

EVIDENCE-BASED HEALTH CARE

WORKPLACE INTERVENTIONS FOR SMOKING CESSATION

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Aims

This feature on evidence-based health care (EBHC) aims to present useful practice-related information on topics relevant to readers of *Current Allergy & Clinical Immunology*. The treatment of topics is not comprehensive. The main aim is to illustrate selected aspects of the EBHC process viz. i) identifying the best evidence and ii) applying valid and relevant evidence in clinical practice.

Background

Smoking impacts significantly on health, and interventions to change smoking behaviour receive a lot of attention. The workplace is a specific environment which can be targeted to implement interventions aimed at smoking cessation. You decide to search and find the latest evidence of the effects of these interventions.

So what is the question?

What are the effects of workplace interventions for smoking cessation?

The type of evidence to look for, and where to look for it

The best evidence will come from well conducted, up-to-date systematic reviews.

The Cochrane Occupational Health Field (COHF) (www.cohf.fi), part of the international Cochrane Collaboration, aims to provide up-to-date evidence on the effects of occupational health (OH) interventions. The field maintains specific databases of occupational interventions and systematic reviews, organises hand searching of OH journals, has developed search strategies for finding OH studies in PubMed, maintains a wish list of desirable systematic reviews, develops methodological support for OH systematic review authors and communicates with those interested in the field.

You search the COHF database of systematic reviews.

What was found?

You found a recent systematic review which assessed the effects of workplace interventions for smoking cessation.¹

What did the authors do?

The authors searched the Cochrane Tobacco Addiction Group Specialized Register in April 2008, MEDLINE

(1966 – April 2008), EMBASE (1985 – Feb 2008) and PsycINFO (to March 2008). They also searched abstracts from international conferences on tobacco and the bibliographies of identified studies and reviews for additional references. They included 51 randomised and quasi-randomised controlled trials referring to 53 interventions conducted in the workplace to promote smoking cessation.

Results and conclusion

Thirty-seven studies of workplace interventions aimed at individual workers, covering group therapy, individual counselling, self-help materials, nicotine replacement therapy and social support were included. The results were consistent with those found in other settings. Group programmes, individual counselling and nicotine replacement therapy increased cessation rates in comparison with no treatment or minimal intervention controls. Self-help materials were less effective. Sixteen studies tested interventions applied to the workplace as a whole. There was a lack of evidence that comprehensive programmes reduced the prevalence of smoking. Incentive schemes increased attempts to stop smoking, though there was less evidence that they increased the rate of actual quitting.

REFERENCES

1. Cahill K, Moher M, Lancaster T. Workplace interventions for smoking cessation. *Cochrane Database of Systematic Reviews* 2008, Issue 4. Art. No.: CD003440. DOI: 10.1002/14651858.CD003440.pub3

* Some EBHC resources

Clinical Evidence:

www.clinicalevidence.org

Clinical Evidence is a 6-monthly, updated compendium of evidence on the effects of common clinical interventions, published by the BMJ Publishing Group. It provides a concise account of the current state of knowledge, ignorance and uncertainty about the prevention and treatment of a wide range of clinical conditions based on thorough searches of the literature. It summarises the best available evidence and focuses on the effects of preventative and therapeutic interventions as demonstrated by randomised trials and systematic reviews of such trials.

Evidence-Based Medicine:

ebm.bmj.com

Evidence-Based Medicine is a journal released every other month which alerts clinicians to important advances in general and family practice, internal medicine, surgery, psychiatry, paediatrics and obstetrics and gynaecology. This is accomplished by selecting from the biomedical literature those original and review articles whose results are most likely to be true and useful. The articles are also summarised in abstracts and a commentary by a clinical expert is added. This site contains a large

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archive of articles organised by category and date as well as useful links to other evidence-related websites.

**Evidence-Based Nursing:
www.ebn.bmjjournal.com**

Evidence-Based Nursing is a journal released four times a year which alerts practising nurses to important and clinically relevant advances in treatment, diagnosis, aetiology, prognosis/outcome research, quality improvement, continuing education, economic evaluation and qualitative research. This is accomplished by selecting original and review articles whose results are most likely to be accurate and clinically useful. The articles are also summarised in abstracts and a commentary by a clinical expert is added. This site contains a large archive of articles

organised by category and date as well as useful links to other evidence-related websites.

**The Cochrane Collaboration
<http://www.cochrane.org/>**

The Cochrane Collaboration is an international non-profit and independent organisation, dedicated to making up-to-date, accurate information about the effects of health care readily available worldwide. It produces and disseminates systematic reviews of health care interventions and promotes the search for evidence in the form of clinical trials and other studies of interventions. The major product of the Collaboration is the Cochrane Database of Systematic Reviews published in *The Cochrane Library*.

FELLOWSHIP FOR AN ALLERGOLOGY TRAINING PROGRAMME AT THE ALLERGY DIAGNOSTIC AND CLINICAL RESEARCH UNIT (ADCRU), UCT LUNG INSTITUTE

Supervisor: Professor Paul C Potter, MD, FCP(SA), DCH(SA), FAAAAI, FACAAI, Director: ADCRU

1. An Allergology fellowship has been made available to an ethnic black South African citizen. The candidate should be a medical graduate under 40 years of age and currently registered with the Health Professions Council of South Africa (HPCSA).
2. The purpose of this fellowship is to facilitate clinical training of a medical practitioner in the field of Allergology to the level of equipping the candidate to write the Diploma in Allergology examination of the Colleges of Medicine of South Africa (Dip Allergy CMSA).
3. The fellowship is sponsored by J. Uriach y Compañía S.A. (Spain) and will be administered by the University of Cape Town Lung Institute.
4. The recipient will also be encouraged to develop a research interest into relevant Allergology problems seen in Southern Africa with the view to applying for further funding to continue such research or to consider a career path in Allergology.
5. The value of the fellowship is R150 000 for salary support for the candidate over a 6-month period.
6. The appointed fellow will be expected to participate in all of the clinical and laboratory activities of the Allergology Unit at the University of Cape Town. Progress will be reviewed after 3 months and 6 months. A progress report will be submitted to the sponsor at the end of the 6-month training period.
7. Any publications resulting from research done by the recipient of the fellowship will acknowledge the sponsorship of AAI Pharma and J Uriach (Spain).
8. The award of the fellowship will be announced on the UCT Lung Institute web-site and also in a local medical CME journal.
9. The following must accompany the application:
 - a) A 2-page (A4) motivation
 - b) Full Curriculum Vitae including all publications
 - c) Full contact details of 3 referees
10. The deadline for applications is 31 January 2010.
11. Applications should be addressed to: Professor Paul C Potter
Director: Allergy Diagnostic & Clinical Research Unit
UCT Lung Institute
PO Box 34560, Groote Schuur, 7937
Email: Paul.Potter@uct.ac.za
Tel: 021-406-6889/4
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