Success Rate of a Pharmacy Managed Smoking Cessation Program in a Community Pharmacy Setting
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Introduction
- Tobacco use is the single most preventable cause of illness and death in the United States.
- Currently, it is estimated that the United States has 50 million adult cigarette smokers.
- Smoking contributes to a wide range of diseases, including different types of cancers, chronic obstructive pulmonary disease (COPD), coronary heart disease, stroke, and peptic ulcer disease.
- Pharmacists can play an active role in smoking cessation by identifying and helping patients quit smoking.
- Pharmacists can help to determine appropriate behavioral and medication therapies as well as preventing drug interactions associated with smoking cessation.

Objectives
- Assess the effectiveness of a pharmacist managed smoking cessation program on patients' ability to remain smoke-free after quitting.
- Assess patients' knowledge about smoking consequences and treatment.

Methods
Design
Single center, prospective, pilot study conducted at the CVS Health Connection of CIVPharmacy in Washington, DC.
Inclusion Criteria
- Age ≥ 18 years of age
- Smokes at least 1/4 pack (10 cigarettes) or more per day for at least 6 months

Exclusion Criteria
- Pregnancy/breast feeding
- History of alcohol dependency/substance abuse within the past year
- Smokes tobacco user
- Subjects who have participated within the last month in any form of behavioral or pharmacological smoking cessation program

Program Description
- The program is composed of 6 sessions with a 3-month follow-up (See Table 1 for details)

Preliminary Results
Enrollment
- Began in November 2003
- Screened 30 patients
- Enrolled 9 patients into the program

Patient Demographics

<table>
<thead>
<tr>
<th>Sex</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>0</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Age (Years)</th>
<th>18-39</th>
<th>40-59</th>
<th>≥ 60</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>6</td>
<td>6</td>
<td>1</td>
</tr>
</tbody>
</table>

| Prior Quit Attempts | 1 | 2 | 4 |

Patient Characteristics

<table>
<thead>
<tr>
<th>Weight (pounds)</th>
<th>181</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure (mmHg)</td>
<td>124/79</td>
</tr>
<tr>
<td>Pulse (bpm)</td>
<td>59</td>
</tr>
<tr>
<td>Pre-Education Test Score</td>
<td>8 out of 11 (72%)</td>
</tr>
</tbody>
</table>

Preliminary Conclusion
- The results from this study better will define the role of community pharmacists in playing an active role in health promotion and disease prevention.
- This study will determine the feasibility of implementing a smoking cessation program within a chain pharmacy.
- Carbon Monoxide detection may provide a useful, pharmacist managed tool to encourage smoking cessation.
- There is an expanding need for community-based, pharmacist managed, smoking cessation programs

Acknowledgements
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