

# 'Cafeteria Approach' To Smoking Cessation

Continued from page 1  
Family Physicians (AAFP), also told MEDICAL TRIBUNE: "It really doesn't matter whose materials doctors use, as long as they do something about the smoking problem: identify their smoking patients, tell them to quit, offer them help to do it."

The academy offers doctors its "AAFP Stop Smoking Program," which contains a wealth of materials aimed at improving any practitioner's odds of getting smokers to quit. Included are patient brochures for the waiting room, office signs, stop-smoking contracts, chart stickers to identify smoking patients, information on nicotine gum, and audio tapes for patients. The kit is \$50 with an AAFP ID number, \$80 to nonmembers. To order, readers may call (800) 274-2237, extension 5532.

The kit's effectiveness is "impossible to validate," but its various elements "are based on good science" and provide "methods that do work," Dr. Young declared. Regarding smoking, the AAFP is "like Sears," he added, providing many tools in one source from which the physician can choose.

While he stressed that most of the AAFP's 6,000 members are "clearly motivated to do something about smoking," physicians in general "underestimate their ability to help smokers quit" and often take the wrong approach in the exam room. They should bear in mind that patients who still smoke are in "the tough group" that has disregarded the outpouring of scientific data against tobacco since 1964.

"We can't expect success rates to be as high in this group," Dr. Young observed,

"and we must deal patiently with all smokers." It usually takes up to five attempts before a smoker quits for good, he noted, so doctors must take on the challenge over time and "expect patients to fail," at least at first. Fostering guilt and scolding are inappropriate; instead, a supportive approach is best, with each failure treated as a learning experience. And if the physician's own efforts do not pay off, he or she should not hesitate to recommend a reliable cessation clinic (see related article).

### In Search of 'Significant Day'

For smokers in search of a "significant day" to quit, three other health groups now offer alternatives. The first on the calendar is the World's Second No-Tobacco Day, held this year on May 31 by the World Health Organization (WHO) and the American Medical Women's Association. According to WHO spokesman Jerry Kilker, this year's No-Tobacco Day was addressed to "The Female Smoker" because women have become a prime target of the tobacco industry; they are at added risk from smoking compared with men, and smoking is on the rise among women around the world.

"Smoking among women may be seen as part of the movement for sexual equality," Mr. Kilker told this newspaper. "But it is a perverse form of equality: equal rights to smoke only means equal disease rates from smoking."

Indeed, WHO estimates that in industrialized nations today, the death rate from lung cancer among women is a scorching 200% of the 1950 rate. As WHO director-



Chris Gray(3)

general Hiroshi Nakajima, M.D., dourly observed on May 31, "Women who smoke like men will die like men." Regardless of sex, smokers worldwide are dying from tobacco-induced diseases at a rate of 2.5 million a year, WHO estimates. That is one death every 13 seconds, Dr. Nakajima noted.

The American Lung Association (ALA) sponsored its Nondependence Day on July 5. Edith Ewenstein, general director of the New York affiliate, said that Nondependence Day was so named "because we now know that nicotine is addictive. The name stresses the need, not to just stop smoking, but to break the dependency on nicotine."

In addition to Nondependence Day, the ALA offers several self-help booklets for smokers who want to quit: "Freedom

From Smoking in 20 Days" (\$7), "A Lifetime of Freedom From Smoking" (\$5.50), "Freedom From Smoking for You and Your Family" (\$7), and "Freedom From Smoking for You and Your Baby" (\$8). The association also offers a two-hour home video and audio cassette package, "In Control" (\$60), which doctors may purchase and lend to patients or recommend for patient purchase. All materials are available from local ALA chapters. Ms. Ewenstein said.

"Doctors must talk to their patients about the hazards of smoking," she stressed, "because whatever the patient's problem, smoking will only make it worse." Smokers must get the message that "there are no redeeming qualities whatsoever to smoking; everything about

Continued on page 11

# DOC Hounds & Harries Tobacco Companies

Continued from page 1  
society like AIDS, not only with the cigarette pandemic but also by buying up "benign" companies like General Foods and Nabisco," Dr. Blum declared. "They have blurred their true identity so much that the *Wall Street Journal* now lists them in the household-products sector."

By thus insinuating themselves into the marketplace, tobacco companies have

managed to associate smoking with things as American as apple pie and sports, and, despite a law against it, to continue advertising cigarettes on television, Dr. Blum maintained. "Philip Morris is now the leading single sponsor of the U.S. Olympics, through Miller Beer and General Foods, and there is more tobacco advertising on TV now than ever. By sponsoring car races, tennis tournaments, and other

major sports events, tobacco companies display their deadly wares on the walls behind players, on the cars in racing events, even on the drivers themselves."

Despite his efforts to fight back through DOC, Dr. Blum is "very pessimistic" about the smoking problem. "We've already lost the war on smoking; now we're losing the war over sports, which means young people. The big myth today is that the tobacco industry is losing. That simply isn't true and only breeds complacency in the ranks of those who should be most up in arms about the problem—namely, doctors."

### Publications Even Worse

The only things worse than the tobacco industry itself "are the publications that take their ads," Dr. Blum asserted. He was especially critical of *Sports Illustrated*, with its largely adolescent readership and mixture of sports and cigarette ads, and the *New York Times*, "which takes millions of dollars in tobacco ads each year. Saks Fifth Avenue, which is owned by Brown & Williamson Tobacco, is also a major advertiser in the *Times*, so they'll never bite the hand that feeds them. As long as people get the pabulum that smoking is bad for health and the *Times* pays lip service to the Great American Smoke-

out once a year, we're losing this war."

Moreover, Dr. Blum is opposed to the medical approach to smoking cessation. "The danger of nicotine gum and other such remedies is that they medicalize the tobacco issue and take it out of the social, political, and economic context where it belongs. I just don't believe in reducing it to a medical problem. This is a nifty solution that only keeps us doctors in business."

Rick Richards, M.D., who is national president of DOC, agreed. "In recent years, we've tried to medicalize the smoking problem, with nicotine gum and other pharmacologic agents. But the recent article by Hughes and colleagues [*JAMA* 261:1300-1305, 1989], as well as other reports, indicates that the gum makes little or no difference in quit rates. If doctors can't write smokers a prescription to help them quit, what do we do instead?"

That is where DOC comes in, he suggested. "Most physicians haven't been trained in smoking cessation and are very reluctant to do things they haven't been trained for. DOC gives them permission to try crazy things." Dr. Richards, who is associate professor of family medicine at the Medical College of Georgia in Augusta, went on to explain that "DOC uses the

Continued on page 11

Dear \_\_\_\_\_

I'm sorry that I cannot vote for you anymore because I'm sorry to send this to you after my death.

I was a \_\_\_\_\_ smoker and died

- \_\_\_\_\_ lung cancer.
- \_\_\_\_\_ chronic obstructive lung disease.
- \_\_\_\_\_ coronary heart disease.
- \_\_\_\_\_ other tobacco-related cancer or vascular disease.

As you are aware, the tobacco manufacturers are the major cause of this disease. As one of your constituents, I felt compelled to send this to you to let you know how you would do everything possible to prevent the tobacco industry from continuing to profit from the addiction, suffering and deaths of people like me.

Many of the ads in this publication are misleading, deceptive and/or a rip off.

For example, smoking does not make one glamorous, macho, successful or athletic. It does make one sick, poor and dependent on drugs.

It is up to you and your health.

Love,

*Doc*

**SMOKERS HAVE ZOO BREATH DON'T SMOKE**

*Now Available in Spanish*

*Marlboro*

*KENT*

*Virginia Slims*

*Bluebird*