

Smoking cessation strategies within Specialist In-patient Rehabilitation

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Introduction:

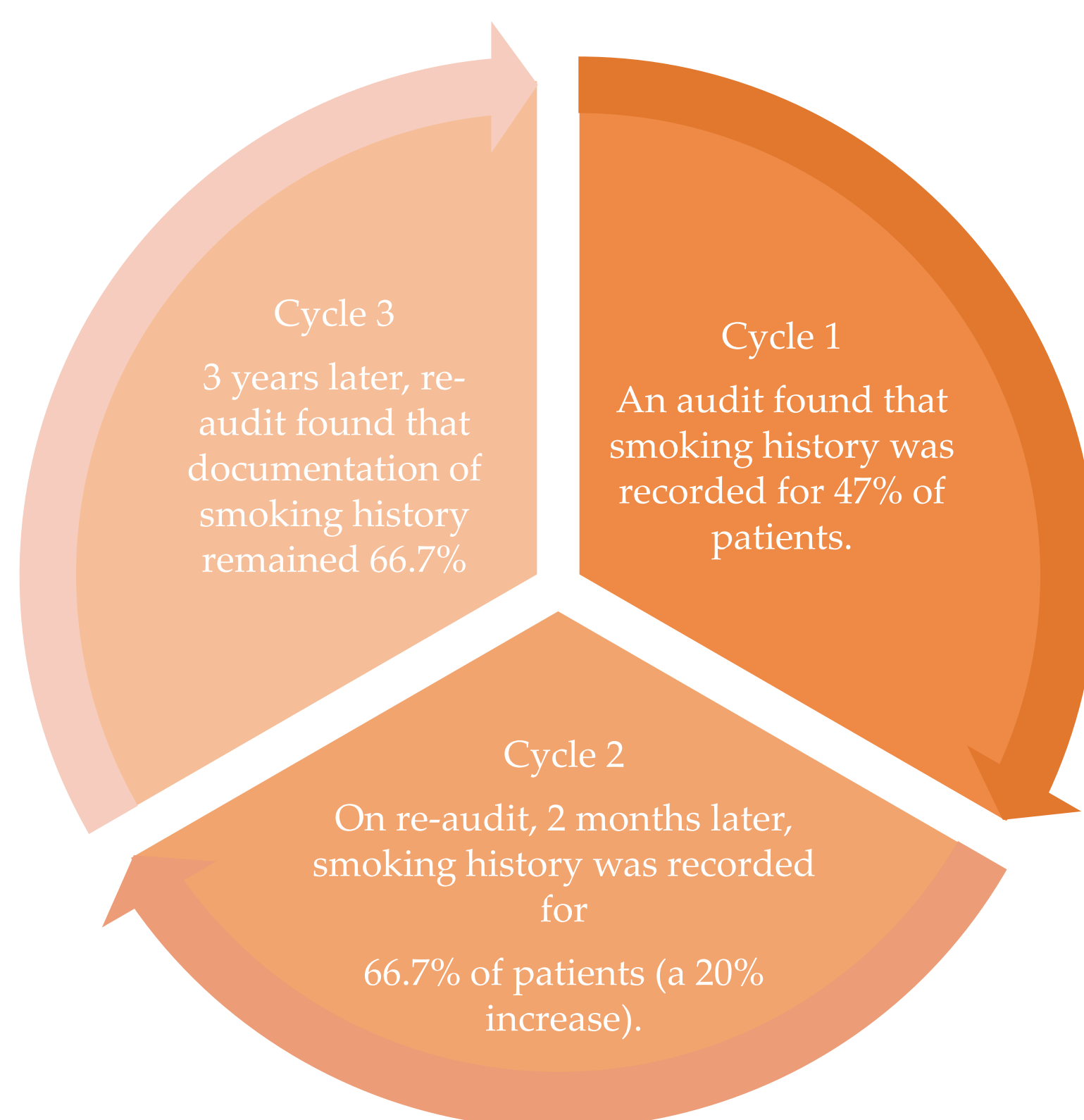
- Smoking confers increased risk of (non-accident associated) neurological events and limb loss, adversely affects overall fitness, and ability to participate in physical rehabilitation.
- Nicotine and tobacco is associated with increased perception of pain and low mood [1].
- In-patient rehabilitation offers an opportunity to introduce smoking cessation.

Objective:

The project sought to address by introducing consistent identification of smokers and novel ways to introduce smoking cessation.

Methodology:

A prospective review of clinical records was undertaken at intervals over a 3-year period, noting whether smoking history was recorded on admission to rehabilitation.



A mnemonic was introduced (**SMOKING**), to establish a standardized approach.

Interventions:

- After the 1st cycle, email reminders were sent to ward doctors and posters were left at work stations to emphasize the importance of identifying patients with a current or recent smoking history.
- On identifying smokers, smoking cessation leaflets were supplied and a referral was made to the smoking cessation trained pharmacist.
- After the 3rd cycle, a mnemonic was introduced, which sought to take unique and an inter-professional approach.

Conclusion:

Specialist rehabilitation offers a unique opportunity to address lifestyle factors, which can increase risk of ongoing vascular disease.

Reference:

1. Khan JS, Hah JM, Mackey SC. Effects of smoking on patients with chronic pain: a propensity-weighted analysis on the Collaborative Health Outcomes Information Registry. *Pain*. 2019 Oct;160(10):2374-2379. doi: 10.1097/j.pain.0000000000001631. PMID: 31149975; PMCID: PMC6768701.

