



# Training Occupational Physicians for brief recommendations on tobacco cessation to smoker workers



AZIENDA UNITA' SANITARIA LOCALE ROMA B

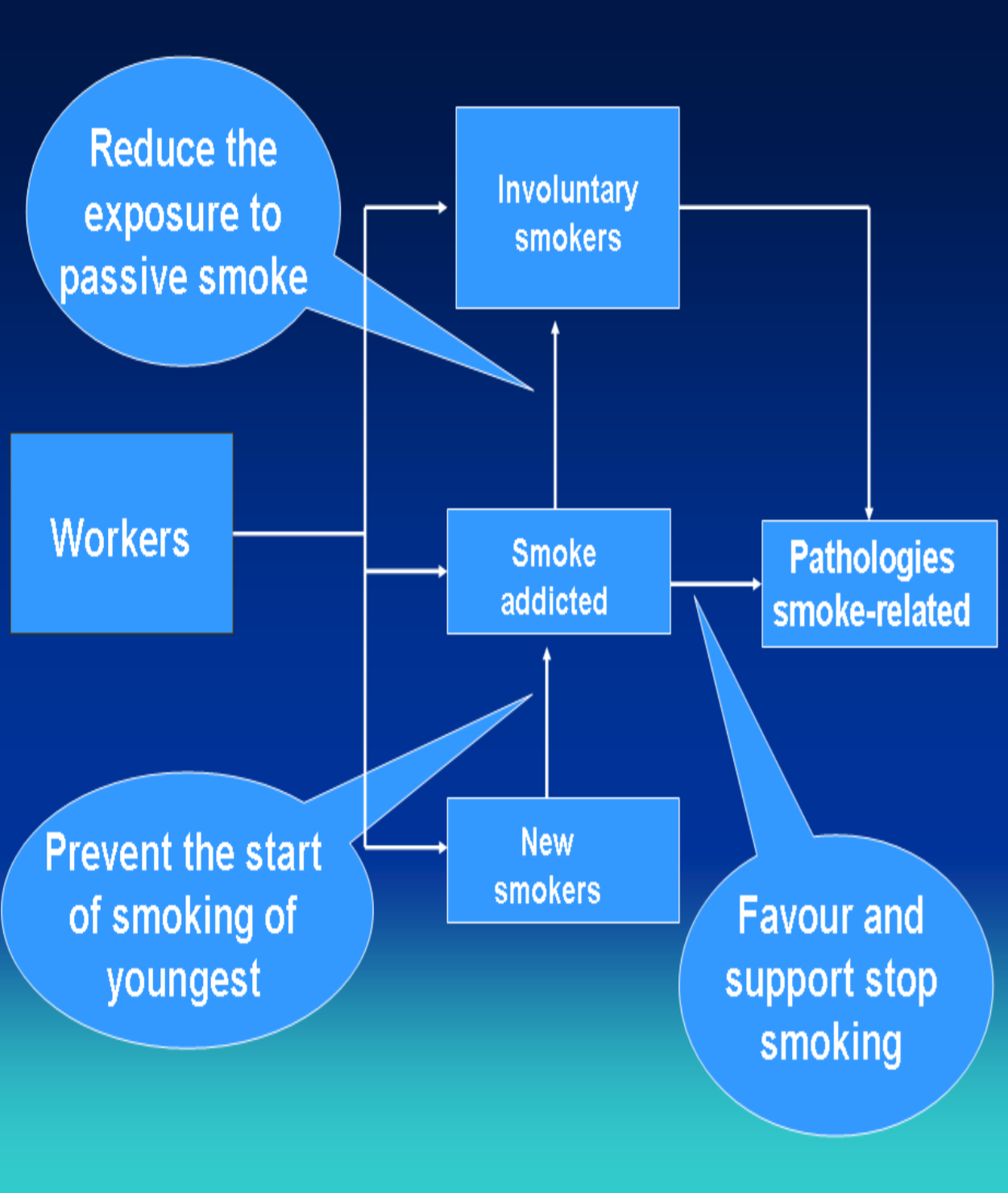
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Smoking tobacco is the leading cause of preventable death and diseases in Italy; it provokes about 80.000 corpses/year (1/3 for cardiovascular pathology, 1/3 for respiratory pathology and 1/3 for neoplastic pathology), more than 30% of deaths attributed to it includes people from 35 to 69. (4).

Most of the smokers are in the age brackets of active work.

