

Tobacco cessation interventions helpful for people with substance use disorders**Clinical Question**

How effective are tobacco use cessation interventions for people in treatment for or recovery from alcohol or other drug dependence?

Bottom Line

Tobacco cessation interventions (counselling and/or pharmacotherapy) for people in treatment for or recovery from alcohol and other drug dependencies increased the odds of quitting smoking. Compared to placebo or usual care, absolute quit rates were 109/1,000 participants for pharmacotherapy relative to 58/1,000 and 160/1,000 participants for combined counselling and pharmacotherapy relative to 92/1,000. Counselling alone did not significantly increase tobacco abstinence.

Providing tobacco cessation interventions did not appear to affect the rates of abstinence from alcohol or other drugs. Most trials assessed the number of people who had quit smoking at least six months after beginning treatment.

Caveat

These findings are based on studies of overall low quality due primarily to incomplete reporting of the risks of bias and clinical heterogeneity in the nature of treatment. Data on adverse effects of the interventions were limited.

Context

Smoking rates in people with alcohol and other drug dependencies are two to four times those of the general population. Concurrent treatment of tobacco dependence has been limited due to concern that these interventions are not successful in this population or that recovery from other addictions could be compromised if tobacco cessation was combined with other drug dependency treatment.

Cochrane Systematic Review

[Apollonia D et al. Interventions for tobacco cessation in people in treatment for or recovery from substance use disorders. Cochrane Reviews, 2017, Issue 1. Art. No.: CD010274.DOI: 10.1002/14651858. CD010274.pub2.](#) This review contains 35 studies involving 5,796 participants.