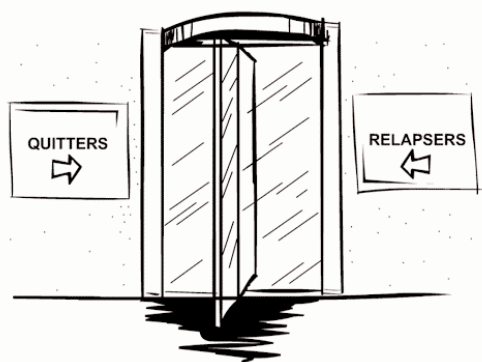


If At First You Don't Succeed, Try, Try Again!

By Eugene Han, MPH



“This is my last cigarette, and I’m quitting after this.”

Most smokers are regrettably familiar with this perennial promise, which more often than not, ends disappointingly in relapse. While the prevalence of smoking among adults in the US has gradually been declining, about one out of every five adults continues to smoke, according to the CDC. The issue of relapse is central to the problem; tobacco is an addictive substance, and despite the initial effectiveness of treatment interventions, the vast majority of smokers eventually return to smoking after trying to quit. As clinicians, what should we do with these relapsed smokers? Most smokers who relapse are willing to make another quit attempt, but given limited clinical resources, is it worth the effort to re-treat these recidivist smokers?

Several studies have been conducted in an attempt to answer this question, and the results have been discouraging. In 1993, smokers who had failed to quit from

an earlier nicotine patch study were enrolled in a second study to determine if repeat treatment with the patch would help them achieve abstinence. All 52 participants who had failed to quit with the patch in the first study relapsed to smoking within six months in the repeat study. Similarly, a study conducted in 2000 took unsuccessful quitters from an earlier patch study and allocated them to repeat treatment with either the nicotine inhaler or nicotine nasal spray. The quit rates after six months were 5% and 0%, respectively. Other studies on repeat treatment have reported similarly poor cessation outcomes, and the implications of these results are dispiriting for relapsed smokers who have tried to quit with formal cessation therapy – the chances of quitting are worse if you’ve already tried and failed.

However, it is important to note that all of these repeat studies were designed as clinical trials, and it remains to be seen whether repeat treatment of relapsed smokers in the “real world” results in better outcomes.

For his fieldwork project as a student of the UMDNJ School of Public Health, Eugene Han decided to research the “real world” results of repeat treatment of relapsed smokers in a clinical practice setting. Along with Dr. Jonathan Foulds, Dr. Michael Steinberg, and Kunal Gandhi, Eugene designed and conducted a retrospective study to examine 1745 consecutive patients who attended the UMDNJ Tobacco Dependence Clinic from 2001 to 2005 to quit smoking.

The results showed that patients who relapsed and returned for repeat treatment had consistent and respectable 6-month quit rates after each repeated quit attempt at the clinic (see figure). This suggests that patients have as good a chance of quitting the second or third time around as they do on their first quit attempt, which differs markedly from previous studies which showed that repeat treatment results in poorer cessation outcomes.

This disparity is probably due to the differences between clinical trials and clinical practice - the breadth and intensity of treatment at the clinic, as well as the ability to adjust therapy according to patients’ needs’ may explain the improved outcomes reported in this current study.

It appears that in clinical practice, re-treating relapsed smokers is a worthwhile endeavor, and clinicians should therefore encourage unsuccessful quitters to try again. The results of the study also suggest that patients who return for repeat treatment have higher markers of nicotine dependence (including waking up in the middle of the night to smoke

and smoking sooner upon waking in the morning) and are more likely to have a history of mental health treatment, so these factors should be taken into consideration when re-treating relapsed smokers. Quitting tobacco is often a complex process rather than a singular event, and clinicians should be prepared to assist smokers through repeated cycles of abstinence and relapse before long-term success is achieved

Abstinence Outcomes of Consecutive Quit Attempts