Involuntary smoking (in the workplace) implies a greater risk to be affected by pathologies; and around 16-19% is esteemed the risk of lung cancer for this cause in the workplace (2). For this reason involuntary smoke is included in the IARC Group 1 starting from 2002, certainly carcinogenic to humans

Specific strategy of attention on tobacco's smoke in the workplace



Passive smoke, considered a certain carcinogenic, must be properly evaluated in order to prevent professional risks.

The working world is a fundamental field for developing positive actions in 3 fields:

- Favour stop smoking
- Prevent the start of smoking of youngest
- Protect those workers that don't smoke from the exposition to passive smoke

There are scientific evidences that a brief counselling from Family Physicians, Nurses, Dentists, Pharmacists, Midwives (6), favours cessation of smoking with results which in some cases reach 30% (1) or 50% (5).

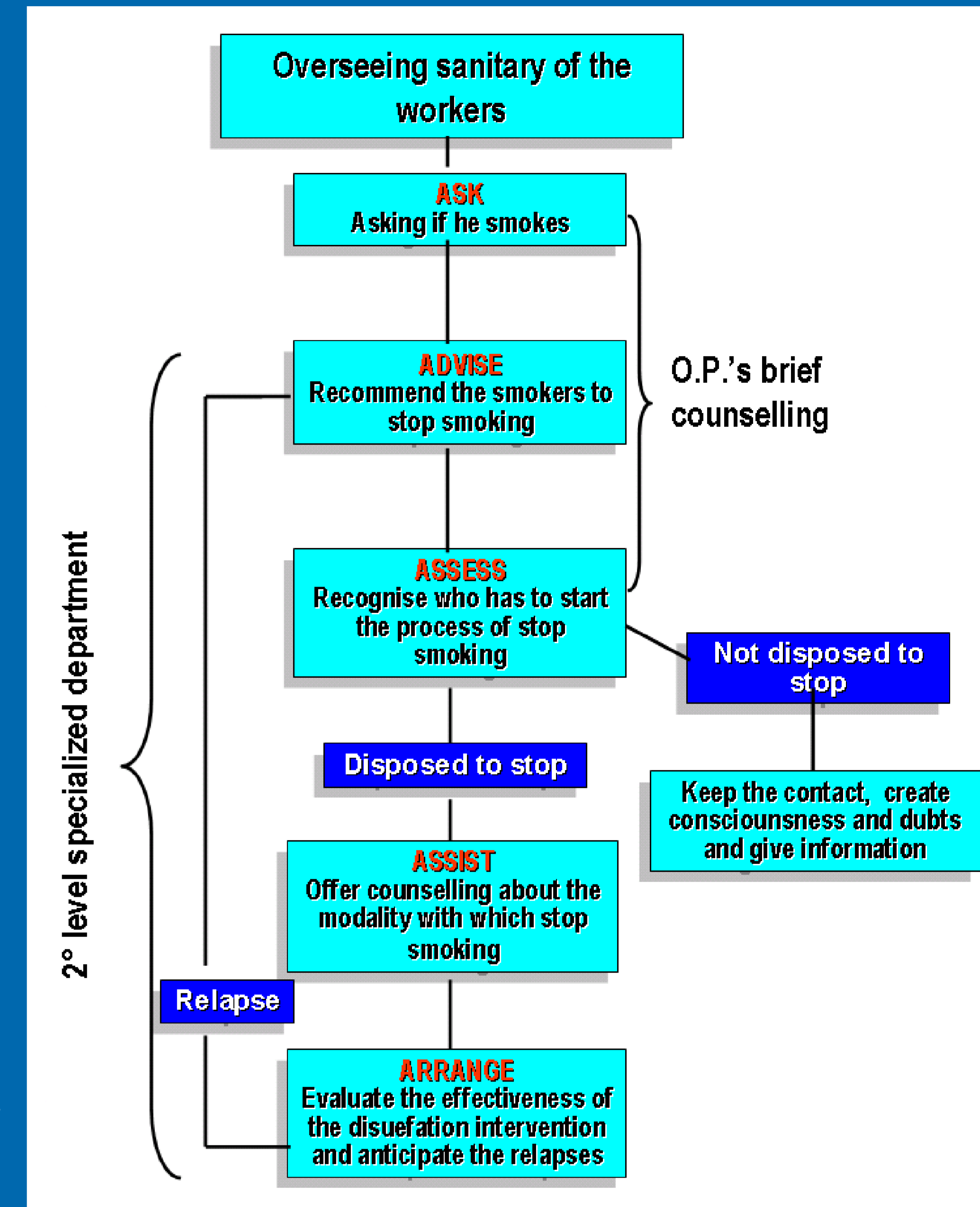
Also in the workplace the Occupational Physicians (O.P.), if adequately formed, have the opportunity, during the overseeing sanitary to the workers, to fight the dependence from the tobacco's smoke using the National (3) and International Guidelines to promote the struggle to the tabagism and using counselling to smoker by:

