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# **Addictive Behaviors**



# Prevalence of unassisted quit attempts in population-based studies: A systematic review of the literature



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#### HIGHLIGHTS

- We empirically investigate the idea that most smokers quit unassisted.
- We find 26 manuscripts reporting prevalence estimates for unassisted quit attempts.
- A majority of quit attempts in population-based studies to date are unassisted.
- There appears to be a decreasing trend of unassisted quit attempts over time.

# ARTICLE INFO

#### Keywords: Smoking Quitting Unassisted quit attempts Prevalence studies

#### ABSTRACT

*Aims*: The idea that most smokers quit without formal assistance is widely accepted, however, few studies have been referenced as evidence. The purpose of this study is to systematically review the literature to determine what proportion of adult smokers report attempting to quit unassisted in population-based studies.

Methods: A four stage strategy was used to conduct a search of the literature including searching 9 electronic databases (PUBMED, MEDLINE (OVID) (1948-), EMBASE (1947-), CINAHL, ISI Web of Science with conference proceedings, PsycINFO (1806-), Scopus, Conference Papers Index, and Digital Dissertations), the gray literature, online forums and hand searches.

Results: A total of 26 population-based prevalence studies of unassisted quitting were identified, which presented data collected from 1986 through 2010, in 9 countries. Unassisted quit attempts ranged from a high of 95.3% in a study in Christchurch, New Zealand, between 1998 and 1999, to a low of 40.6% in a national Australian study conducted between 2008 and 2009. In 24 of the 26 studies reviewed, a majority of quit attempts were unassisted. Conclusions: This systematic review demonstrates that a majority of quit attempts in population-based studies to date are unassisted. However, across and within countries over time, it appears that there is a trend toward lower prevalence of making quit attempts without reported assistance or intervention.

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#### 1. Introduction

Tobacco use remains the single largest preventable cause of disease and premature death with nearly 6 million deaths and hundreds of billions of dollars in economic damage worldwide (World Health Organization, 2011). Despite a considerable decline in cigarette smoking in developed nations over the past several decades, smoking still remains common (World Health Organization, 2011).

There are numerous methods available to smokers in developed countries to assist them in quitting including various counseling modalities, nicotine replacement therapies (NRTs) (patches, lozenges, tablets, gum, nasal or mouth spray, and oral pouch) and anti-craving medications (varenicline and bupropion). There is considerable evidence that the use of assisted methods for smoking cessation increase the chances of a successful quit compared to no use or placebo, as applicable, in randomized clinical trials (Cahill, Stead, & Lancaster, 2007; Hughes, Stead, & Lancaster, 2007; Lancaster & Stead, 2005a; Silagy, Lancaster, Stead, Mant, & Fowler, 2002; Stead & Lancaster, 2005; Stead, Perera, Bullen, Mant, & Lancaster, 2008).

Despite the availability of quit aids, Chapman and MacKenzie have recently drawn attention to survey data that indicates a vast majority of ex-smokers report quitting on their own and not with assisted methods (Chapman & MacKenzie, 2010; Chapman & Wakefield, 2012). The term 'unassisted' has been used to describe quit attempts in which smokers do not use assistance in the form of pharmaceutical or behavioral interventions. Traditionally, the term "cold turkey" was used to describe quit attempts smokers made on their own without any assistance; however, more recently the term has also be used to describe an abrupt rather than gradual cessation, whether or not this was in combination with a pharmaceutical or behavioral quit aid (Cheong, Yong, & Borland, 2007).

It is widely assumed that most smokers quit in an unassisted way, (Chapman & MacKenzie, 2010; Chapman & Wakefield, 2012; Shiffman & Sweeney, 2008) but this claim has not been thoroughly assessed. Only a few population-based studies have been referenced as evidence (Fiore et al., 1990; Lee & Kahende, 2007; Walsh, Paul, Tzelepis, & Stojanovski, 2006; Zhu, Melcer, Sun, Rosbrook, & Pierce, 2000). The current study will provide a systematic review of the available evidence to support this assumption.

Understanding the prevalence of unassisted quitting in populations is critically important for developing tailored public health strategies not only in wealthy countries (where pharmaceutical interventions can be financed), but also in the developing world where expensive medication-based smoking-cessation strategies may be beyond reach for populations. Public health strategies require a detailed understanding of how people are actually quitting smoking in order to develop appropriate interventions and strategies. For example, emphases on pharmaceutical interventions may "medicalize" nicotine dependence (Chapman & MacKenzie, 2010). In addition, if unassisted quitting is the dominant means of smoking cessation, it may be helpful for public health strategies to acknowledge and support this pattern directly, rather than dismissing unassisted quitting strategies.

The purpose of this systematic review was to determine what proportion of adult smokers report attempting to quit unassisted in population-based studies.

#### 2. Methods

#### 2.1. Criteria for considering studies for this review

# 2.1.1. Types of studies

No limitation was placed on the type of study design used; however, the study had to include a population-representative sample of smokers.

# 2.1.2. Types of participants

Male and female smokers aged 15 years or older were included.

#### 2.1.3. Types of outcome measures

No specific limitation was placed on the duration of quit attempt; however, it had to be clear that the quit attempt was made without the use of pharmaceutical or behavioral assistance.

## 2.2. Search methods for identification of studies

A four stage strategy was used to conduct a search of the literature. First, 9 electronic databases (PUBMED, MEDLINE (OVID) (1948-), EMBASE (1947-), CINAHL, ISI Web of Science with conference proceedings, PsycINFO (1806-), Scopus, Conference Papers Index, and Digital Dissertations) were systematically searched for relevant documents. Searches were conducted of article titles, abstracts and keywords/descriptors employing combinations of the following search terms: 'smoking' or 'tobacco' or 'cigarette' AND 'cessation' or 'quit' or 'stop' or 'discontinue' or 'break off' or 'reduce' AND 'unassisted' or 'unaided' or 'cold turkey' or 'without help' or 'solo' or 'independent' or 'unaccompanied'. Where possible, all terms were included as full text, with truncation used where possible to capture variation in the terminology. The database searches were not limited to the English language, nor restricted by any other means (e.g. by date), although only keywords in English were included in the search.

Second, in order to capture descriptive reports on smoking cessation not published in the peer-review literature, Internet searches were conducted using the Google search engine in February 2012. Several combinations of the following search terms were used: 'smoking', 'tobacco', 'cessation', 'quit', 'stop', 'unassisted', 'unaided', and 'cold turkey'. The first 300 links identified by each separate search were investigated. As it was anticipated that many descriptive reports would be government documents, specialized search engines, such as the Canadian government publications site (www.publications.gc.ca) or the USA government search engines (http://search.usa.gov/, http:// www.science.gov/) were utilized when available. Third, 'Globalink' an invitation-only online forum for tobacco control advocates, clinicians and researchers, was searched to identify discussions of unassisted quitting and further reports or publications. Hand searches of the reference lists of the identified publications and reports were examined to determine if additional studies existed that were not identified in the database or gray literature searches. Finally, key author searches from the publications and reports found were carried out using the Web of Science.

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