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Practical guidelines on e-cigarettes for practitioners and others health professionals. A French 2016 expert's statement

Recommandations pratiques sur l'e-cigarette pour les médecins et autres professionnels de santé. Recommandations 2016 d'experts français



English /
French

B. Dautzenberg^{a,*}, M. Adler^b, D. Garelik^c,
J.F. Loubrieu^d, G. Mathern^e, G. Peiffer^f, J. Perriot^g,
R.M. Rouquet^h, A. Schmittⁱ, M. Underner^j, T. Urban^k

^a Service de pneumologie et réanimation respiratoire, groupe hospitalier Pitié-Salpêtrière, 47, boulevard de l'Hôpital, 75013 Paris, France

^b Service d'addictologie, hôpital Antoine-Béclère, 157, rue de la Porte-Trivaux, 92140 Clamart, France

^c Consultation de médecine et tabacologie, groupe hospitalier Pitié-Salpêtrière, 47, boulevard de l'Hôpital, 75013 Paris, France

^d 4, impasse de la Gare, 41260 La Chaussée-Saint-Victor, France

^e 2 bis, rue des Forges, 42400 Saint-Chamond, France

^f Consultation de tabacologie, CHR Metz-Thionville, 1, allée du Château, 57530 Metz, France

^g Dispensaire Émile-Roux, conseil départemental du Puy-de-Dôme, 11, rue Vaucanson, 63100 Clermont-Ferrand, France

^h Unité de coordination d'aide au sevrage tabagique, CHU de Toulouse, 24, chemin Poumourville, 31059 Toulouse cedex 9, France

ⁱ Service de psychiatrie, CHU de Clermont-Ferrand, 58, rue Montalembert, 63000 Clermont-Ferrand, France

^j Tabacologie, centre d'investigation clinique, 2, rue de la Miléterie, 86000 Poitiers, France

^k Département de pneumologie, CHU d'Angers, 4, rue Larrey, 49000 Angers, France

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KEYWORDS

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Smoking cessation;
Risk reduction;

Summary A group of 11 French medical experts has developed guidelines through a Delphi progressive consensus about smoking management at the e-cigarette era. The lack of scientific data about e-cigarettes led the experts to set out recommendations, mainly based on clinical practice while waiting for scientific validations. The validated smoking cessation treatments

* Corresponding author.

E-mail address: bdautz@gmail.com (B. Dautzenberg).

Guidelines;
Product safety

keep the first place in the prevention and the treatment of tobacco-induced damages. The e-cigarette, experimented by a large proportion of smokers, is a safer product than tobacco. The health professional must answer the patients about the e-cigarettes: (1) A smoker who questions about e-cigarettes should receive information. Even if there is a lack of data, e-cigarettes offer much lower risks than tobacco. (2) A dual user is at high risk of returning to exclusive tobacco use; he should also optimize other nicotine intakes by combining nicotine replacement therapy and/or optimizing the nicotine intake through the e-cigarette. (3) A smoker who wish to use the e-cigarette in order to quit with or without associated pharmaceutical treatment should be accompanied and not discouraged. (4) A vaper who is tired to continuing to vape should be accompanied to quit. Specific guidelines are also provided for adolescents, pregnant women, patients during perioperative periods and also for pulmonary, cardiac and schizophrenic patients.

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MOTS CLÉS

Cigarette
électronique ;
Arrêt du tabac ;
Réduction des
risques ;
Recommandations
d'experts ;
Sécurité des produits

Résumé Un groupe de 11 médecins experts a élaboré, par consensus progressif, des recommandations sur la prise en charge du tabagisme à l'heure de l'e-cigarette. Le manque de données scientifiques sur l'e-cigarette a conduit les experts à énoncer des recommandations principalement basées sur la pratique clinique en attendant les validations scientifiques. Les traitements validés d'arrêt du tabac gardent toute leur place dans le traitement des dégâts du tabagisme. L'e-cigarette, expérimentée par la majorité des fumeurs, est un produit de consommation courante. Le professionnel de santé doit savoir répondre à différents patients : (1) Un fumeur qui questionne doit être informé sur l'e-cigarette qui, malgré des inconnues, présente un risque très réduit en comparaison du tabac. (2) Un usager mixte est à haut risque de retourner vers le tabac ; il faut optimiser les autres apports de nicotine avec les substituts nicotiniques et/ou en modulant la prise de nicotine par l'e-cigarette. (3) Un fumeur qui souhaite utiliser l'e-cigarette pour l'arrêt de son tabagisme avec ou sans médicament sera accompagné et non découragé. (4) Un vapoteur qui en a assez de vapoter sera également accompagné pour un éventuel arrêt. Des recommandations particulières sont également fournies aux adolescents, aux femmes enceintes, en période périopératoire, aux malades respiratoires, cardiaques, schizophrènes.

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English version

Background

In 2014, a French group of experts proposed recommendations about e-cigarette to provide some guidance through published and unpublished studies to the attention of French health professionals.

These first experts' recommendations have been set by a 6 rounds progressive consensus according to Delphi processes [1]. The 42 findings and recommendations have been published in French in 2014 [2]. One of the 2014 recommendations is to review it 2 years later. We conducted this review and present the results in this document.

France is the European country where the e-cigarette is the more widely used [3]; a country in which e-cigarette industry remains mainly out of the tobacco industry business, a country where more half million of smokers stopped smoking tobacco, thanks to e-cigarette. Between 2014 and 2016, e-cigarette knowledge improved, device changed, e-liquid quality improved and the practice has changed. A

French Afnor norm was published [4]. So all experts agree to review 2014 recommendations with the help of a new expert.

Eventually, the eleven experts reached a new consensus in 5 Delphi process rounds. Half of the recommendations remained unchanged from 2014, half of the recommendations changed; underlying the fact that recommendations with regard to e-cigarette needs frequent updates.

Context

With 78,000 annual deaths in France and 6 million in the world, smoking is the leading cause of preventable deaths in the world in 2016. All actions reducing tobacco use are beneficial to public health.

The e-cigarette is a recent product usually containing nicotine. It is estimated that more than 90% of French smokers have tried e-cigarette. In the European Union, it is neither considered as a tobacco product nor as a medication or a medical device. However, health professionals should

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