Smoking Cessation 2017: Patient Experience

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Outline

- Introduction
 - Bio
 - Passion for smoking cessation
- Smoking Cessation pilot
 - Reason for pilot
 - Outline of pilot
- Results of Pilot
- Patient experience approach
 - Convincing the patient
 - Engagaing the patient
 - Aftermath
- Conclusion
- Questions

Introduction: Bio

- Born in Saint Paul, MN
- University of Saint Thomas for undergraduate
- Des Moines University for Medical school
- Davenport, IA Family Medicine residency
- Centracare Big Lake Clinic since 2011



Introduction: Passion for Smoking Cessation

A doctor that used to smoke....AHHHH!!!!

My Quit Attempts

- Zyban
 - Helped with anxiety maybe.
 - Cigarette taste.
 - Early 20's and had side effects that did not coincide with being a single 20 y/o male... enough said!

My Quit Attempts: Continued

- Nicoderm CQ
 - Positive
 - Easy
 - Curved some cravings
 - Negative
 - Easily forgotten
 - Nothing for acute cravings or triggers
 - Lack of assistance with physical dependence

My Quit Attempts: Continued

- Nicorette Gum
 - Great to curve acute cravings
 - Used it wrong
 - Easy to override
 - Easily forgotten

My Quit Attempts: Chantix

- Started in 2007
- Samples
- Continued to smoke the first 4-6 weeks
 - Taste got worse
- Routine of buying still got the best of me
 - One and done

My Quit Attempts: Chantix

- Realization the waste
 - Set quit date
- Continued to struggle with cravings
 - Addition of Nicorette gum
- Extended course to about 5 months

My Quit Attempts: Chantix

- Side effects
 - Nausea
 - Dreams

My Quit Attempts: The Aftermath

- Still struggled with cravings
 - Able to curve on my own until.....
- Busy surgery week
 - Caved and almost relapsed
 - E-cigarette savior

My Quit Attempts: The Aftermath

- NRT with me
- 18 months later
 - Cravings began to ease up
- 2 years later till now

Passion for smoking cessation

- Strong family history of early heart disease
 - Paternal Grandfather
 - Uncles X 3
- One person I could not convince

Passion for smoking cessation translated to need at clinic

Big Lake smoking Pilot: Why?

- 21% of the patient population were active tobacco users vs 14% across health system
- If diabetics quit smoking would have been at 86% optimal care
- Clinic and community outreach for healthier community



Smoking Pilot: initiation

- Financial support from Centracare
 - Grant
 - Waving patient Copays
 - Marketing
 - Patient information
 - CO Monitor
 - Chantix Samples



Smoking Pilot: Initiation

- Education (Extended lunch meeting)
 - Staff education
 - New Work flows (Goal to make as least intrusive as possible on regular work flow)
 - Screening questions (pre-contemplation vs contemplation)
 - Enrolling and tracking patients
 - Provider education
 - Smoking cessation options
 - Coding and billing

Smoking Pilot: initiation

- Clinic Marketing
 - Visual Cues
 - Exam rooms
 - Lobby
 - Hallways
 - Vitals room
 - Bathroom ***
 - Quit plan cards

Smoking Pilot: Walk Through Day 1, Staff

- Staff initiate questions on quitting
 - Assess readiness to quit
- Pre-arranged Packet given
 - If in the contemplation or precontemplation stage
 - Folder with resources on quitting, workbook, and hand picked references

Smoking Pilot: Walk Through Day 1, Staff

- Start tracking form
 - Follow up appointments
 - Insurance information
 - Smoking cessation option
 - Quit date

Smoking Pilot: Walk Through Day 1, Staff

- Quit line referral
 - Information in packet
 - Card given to patient
- Prize for choosing to quit
 - Water bottle

Smoking Pilot: Walk Through, Provider, Day 1

- Smoking cessation options
 - NRT
 - Zyban
 - Chantix
 - Side Effects
 - Patient Fears
 - Dual nicotine therapy
 - Pick based on patient dependence

Smoking pilot: Walk through, Provider Day 1

- Financial cost to patient
 - Appropriate billing
 - Time based billing
 - Smoking cessation codes
 - Therapy cost...
 - Samples If needed
 - Paid for NRT

Smoking Pilot: Walk Through Provider Day 1

- Describing follow up and scheduled follow up
 - 1 week, then every 2 weeks until quit, then monthly
 - Follow up even if have not quit
 - Follow ups dedicated to smoking cessation alone

Smoking Pilot: Walk through Follow up Appointments, Staff

- More references patient focused
 - Barriers to quitting specifics
 - Smoking cessation tool references
 - Financial Barriers addressed if needed
 - Quit plan referral again
 - Other tech tools such as phone apps
 - Review work book

Smoking Pilot: Walk through Follow up Appointments, Staff

- Up dating tracking form
 - Follow up appointments
 - Insurance information
 - Smoking cessation option
 - Quit date
- Recording data and results (nurse manager)

Smoking Pilot: Walk through Follow up Appointments, Staff

- Calling for follow up
 - Phone calls to patients enrolled for follow up appointments and reminders
 - Call for continued encouragement
 - Phone calls to those that "fell off"

Smoking Pilot: Follow up, appointments Providers

- Continued weekly/every other week follow ups
 - Reiterating ok if not quit yet
 - Follow up every week until quit then switch to every 2 weeks
 - After a few weeks of not smoking switch to monthly
 - When patient comfortable wean therapy and follow up a few times if needed

Smoking Pilot: Follow up, Appointments Providers

- Barriers to quitting
 - Triggers (coffee)
 - Places (casino)
 - People (other smokers)
- Adjust therapy if needed
 - Addition of NRT To Chantix if continue to smoke
 - Change NRT

