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On the Front Line of Smoking Cessation: Practices and Perceptions of Canadian Community Pharmacists

BACKGROUND

Now that nicotine replacement therapy (NRT), in the form of gum and patches, is sold in Canadian pharmacies without prescription, pharmacists may be the first or only health professional smokers consult when using this method to quit smoking. This circumstance puts pharmacists 'on the front line' with regard to smoking cessation. There have been few previous studies of the readiness of community pharmacists to take on the role of counselling patients about smoking cessation, and none have been carried out in Canada. This study surveyed Canadian pharmacists, asking about their knowledge of smoking cessation and the use of NRT, their attitudes about performing professional roles with respect to cessation, and their current practices in advising patients about quitting smoking.

METHOD

Practising community pharmacists in Ontario, Quebec, Saskatchewan, and Prince Edward Island were contacted by mail to survey their educational background and knowledge, practice setting, attitudes toward tobacco use and smoking cessation, perceptions of pharmacists' tobacco-related roles, practices with patients who smoke, perceived factors that facilitate counselling patients about smoking cessation, and personal smoking behaviour. Provinces were chosen to give a range of population smoking rates, geographical distribution, and provincial policies regarding tobacco sales in pharmacies. A total of 1636 questionnaires were distributed in the fall of 2002.

RESULTS

The final corrected response rate was 72%, giving a total weighted sample size was 960 eligible respondents. Approximately 56% of respondents were female. On average, respondents had been practising community pharmacy for 16.6 years, with durations ranging from 1 year to 55 years; 4.4% were current smokers of cigarettes and 2.4% used other forms of tobacco once a month or more. A total of 6.2% used any form of tobacco once a month or more.

Knowledge and educational needs:

- A majority of pharmacists reported "good" or "excellent" knowledge of the health effects of smoking. A majority also reported "good" or "excellent" knowledge of the use of NRT and bupropion for smoking cessation.
- Fewer than half reported this level of knowledge with respect to behavioural approaches to smoking cessation, behavioural techniques for quitting, making appropriate referrals, and following up on patients' quit progress.

- More than 90% of respondents indicated that additional information or training on behavioural techniques for quitting smoking would be “extremely” or “somewhat” helpful; a similar number would like additional information or training on motivating patients to quit smoking.

Perceptions of pharmacists’ roles:

- Fewer than half of respondent pharmacists reported that it is important for pharmacists to ask patients if they smoke, assess patients’ dependence on nicotine, and assess patients’ readiness to quit. However, more than 90% agreed that advising patients about the use of NRT for quitting is an important role for pharmacists.
- More than 60% of respondents reported that it is important for pharmacists to advise patients about the use of bupropion, give patients advice or brief tips on quitting, counsel patients on behavioural techniques for quitting, and refer patients to a physician, cessation program, or quit line for help in quitting.

Current practice with smokers:

- Only 14% of respondent pharmacists reported that they ask half or more of their new patients whether they smoke. However, when pharmacists know that patients smoke, a majority of them advise half or more of smokers to cut down or quit. In more than half of smokers they also attempt to increase patients’ motivation to quit, and suggest the use of NRT.
- Less than half of respondents reported that they counsel half or more of known smokers on behavioural techniques for quitting, give pamphlets on quitting to half or more of known smokers, refer half or more of these patients to a physician for help with quitting, or follow up on quit progress with half or more of these patients.
- Fewer than 20% of pharmacists refer half or more of smokers to a smoking cessation program or quit line.

Factors facilitating smoking cessation practice:

- More than 85% of respondents reported that their own knowledge and skills are “very” or “somewhat” important in facilitating their own smoking cessation practice, and a similar proportion reported that patient interest in quitting facilitates practice.
- In addition, opportunities for patient interaction such as NRT purchase or dispensing a prescription for bupropion, facilitate pharmacists’ practice in helping patients quit.
- A majority of respondent pharmacists reported that smoking cessation practice is facilitated by pharmacy factors such as: an adequate supply of smoking-related pamphlets in the pharmacy; location of NRT products in view of the dispensing area; designated counselling space in the pharmacy; support staff in the pharmacy; time designated for patient counselling.
- Other factors such as community resources, computer reminder prompts, laminated flow charts, and specific reimbursement for time spent counselling patients were seen as very or somewhat important facilitators by only a minority of pharmacists.

DISCUSSION

Canadian community pharmacists do not appear to be pro-active in asking patients whether they smoke, but, when they know that a patient smokes, they advise about the use of NRT and give brief advice regarding quitting smoking. Pharmacists are less likely to be knowledgeable about behavioural techniques for quitting smoking than they are about pharmacological approaches, and they would like more education about behavioural approaches. Pharmacists’ reported practice in smoking cessation is

consistent with their reported knowledge and educational needs, and with the importance they attach to their possible roles in smoking cessation. That is, advising patients about pharmacological approaches is perceived as very important by a great majority of pharmacists. Increasing pharmacists' practice in smoking cessation should involve education and training to increase smoking-related knowledge and skills, and the enhancement of environmental factors in the pharmacy that support smoking cessation counselling. As well, steps should be taken to enhance the perceived importance of pharmacists' roles in smoking cessation, both among pharmacists and the public.

Investigators: OTRU staff who worked on this project were Mary Jane Ashley (Principal Investigator), Joan Brewster (Project Director), Charles Victor, Roberta Ferrence, Joanna Cohen, and Rachel Dioso. Claudine Laurier of the Faculté de pharmacie, Université de Montréal was a co-investigator.

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More information: on this study is available in the following articles:

Brewster, Joan M., Ashley, Mary Jane, Laurier, Claudine, Dioso, Rachel, Victor, Charles, Ferrence, Roberta, Cohen, Joanna. On the front line of smoking cessation: Canadian pharmacists' practices and self-perception. Canadian Pharmaceutical Journal, 2005 (April), 138(3): 32-38.

Brewster, Joan M., Victor, J. Charles, Ashley, Mary Jane, Laurier, Claudine, Dioso, Rachel, Ferrence, Roberta, Cohen, Joanna. On the Front Line of Smoking Cessation: Education needs of community pharmacists. Canadian Pharmaceutical Journal, 2005 (April), 138(3): 26-31.

Brewster, Joan M. Exploring links between pharmacy and public health. Canadian Pharmaceutical Journal, 2005 (April), 138(3): 23, 25. (personal perspective)

Brewster, Joan M., Ashley, Mary Jane. On the front line of smoking cessation: Survey and workshop for faculty. Canadian Pharmaceutical Journal, 2005 (April), 138(3): 24-25.

This special issue of the Canadian Pharmaceutical Journal also contained the following editorials on the role of pharmacists in smoking cessation:

Thompson, Polly. Sharing your expertise – it's in you to give. Canadian Pharmaceutical Journal, 2005 (April), 138(3): 7.

Hudmon, Karen S. Invest 30 seconds per patient. Canadian Pharmaceutical Journal, 2005 (April), 138(3): 9.

All the above articles may be accessed on line through the table of contents of the journal at: http://www.pharmacists.ca/content/hcp/resource_centre/cpj/cpj_apr05.cfm

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