

Section 4: Strategies for Treating Concurrent Tobacco Use Disorder

TREATING CONCURRENT TOBACCO USE DISORDER

- Nicotine readily crosses the placenta, and concentrates in fetal blood, amniotic fluid, and breast milk. Concentrations in the fetus can be as much as 15 percent higher than maternal levels (NIDA, 2012)
- Growth restriction seen in infants of mothers who smoke reflect a dose-dependent relationship—the more the woman smokes during pregnancy, the greater the reduction of infant birthweight (NIDA, 2012)
- Tobacco use is associated with greater impact on birthweight than illicit drug use (Bailey, et al 2012)
- Among women with opioid use disorders, over 90% smoke (Winklbauer, 2008)
- Concurrent tobacco and opioid use is associated with earlier onset and increased severity of neonatal abstinence symptoms
- **Research shows that treating tobacco use does not have a negative impact on recovery** (Reid, et al, 2008)
- **When smoking cessation interventions are provided during addiction treatment, the likelihood of long term recovery is increased by 25%** (Prochaska, 2004)

Strategies for Providers

Pregnant women who smoke should be asked about their tobacco use at each prenatal visit and assisted to quit by providers. Women who are considering quitting should be referred to the tobacco helpline in their home state.

A simple approach may be used to address smoking during pregnancy:

- **ASK** every patient at each encounter about tobacco use and document status
- **ASSIST** every tobacco user to quit with a clear, strong personalized message about the benefits of quitting

- **REFER** patients who are ready to quit tobacco within the next 30 days to the appropriate Tobacco Helpline

Tools

- Quick Reference for tobacco counseling from Centers for Disease Control:
<https://www.cdc.gov/tobacco/campaign/tips/partners/health/materials/twyd-5a-2a-tobacco-intervention-pocket-card.pdf>
- New Hampshire QUITnow (services provided include phone counseling and nicotine replacement during pregnancy if prescribed):
 - For providers: <http://quitnownh.org/for-providers/>
 - For patients: <https://quitnownh.org/category/i-want-to-quit/>
- Vermont 802quits (includes incentives for each counseling all attended, phone counseling; nicotine replacement with Rx during pregnancy):
 - For providers: <http://802quits.org/providers/>
 - For patients: <http://802quits.org/quit-help-by-phone/baby/>

Additional Patient Resources

- Impact of tobacco on women's reproductive health: http://quitnownh.org/wp-content/uploads/2016/05/fs_womens_health.pdf
- Impact of tobacco on the baby: http://quitnownh.org/wp-content/uploads/2016/05/fs_shsBaby.pdf
- Mobile text message support for quitting smoking during pregnancy: <https://www.smokefree.gov/smokefreemom>
- General mobile text message pregnancy education and support: <https://text4baby.org/>
- Patient fact sheet from American College of Nurse Midwives (ACNM): <http://ourmomentoftruth.com/your-health/smoking-womens-health-learn-the-facts/>
- Smoking during pregnancy fact sheet from March of Dimes: <http://www.marchofdimes.org/pregnancy/smoking-during-pregnancy.aspx>

Additional Provider Resources

- **Strategies for treating tobacco use for patients with other addictive disorders:**
 - Mary Brunette, MD, Medical Director, Bureau of Behavioral Health, NH Department of Health & Human Services speaks about common myths about treating tobacco in the context of other addictive disorders <https://youtu.be/kOqwF4JkXK4>

- **Information on prenatal tobacco risk:**
 - From the Centers for Disease Control (CDC):
https://www.cdc.gov/tobacco/basic_information/health_effects/pregnancy/
 - From the National Institute on Drug Abuse (NIDA):
<https://www.drugabuse.gov/publications/tobacco-nicotine-e-cigarettes/what-are-risks-smoking-during-pregnancy>
 - From the American College of Nurse Midwives (ACNM):
<http://www.ourmomentoftruth.com/Smoking-and-Womens-Health>
 - American College of Obstetricians and Gynecologists Committee Opinion on Tobacco Use and Women’s Health: <http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Health-Care-for-Underserved-Women/Tobacco-Use-and-Womens-Health>

- **No-cost virtual provider training on best practice for smoking cessation:**
 - [“Smoking Cessation for Pregnancy and Beyond: A Virtual Clinic”](#)
Sponsored by the CDC’s Division of Reproductive Health, this continuing education offering allows providers to learn and practice evidence-based interventions for smoking cessation during and after pregnancy. Included is a free, online training module on e-cigarettes and pregnancy. Additional learning tools include interactive case simulations, mini-lectures from leading experts, interviews with real patients who have quit, and a variety of online office resources. *This training is eligible for continuing medical education credit, AMCB CEUs for Nurse-Midwives, and for Maintenance of Certification credit for OB/GYN physicians.*

Other Useful Resources

- CDC tobacco intervention pocket card:
<https://www.cdc.gov/tobacco/campaign/tips/partners/health/materials/twyd-5a-2a-tobacco-intervention-pocket-card.pdf>
- EPA community action toolkit: https://www.epa.gov/sites/production/files/2014-08/documents/community_action_kit.pdf
- NH Quitworks fact sheet on smoking and women’s health: http://quitnownh.org/wp-content/uploads/2016/05/fs_womens_health.pdf
- NH Quitworks fact sheet on second hand smoke: http://quitnownh.org/wp-content/uploads/2016/05/fs_shsBaby.pdf

- Patient education fact sheet from American College of Nurse Midwives (ACNM):
<http://www.ourmomentoftruth.com/Smoking-and-Womens-Health>
- Smoking during pregnancy fact sheet from March of Dimes:
<http://www.marchofdimes.org/pregnancy/smoking-during-pregnancy.aspx>
- Smoking cessation strategies for providers from National Institute on Drug Abuse:
<https://www.drugabuse.gov/publications/research-reports/tobacco/smoking-pregnancy%E2%80%94what-are-risks>
- EPA “smoke free home pledge” for families:
https://www.epa.gov/sites/production/files/2015-09/documents/certificate_en.pdf