Smoking Pilot: Follow up, Appointments Providers

- Check side effects
 - Change NRT
 - Low dose Chantix
- Continued encouragement and reassurance

Smoking Pilot: Follow up, Appointments Providers

- Continued smoking while on Chantix
 - Ok up till about 4 weeks
 - Over ride the effects of the Chantix if smoke beyond 6-8 weeks
 - Addition of NRT becomes very important and will curve the craving and lead to greater success

Smoking Pilot: Walk through, End

- Those who continue on NRT
 - Weaning off vs continuing
 - How long to keep on NRT?
- Those who continue on Chantix
 - Continuing vs Stopping
 - or continue long term
 - Weaning the medication vs discontinuing cold turkey

Smoking Pilot: Walk through, End

- Avoiding relapse
 - Greatest fear "that one cigarette"
 - Keeping NRT in close proximity for 1 year at least

Smoking Pilot: Walk through, End

- Certificate of success
 - Signed by entire clinic
- Follow up for rechecks
 - Sometimes helpful....maybe

Pilot result

- Between 8/1/2015 to 5/31/2016
- Total of 100 patients enrolled
- 74 total scripts given (contemplation)

Pilot Result

- 7 total patients successful completion (9.5%) at end of pilot
- At end of pilot 12 patients remained active
- 4 more patients successfully completed after pilots end (14.9%)
 - 8 unaccounted for
 - If all 8 quit (25.6%)
 - If only 1 quit (16.2%)

Pilot Results: Provider Results

- Provider 1: 2 active out of 13 enrolled (15%)
- Provider 2: 8 active (5 success during 3 success after end) out of 26 enrolled (31%)
- Provider 3: 4 active (2 success) out of 24 enrolled (17%)
- Provider 4: 7 active (1 success after end) out of 35 enrolled (20%)

Pilot Results: Pitfalls

- Out of the 74 Rx given 55 patients (74.3%) became inactive
- 25/26 patients engaged at pre-contemplation stage declined follow up appointment (1 pending)
- 57 no shows out of 94 total smoking cessation appointments (60% no show rate)

Keys to success...

Patient Experience focused

- All smokers at some point have contemplated quitting and most want to quit
- What is their motivator for quitting
 - Keep focus here on there quit attempt
 - Keep reiterating the importance of this motivator
- Find there fear of quitting and address this
 - Make it so that fear goes away

- Health concerns for most not convincing
 - Even telling a guy about increase risk in penile cancer..."so what"
 - Some will respond to increase risk of other illness other than respiratory effects
 - 10 year cardiac risk calculator

- Financial savings more convincing especially if quitting is "free"
 - My experience with stopping gambling and smoking cessation
 - Insurance reduction
 - Life insurance costs
- Importance of family (Grandkids)

- Find there fear in quitting and convince not to be scared
 - "Smoking keeps me sane" (smoking makes more depressed/anxious)
 - "Cant do it why try" (average attempts to quit)
 - Medication side effects (chantix)
 - Need something in my hands (inhaler/gum)
 - Triggers (avoid them if need be)

Patient experience approach: engaging the patient

- Start cessation program with cessation mechanism of there choice
 - Give them power and control
 - NRT (nicotrol inhaler)
 - Dual NRT (Patch plus...)
 - Chantix
 - Zyban
 - Others

Patient experience approach: engaging the patient

- Make sure they follow up
 - Come back even if not quit
 - Schedule appointment in the room
 - Call backs
 - Brain storm any idea!!!!

Patient experience approach: engaging the patient

- Address side effects to medications
 - Chantix and dreams (adjust dose)
 - Eat with the medication if nausea
 - Change NRT

- Not expected to quit in 1st, 2nd, 3rd follow ups
 - Reiterate how hard quitting is and cessation not expected in first few weeks
 - They are not alone as most people do not quit with in first few weeks

- Encouragement of even small amounts of reduction in tobacco use
 - Got to crawl before you can walk
 - "Most people have not done this much so you are ahead of the curve"

- Continue to focus on reasons why they choose to quit
 - Money savings so far
 - Heath benefits
 - Sense of smell
 - Taste
 - Family members

- Several weeks in and continue to smoke
 - Encourage continued reduction
- Concern of overriding chantix
 - About week 4-6
 - Addition of NRT
- Changing NRT
 - Find out what trigger is and adjust based on this

Patient experience approach: Side effects

- Can be very discouraging
 - Extremely common cause on why patient stop cessation program
- Adjust meds
 - Low dose chantix
 - Change NRT
- Weight gain
 - Exercise
- Medication cost
- Office visit cost

Patient Experience Approach: The Aftermath

- Duration of therapy
 - Chantix over 6 months?
 - Continued NRT?
 - Stop cold turkey

Patient Experience Approach: The Aftermath

- Success when addition of other life style modifications
 - Exercise is one of the best ways to avoid relapse
 - Dietary changes
 - Alcohol reduction
 - Avoidance of possible problematic triggers such as casino

Patient Experience Approach: The Aftermath

- Desire never goes away
 - First year the worse
 - Second year and on becomes much easier
- Avoid Relapse
 - "greatest fear should be that one cigarette"
 - Keep NRT close

Conclusion

- Isolate there fears and conquer them
- Empower your patient as much as possible
- Importance of follow up
- Follow up even if you have not quit
- Also encourage and focus on the small things
- Reiterate the patients motivation
- Chantix with NRT and dual NRT
- Avoid that one cigarette

Questions?!?!?

Thanks!