1. investigate on the smoking habit (ask)
2. formulate brief recommendations on the importance to stop smoking (advise)
3. Recognise who, among the exposed workers at sanitary overseeing, has to start the process of stop smoking (assess)
4. Offer counselling about the modality with which stop smoking (assist)
5. Evaluate the effectiveness of the weaning from smoke intervention and anticipate the relapses (arrange)

The O.P. must also offer to the Employer a valid professional support to the management of the smoke in the Company by doing:

- Adapt the corporate security system to laws on the proscription to smoke in the workplace
- Elaborate a project plan about workplaces unconditioned by smoke
- propitiation of conflicts between smoker and non smoker workers
- information to the workers about those problems caused by tobacco smoke on the workplace (direct risk for smoke correlated pathologies; increase of the other risk factors present in the workplace; a factor of the rise of errors and injuries due to distraction)

- Protect those workers that don't smoke from the exposition to passive smoke
- Prevent the start of smoking of youngest
- Favour and support stop smoking



The Department of Occupational Medicine of the ISPESL and the Department of Prevention of ASL Rome B are realizing training initiatives addressed to Occupational Physicians about these themes based upon a specific strategy of attention on tobacco's smoke; In the courses already done the Regional Health Agency of Lazio and the ISS' Smoke, Alcohol and Drug observatory have collaborated to the same project.

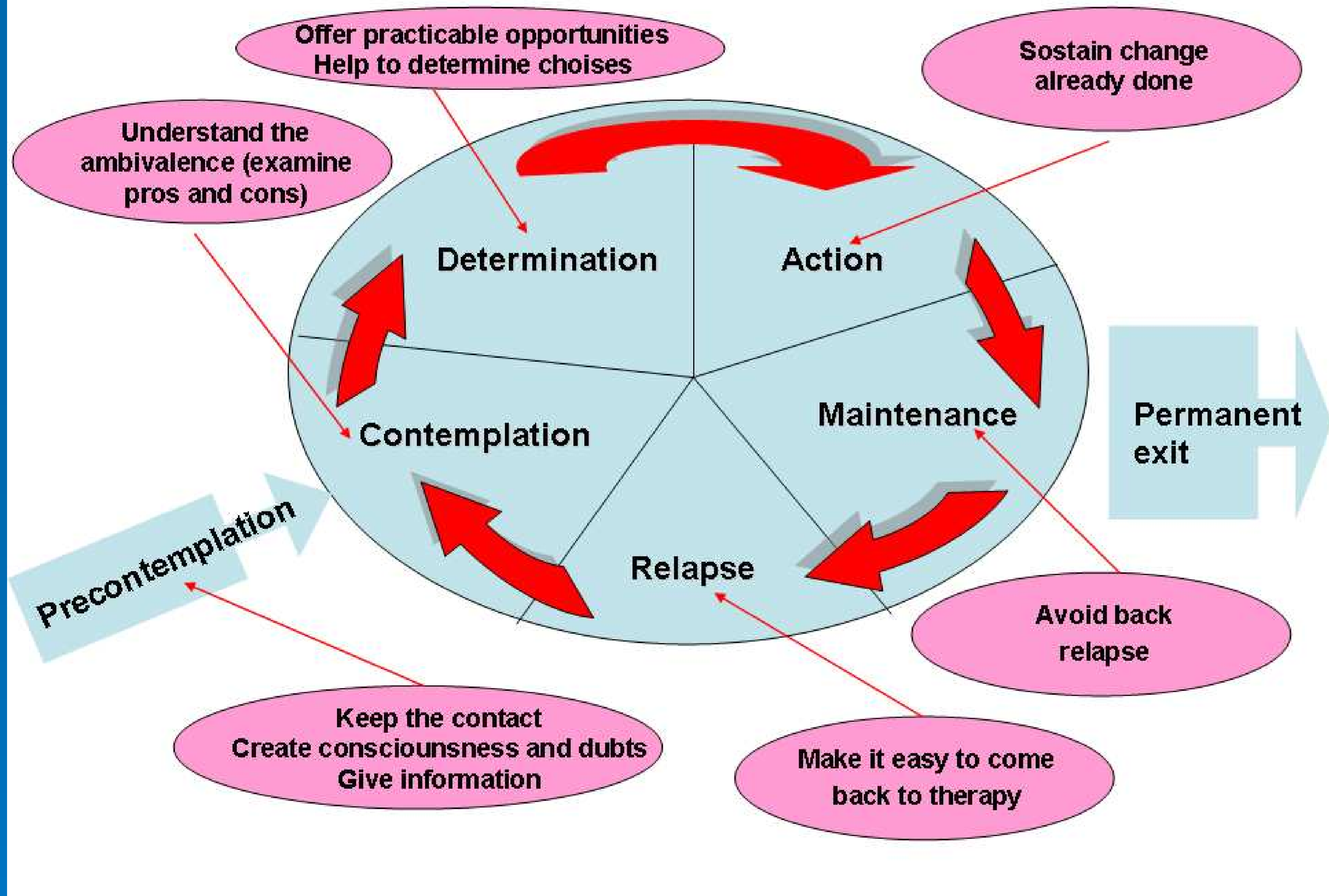
The educational methodology used for the Occupational Physicians' training has made use of:

