

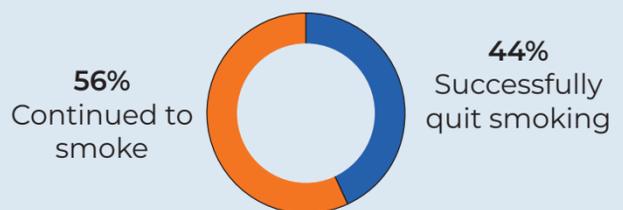
Offering Smoking Cessation Treatment to Cancer Patients

Among adults ever diagnosed with cancer:

36% are former smokers
12% are current smokers

Source: 2020 National Health Interview Survey

Among adult cancer survivors who smoke:



Source: 2017 National Health Interview Survey

Patients with cancer may experience benefits when they quit smoking

- Decreased postoperative pulmonary complications
- Enhanced recovery after surgery
- Increased response to chemotherapeutic medications and radiation
- Reduced risk of secondary cancers or cancer recurrence
- Reduced risk of mortality due to other causes, such as heart disease, non-cancer pulmonary disease, and stroke

Patients with cancer are not consistently assessed for tobacco use or offered smoking cessation treatment in the cancer care setting

While more than **70%** of oncology care clinicians assess for tobacco use at intake, **less than half** recommend or arrange smoking cessation treatment or follow-up after a quit attempt. Less than **30%** of clinicians report having adequate training to provide cessation intervention.

Clinicians and health care systems can implement strategies to provide equitable access to smoking cessation treatment

- Implement decision-support tools where patients are automatically enrolled and must opt out if they do not wish to receive smoking cessation services within the clinical practice
- Promote the use of treatment extenders, such as eReferral to state quitlines during cancer care visits
- Emphasize to providers the safety and efficacy of smoking cessation treatment options
- Provide support and behavioral interventions that address patients' feelings of cancer-related stress



Offer counseling and FDA-approved smoking cessation medications to all patients with cancer who smoke

- ✓ **FDA-approved medications**
 - Nicotine replacement therapies
 - Patch
 - Gum
 - Lozenge
 - Inhaler
 - Nasal spray
 - Non-nicotine medications
 - Bupropion
 - Varenicline
- ✓ **Counseling options**
 - In-person
 - Telehealth
 - Quit line such as 877-44U-QUIT or 800-QUIT-NOW
 - Digital intervention such as smokefree.gov



smokefree.gov

Adding counseling to the provision of medication increased the likelihood of smoking cessation by about **10%–20%** versus medication alone

Source: Hartmann-Boyce et al., 2019.
Note: Data derived from the general population assumed predictive of cancer population.

The National Cancer Institute's 23rd Tobacco Control Monograph, *Treating Smoking in Cancer Patients: An Essential Component of Cancer Care*, affirms that all patients with cancer should have access to evidence-based smoking cessation treatment as a standard component of their care.

Read more at cancercontrol.cancer.gov/monograph23 or by scanning the QR code.

