The Consequences of Smoking In School: An Adolescent Smoking Cessation Program.  
D.E. Masini

5 A’s: Best Practice for Smoking Cessation
In 2000, the U.S. Public Health Service (USPHS) published a best practice guideline for clinicians treating tobacco use and dependence, which includes patient-specific information. The guideline is built around the 5 A’s, a patient-centered model of behavioral counseling:
• Ask patients if they smoke.
• Advise them to quit with clear, strong and personalized messages.
• Assess their willingness to quit within 30 days.
• Assist them, if they are willing to quit, to develop a specific quit plan and provide practical and problem-solving counseling.
• Arrange for more help at subsequent office visits, if needed.

Essentials of a tobacco abstinence program. The first item of business is DON’T LET THEM QUIT until they really understand their smoking behavior!
The Stages of Change

The stages of change are:

- Precontemplation (Not yet acknowledging that there is a problem behavior that needs to be changed).
- Contemplation (Acknowledging that there is a problem but not yet ready or sure of wanting to make a change).
- Preparation/Determination (Getting ready to change).
- Action/Willpower (Changing behavior).
- Maintenance (Maintaining the behavior change)....or
- Relapse (Returning to older behaviors and abandoning the new changes).

Use the new knowledge to make a BIG change and try to live with it as you are fading.....CREATE DISTANCE!

Build a support system, mentor, Internet, support group.

Contract with a supporter.

Start REASONABLE walking / fitness activity.

Avoid triggers, danger locations, and non-supporters.

Make the No-Smoking perimeters smaller....

Never in the home (no ashtrays), never in the car...

No smoking zones...

Car is first (remove the ashtray and the cigarette lighters), no ashtrays, clean car, re-arrange the home, bedrooms, bedside tables, make-up mirrors, etc.

Concealed Weapon / Gun Rule “3 moves to Fire”.

Isolate the cigarettes, by 1. placing in a sandwich bag
2. Lock in a lunch box, 3. lunch box in trunk of car.

Place distance between yourself and tobacco.
Essentials:
Smoking is 90% behavioral and 10% addiction; or is it 90% addiction and 10% behavioral?
Experts disagree, but this is known:
- A generous fading schedule will allow rapid and complete elimination of nicotine from the body (tested by urine cotinine or COexhaled) in a short time period.
- The habit and behavioral repertoire of smoking will survive for X period of time.
- Essentials of a successful program include: Behavior and Smoking Repertoire knowledge, a coach, a mentor (that is you), time, fading plan, pharmacology, and patience.
- Help them to develop a “quit-plan” that is do-able and has a positive focus on success.

`Fading’ / Nicotine reduction studies  1 year abstinence
1. ‘Fading filters’ faded NIC-CO 30-50-80%  30.9 %
2. Nicotine fading/self-monitoring program.  40.0 %
3. Nicotine fading and cigarette tapering.  57.0 %
4. Fading and behavioral strategies in minorities.  8.0 %
6. Fading in concert with other therapy.  30.0 %
7. Fading success (CDC-CPG).  12.0 - 31.0 %

Identify and discuss behaviors and *smoking repertoire.*
In the client in a state congruent with Maibach and Cotton’s (1995) stages, enough to make change in their *inhaled environment.* Smoking repertoire, *I use a Bic lighter, cigarettes in my shirt pocket, I hold it with two fingers, I have a “good smoke” (SMI) at break, I smoke with (person) at (times) in (place), on phone.* Identify triggers, stimulus, locale, activity associated with the behavior. Discuss coping strategies *What will you do when you are with (person), at (locale) and you have the urge to light-up?* What will they do with new-found time, what healthy behavior will take the replace

<table>
<thead>
<tr>
<th>Cigarette Number</th>
<th>Time of day</th>
<th>Craving Level</th>
<th>What I was doing</th>
<th>Who I was with</th>
<th>How I was feeling</th>
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<tr>
<td>1</td>
<td>8am</td>
<td>1</td>
<td>Prepare for work</td>
<td>Husband</td>
<td>Happy</td>
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<tr>
<td>2</td>
<td>11am</td>
<td>4</td>
<td>Busy, will have to skip lunch</td>
<td>Co-workers</td>
<td>Stressed</td>
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<tr>
<td>3</td>
<td>1pm</td>
<td>2</td>
<td>Break smokers</td>
<td>Happy</td>
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Nicotine fading: Clearly identify the time/dose issue related to existing pack year history. Pack year history greater than 20 are significant for high level of addiction / pre-existing lung damage, and prospectively, more challenges in achieving nicotine abstinence.

IDENTIFY DOSE: Camel 100 F HP (1.4mgNIC) x 40 cigarettes = 56mg/ day.

<table>
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<tr>
<th>BRAND</th>
<th>Type</th>
<th>TAR</th>
<th>NIC</th>
<th>CO</th>
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<tbody>
<tr>
<td>CAMEL 50 F SP</td>
<td>17</td>
<td>1.3</td>
<td>17</td>
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</tr>
<tr>
<td>CAMEL 100 F HP</td>
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<tr>
<td>CAMEL 100 F HP LT</td>
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<tr>
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<tr>
<td>CAMEL Special King F SP LT</td>
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<td>0.8</td>
<td>12</td>
<td></td>
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Power fading 10 week plan, 2ppd smoker: PLAN: Cut 5.6 mg / day x 10 weeks.
Week 1 – Cut 5.6mg or 4 cigarettes less/day.
Week 2 – Cut 11.2mg or 8 cigarettes less/day.
Week 3 – Cut 16.8mg/day (12 less cigarettes/day).
Week 4 – Cut 22.4mg/day (16 less cigarettes/day).
Week 5 – Cut 28mg/day (20 less cigarettes/day).
Week 6 – Cut 33.6mg/day (24 less cigarettes/day).
Week 7 – Cut 39.2mg/day (28 less cigarettes/day).
Week 8 – Cut 44.8mg/day (32 less cigarettes/day).
Week 9 – Cut 50.4mg/day (36 less cigarettes/day).
Week 10 – Cut 56mg/day – no cigarettes.
QUIT! Week 11 – Cut 56mg/day – no cigarettes.

Follow-up through planned QUIT DAY then start nicotine replacement therapy….meds with kids controversial.
- Continue to practice new behaviors and avoidance therapy.
- Exercise and hydration, yoga, cerebral exercise, no sitting!
- Placebo or other positive distractions.

CONCLUSION:
- SOME ADOLESCENTS WILL BENEFIT FROM A STOP SMOKING PROGRAM.
- THIS PROGRAM PREVENTED HIGH SCHOOL ADOLESCENTS FROM A CRIMINAL RECORD.
- THERE WILL BE A TREMENDOUS RECIDIVISM RATE ON THE FIRST ATTEMPT, WITH SUBSEQUENT ATTEMPTS IMPROVING OVERALL QUIT RATE.
- SIN TAXES ARE A POWERFUL TOOL TO ASSIST IN TOBACCO ABSTINENCE.

QUESTIONS?