front lessons carried out by epidemiologists, jurists, specialists in breathing diseases, psychologists, occupational physicians;

role playing in which the participants to the course, coordinated by a tutor, have simulated different intervention of weaning addressed to smokers in different moments of the changing period with respect to the habit of smoking and examined some clinical cases in both pharmacological and relational front;

plenary discussion in which it was given an account of personal experiences and in which the outcome and troubles of role playing are exposed.

## MOTIVATIONAL TASKS IN VARIOUS PHASES



The topics of the educational program have been:

1. OP's role in the weaning of tobacco smoking in an integral system of prohibition of smoking;
2. The management of smoker worker and of the smoke withdrawal symptom;
3. The management of the protection policies about involuntary smoke with regards to the non smoker workers
4. Psycho-behavioural therapy of the smoker;
5. Cycle of smoke addiction and cycle of motivation to stop smoking
6. Advices on how to use at its best the short time available for counselling and the concerning tools (detection of the level of the smoker subject; Fagerstrom's test)

The courses participants have been evaluated by making them fill a multiple choice test, before and after the didactic event. After the computation of the margins in the answers, the results that have been found, have been analysed by the participants and their teachers at the end of the course.

The educational quality have been also evaluated thanks to a satisfaction test; the results are a signal that allows to better finalize the coming courses at the didactical goals

### References

1. M.C. Fiore et al. - Treating Tobacco use and dependence. Clinical Practice Guideline. Rockville, MD, US Department of health and human services, Public Health Service, 2000
2. IARC Monographs - Vol. 83, Tobacco Smoke and Involuntary Smoking - June 2002
3. ISS - Linee guida cliniche per promuovere la cessazione dell'abitudine al fumo [www.iss.it/ofad](http://www.iss.it/ofad)
4. Lega Italiana per la Lotta contro i Tumori - Libro bianco sul fumo 2005
5. V.H. Rice, L.F. Stead - Nursing intervention for smoking cessation. In: Cochrane Library, Issue 1. Chichester, John Wiley and Sons, 2004
6. WHO - The role of health professionals in tobacco control, WHO Library Cataloguing in Publication Data 2005

## Fagerström Test

Questions	Answers	Score
1. How much do you wait till lighting your first cigarette after you wake up?		
* 5 minutes	<input type="checkbox"/>	3
* From 6 to 30 minutes	<input type="checkbox"/>	2
* from 31 to 60 minutes	<input type="checkbox"/>	1
* More than 60 minutes	<input type="checkbox"/>	0
2. Does it cost a lot not to smoke where it's prohibited (cinema, church, bus, etc.)?		
* Yes	<input type="checkbox"/>	1
* No	<input type="checkbox"/>	0
3. Which is the cigarette you can't renunciate?		
* The first one in the morning	<input type="checkbox"/>	1
* All the rest	<input type="checkbox"/>	0
4. How many cigarettes do you smoke per day?		
* 1/10 or less	<input type="checkbox"/>	0
* 11-20	<input type="checkbox"/>	1
* 21-30	<input type="checkbox"/>	2
* 31 or more	<input type="checkbox"/>	3
5. Do you smoke more frequently during the first hour you're awake rather than in the rest of the day?		
* Yes	<input type="checkbox"/>	1
* No	<input type="checkbox"/>	0
6. Do you smoke even when you are so sick you have to spend most of the day in the bed?		
* Yes	<input type="checkbox"/>	1
* No	<input type="checkbox"/>	0
Total Score		

A total score from 0 to 2 - stands for a slight dependency; 3 or 4 - medium dependency; 5 or 6 - strong dependency; 7 to 10 - very strong dependency