

## Treating tobacco dependence – starting with Very Brief Advice

### Key citations:

1. Aveyard P, et al. *Brief opportunistic smoking cessation interventions: a systematic review and meta-analysis to compare advice to quit and offer of assistance. Addiction* 2012;107:1066-73.
2. Hum AM, et al. *Physician communication regarding smoking and adolescent tobacco use. Pediatrics* 2011;127:e1368-74.
3. Hollis JF, et al. *Teen reach: outcomes from a randomized, controlled trial of a tobacco reduction program for teens seen in primary medical care. Pediatrics* 2005;115:981-9.
4. Gollwitzer PM, Sheeran P. *Implementation intentions and goal achievement: A meta-analysis of effects and processes. Adv Exp Soc Psychology* 2006;38:69-119.
5. McEwen A, et al. *Adapting Very Brief Advice (VBA) on smoking for use in low-resource settings: experience from the FRESH AIR project. J Smoking Cessation* 2019;1-5.

## Title of evidence summary

*Treating tobacco dependence – starting with Very Brief Advice*

## Who is this summary for?

*Health managers, researchers, practitioners in each country.*

## Focus

*Employing a behaviour change technique – Very Brief Advice – to assist adolescents to quit smoking*

## Key findings/recommendations

Opportunistic, brief physician advice to stop smoking accompanied by an offer of assistance increases the frequency of quit attempts vs no intervention among adult smokers.<sup>1</sup> Limited data suggest this approach may be effective to initiate quit attempts among adolescent smokers when delivered in a healthcare setting and alongside additional motivational interventions.<sup>2,3</sup> Both studies (one retrospective and one randomized) were conducted in the US healthcare system; no data from LMIC settings.

## Implementation considerations

VBA is a pragmatic, cheap and effective way to contribute to non-communicable disease prevention including tobacco dependence.<sup>4</sup> Training required to deliver VBA is readily available via free-to-access internet-based sources and can be effectively delivered by any appropriately trained individual. VBA is not context dependent and the ADVISE and ACT components can be tailored to local availability of additional smoking cessation support.<sup>5</sup>

## Quality of the evidence

*Limited for adolescent smokers; high for adult smokers.*

## Citation for any linked full evidence review

1. Aveyard P, et al. Brief opportunistic smoking cessation interventions: a systematic review and meta-analysis to compare advice to quit and offer of assistance. *Addiction* 2012;107:1066-73.
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3. Hollis JF, et al. Teen reach: outcomes from a randomized, controlled trial of a tobacco reduction program for teens seen in primary medical care. *Pediatrics* 2005;115:981-9.
4. Gollwitzer PM, Sheeran P. Implementation intentions and goal achievement: A meta-analysis of effects and processes. *Adv Exp Soc Psychology* 2006;38:69-119.
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## Funding [no single review]

## Languages (can use ISO codes) [most papers only in English]

## Other sources of information: (none are specific to adolescents)

- Links to e-learning:
  - [https://www.ncsct.co.uk/publication\\_VBA\\_2021.php](https://www.ncsct.co.uk/publication_VBA_2021.php)
  - <https://www.ipcrg.org/themes/tobacco-dependence>
  - <https://www.ncsct.co.uk/usr/pub/Supporting%20stopping%20vaping.pdf>
- Integrated brief interventions for noncommunicable disease risk factors in primary care: the manual. BRIEF project. Copenhagen: WHO Regional Office for Europe; 2022. Licence: CC BY-NC-SA 3.0 IGO. pages 100 onwards <https://www.who.int/europe/publications/i/item/9789289058551>
- IPCRG. Treating tobacco dependence: guidance for primary care on life-saving interventions. Position statement of the IPCRG giving Numbers Needed to Treat doi: [10.1038/s41533-017-0039-5](https://doi.org/10.1038/s41533-017-0039-5)
- IPCRG desktop helper – practical guide to helping smokers quit. <https://www.ipcrg.org/desktophelpers/desktop-helper-no-4-helping-patients-quit-tobacco-3rd-edition>.