

Can strategies delivered in primary care improve smoking cessation rates?

Clinical Question	How effective are strategies intended to increase the success of smoking cessation interventions in primary care?
Bottom Line	This review found moderate-certainty evidence that adjunctive counselling (delivered by a health professional other than the primary care physician), cost-free medications and tailored print materials all had a beneficial impact on smoking quit rates. However, there was some evidence that the beneficial impact of adjunctive counselling was only evident when offered in addition to standard smoking cessation care.
	There was also low-certainty evidence that biomedical feedback and provider training, and very low-certainty evidence that provider incentives did not have a clear beneficial impact on smoking cessation rates when used as strategies to improve the delivery of tobacco use treatment in primary care.
	There was some evidence of an improvement in some of the markers of physician performance in response to physician training, although not in patient quit attempts.
Caveat	Most of the studies identified in this review were conducted in Europe and the USA, and therefore are specific to these settings. As primary care and standard smoking cessation support differ globally this may affect the applicability of the evidence outside of these settings and may also have contributed to some of the heterogeneity in results.
Context	Primary care is an important setting in which to treat tobacco addiction. However, the rates at which providers address smoking cessation and the success of that support vary. Strategies can be implemented to improve and increase the delivery of smoking cessation support (e.g. through provider training), and to increase the amount and breadth of support given to people who smoke (e.g. through additional counseling or tailored printed materials).
Cochrane Systematic Review	Lindson N, Pritchard G, Hong B, Fanshawe TR, Pipe A, Papadakis S. Strategies to improve smoking cessation rates in primary care. Cochrane Database of Systematic Reviews 2021, Issue 9. Art. No.: CD011556. DOI: 10.1002/14651858.CD011556.pub2. This review contains 81 trials with a total of 112,159 participants.

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Systematic review link:

https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD011556.pub2/full