sincerely,

A handwritten signature in black ink that reads "Tom Banning" with a long, sweeping underline.

Tom Banning
Chief Executive Officer and Executive Vice President



QUIT SMOKING RESOURCES FOR YOUR PATIENTS

Department of State Health Services

Done in conjunction with the American Cancer Society, the toll-free multi-lingual telephone counseling service, at 1-877-YES-QUIT (877-937-7848), is available to all Texans trying to quit smoking. Resources and information to help people quit tobacco use also are available online at www.yesquit.com.

American Lung Association

The American Lung Association's "Freedom From Smoking" campaign is its premiere smoking cessation program offered online. The program provides smokers the help they need to quit in a supportive group setting.

<http://www.ffsonline.org/>

National Alliance for Tobacco Cessation: EX Campaign

An alliance of states, public health organizations, nonprofits, foundations and companies dedicated to helping people quit smoking. It was based on a site called SmokeClinic and includes information from experts from the Mayo Clinic. The main page is www.becomeanex.org. Specific patient materials can be found through the following link:

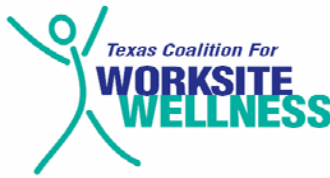
<http://www.becomeanex.org/pdf/becomeanEXbook.pdf> .

My Time To Quit

MyTimeToQuit.com is a Pfizer-sponsored website that provides resources designed to encourage and provide support to motivated quitters.

<http://www.mytimetoquit.com>.

The Texas Coalition for Worksite Wellness is one of the state's leading voices on health care and business issues with its mission to manage rising health care costs by



US Public Health Service (PHS) Clinical Practice Guideline *Treating Tobacco Use and Dependence: 2008 Update*¹

Approximately 20 percent of the US population smokes, and more than 70 percent of smokers say they want to quit.² However, many smokers lack the support needed to be successful, and most are not aware of the tools and treatments available to help them succeed. This updated Guideline is designed to provide health care professionals, payers and others with evidence-based recommendations for smoking cessation treatments that increase the likelihood of a successful quit attempt.

Highlights of *Treating Tobacco Use and Dependence: 2008 Update* include:

Tobacco Dependence

Tobacco dependence is increasingly recognized as a chronic disease that requires ongoing assessment and repeated intervention. Health professionals must consistently identify, document, and treat all tobacco users within the health care setting

Treatment/Intervention

Clinicians should encourage all individuals making a quit attempt to engage in both counseling and medication treatments

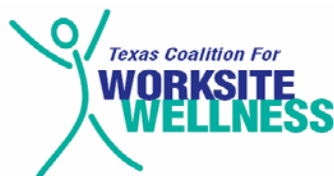
- There is an addition to the list of first-line effective medications for smoking cessation, allowing clinicians and patients several medication options
- Individual, group, and telephone counseling are effective, and their effectiveness increases with treatment intensity

Insurance Coverage

Tobacco dependence treatments are both clinically effective and highly cost-effective, relative to interventions for other clinical disorders. Insurers and purchasers should ensure that all insurance plans include effective counseling and medication as covered benefits

For more information on *Treating Tobacco Use and Dependence: 2008 Update*, visit www.surgeongeneral.gov/tobacco.

2008 Update Sponsoring Organizations: *US Public Health Service; Agency for Health Care Research & Quality; US Centers for Disease Control & Prevention; National Heart, Lung, and*



Key Findings and Recommendations From *Treating Tobacco Use and Dependence: 2008 Update*³

1. Tobacco dependence is a chronic disease requiring repeated intervention and multiple quit attempts.
2. It is essential that all tobacco users are consistently identified, documented, and treated within the health care setting.
3. Tobacco dependence treatments are effective across many populations, and clinicians should encourage willing patients to use these treatments.
4. Clinicians should offer every tobacco user at least brief treatments to help them quit.
5. Individual, group, and telephone counseling are effective, and their effectiveness increases with treatment intensity. Clinicians should encourage both practical (problem-solving/skills training) and social support counseling when helping patients quit.
6. Many effective medications for tobacco dependence exist, and clinicians should encourage their use by all patients attempting to quit, except when medically contraindicated or with specific populations where insufficient evidence of effectiveness is available.
7. Clinicians should encourage use of counseling and medication for treating tobacco dependence, which have been shown to be more effective in combination than alone.
8. Telephone quitline counseling has been shown to be effective. Clinicians should encourage patients to access and use these resources.
9. For tobacco users unwilling to quit, clinicians should use proven motivational treatments to increase future quit attempts.



5A's QUICK GUIDE

Helping tobacco users willing to quit

ASK about tobacco at every visit

- ***“Do you currently use tobacco?”***
- **Document tobacco-use status using these tools: Vital Signs Stickers**

ADVISE all tobacco users to quit

- ***“As your health care provider, I strongly advise you to quit.”***
- ***“The single most important thing you can do to protect your health is to stop smoking, and I can help you.”***

ASSESS patient's willingness to quit

- ***“Are you ready to make a quit attempt in the next 30 days?”***
- **If “yes,” proceed to the next step: ASSIST**

ASSIST patient in quitting

- **Set a quit date and form a quit plan. Give patient this tool: *Yes, I'm Ready to Quit***
- **Use Fax Referral Form to initiate Quitline counseling process.**
- **Enlist support of family, friends, co-workers.**
- **Anticipate challenges and triggers.**
- **Give patient this tool: Quick Tips Rx for Staying Smoke Free**
- **Review lessons from past quit attempts.**
- **Prescribe appropriate pharmacotherapy unless contraindicated.**
- **Consult these tools: *Pharmacotherapy Quick Guide, Treating Tobacco Use and Dependence***

ARRANGE follow-up

- **Schedule phone or office visit, preferably within the first week after patient's quit date.**
 - **Congratulate success**
 - or
 - **Review circumstance that caused lapse**
 - **Ask for recommitment to total abstinence**
 - **Consider referral to more intense treatment**
- **Assess pharmacotherapy use, and revise or combine as necessary.**

For telephone counseling: 1-877-YES-QUIT

For referrals to community resources: 1-800-ACS-2345

For Web information: www.cancer.org