Kicking the Habit: Smoking Cessation In An Elderly Population
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Abstract
Adverse effects of tobacco smoke increase with age from cumulative toxicity. Cessation reduces smoking-induced disease, even among the elderly. Atomic Energy Commission (AEC) workers in Iowa—Ames Laboratory and in the Iowa Army Ammunition Plant (IAAP)—are at risk for occupational-related lung diseases such as pneumoconioses and cancer. Smoking may dramatically increase their risks. This project explores the interest of an elderly at-risk population in smoking cessation and the effectiveness of providing cessation resources through phone support and physician counseling. Telephone interviews were conducted of 119 Former Worker Medical Screening Program participants who are current smokers and Iowa residents. Participants were offered cessation information and resources, including a call from a physician to discuss smoking cessation medications. Interested participants were mailed information packets. Follow-up calls were made to 26 participants for further evaluation of the intervention.

Table 1: Age and gender of smokers and nonsmokers

<table>
<thead>
<tr>
<th>Gender</th>
<th>Smokers</th>
<th>Non-smokers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
<td>72</td>
<td>28</td>
</tr>
<tr>
<td>Females</td>
<td>47</td>
<td>48</td>
</tr>
</tbody>
</table>

Demographics

Graph 1: Education of smokers and nonsmokers

Graph 2: Ex-smokers’ successful quit methods

Methods

- 126 (IAFP)
- 17 Ames Lab FW
- Phone interviews were utilized with the following goals:
  - Confirm smoking history
  - Determine number of patients who quit smoking since first screening and physician recommendation.
  - Determine interest level in quitting
  - Mail information packages with cessation resources
  - Other physician counseling re: medications

Additional information collected

- Current smokers:
  - Quit attempts since FFP screenings
  - History of previous quit attempts
  - Desire to quit
  - Reason for quitting
  - Successful quit method

Follow-up phone calls

- Check if participant reaction to information packet
- Determine success of intervention

Results

- 109 out of 143 were successfully contacted and interviewed
- 91/109 considered themselves ex-smokers (see Graphs 2-4)
- 66.2% smoking but continue to use tobacco products (chew, socially smoke, etc.)
- 2/29 quit since first screening
- 70/109 continue to smoke since their first screening
- 40 tried to quit since screening (see Graph 5)
- 20 more have tried to quit at least once before (see Graph 5)
- 44/66 reported successful quit attempts for some period of time (either quit or cut back).

Discussion

- Demonstrating physician interest in tobacco cessation was an important feature of this project. Proactively offering cessation resources rather than waiting for patients to ask is an effective way to reach elderly smokers and encourage them to quit.

Conclusions

This geriatric population showed significant interest in smoking cessation. We will continue investigating the effectiveness of ex-smoker participant follow-up. Physician contact and counseling can be an effective way to reach elderly smokers and encourage them to quit.

References


Table 3: Smoking History

<table>
<thead>
<tr>
<th>Age began smoking</th>
<th>Cigarettes smoked</th>
<th>Pack years</th>
<th>Cough in day</th>
<th>Other</th>
<th>Nonsmokers</th>
<th>Smokers</th>
</tr>
</thead>
<tbody>
<tr>
<td>18.9</td>
<td>22/1022</td>
<td>43.5</td>
<td>211.5</td>
<td>4.5</td>
<td>5.1</td>
<td>9.8</td>
</tr>
</tbody>
</table>

Follow-up calls

- Check if participant reaction to information packet
- Determine success of intervention

Graph 3: Ex-smokers’ reasons for quitting

Graph 4: Ex-smokers’ reasons for quitting

Graph 5: Current smokers previous quit attempts

Conclusions

This geriatric population showed significant interest in smoking cessation. We will continue investigating the effectiveness of ex-smoker participant follow-up. Physician contact and counseling can be an effective way to reach elderly smokers and encourage them to quit.