

Advise and refer: disparities among patients receiving tobacco cessation advice from dentists

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Dental Tobacco Interventions

Test for demographic disparities regarding dentists'

- **Advice** to quit smoking
- **Referral** to a cessation helpline
- **Prescribing** a cessation aid
- **Setting a quit date** with the patient

Test for disparities between types of smokers receiving dental advice

- Menthol v. non-menthol
- Nondaily v. daily
- Light daily v. non light daily
- Nondaily who smoke 10 or fewer days per month v. nondaily who smoke more often

Data

NBER micro data file of the 2010/2011 Tobacco Use Supplement of the Current Population Survey

- Self respondents
- Had been to the dentist in the last 12 months

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2As+R

- **Ask:** Do you use tobacco?
- **Advise:** Encourage the patient to quit smoking.
- **Refer:** Refer patient to quitline or to a trained professional

Odds of patient reporting receiving (1) advice to quit, (2) a referral to a quitline or counseling, (3) a prescription for a tobacco cessation aid, or (4) suggestion to set a quit date from their dentist

	Advise	Refer	Prescribe	Set Quit Date
Income				
\$10,000-\$24,999	0.9	1.29	1.13	1.13
\$25,000-\$49,999	0.84	0.99	0.88	1.1
\$50,000-\$74,999	0.82	0.73	0.77	1.16
Age				
18-24	1.17	1.07	1.31	1.23
50-64	0.92	1.18	0.88	0.94
65 or older	0.55***	1.57	1.75	1.06
Education				
High School Degree or Less	1.38**	1.81	0.99	1.81
Some College	1.26	1.99*	1.07	2.46*
Ethnicity				
NH Black	1.01	1.66	1.54	2.33**
Hispanic	0.7*	1.57	0.75	0.99
NH Asian	2.06**	2.28	1.45	0.82
NH Other	1.19	1.68	1.53	1.15
Metropolitan Resident	1.07	0.83	1.04	0.76
Married	1.03	1.37	1.45	1.68
Female	0.84*	1.21	0.72	0.88
Parent of a child	1.09	1.01	0.90	0.90
100% smokefree restaurant and bar state-law	1.25**	0.98	0.84	0.95
Smokefree home rule	0.99	1.12	0.77	1.05
psuedo R-squared	0.014	0.0273	0.0209	0.0294
N	4034	1238	1240	1238

* significant at p≤0.05
 ** significant at p≤0.01
 *** significant at p≤0.001

Results

Dentists **less likely** to advise

- 65 or older
- Hispanic
- Female
- Were nondaily smokers
- Smoked 1-5 cigarettes daily
- Smoked 10 or fewer days per month

Importance of the dental office for tobacco cessation

- Smoking causes oral diseases and dental therapy failures
- Use of the 2As+R intervention in the Dental setting is an effective tobacco control intervention

Are menthol smokers, nondaily smokers, daily smokers who smoke 1-5 cpd, or nondaily smokers who smoke 10 or fewer days per month more likely to receive (1) advice to quit, (2) a referral to a quitline or counseling, (3) a prescription for a tobacco cessation aid, or (4) suggestion to set a quit date from their dentist

	Advise	Refer	Prescribe	Set Quit Date
Menthol Smoker	0.98	0.67	0.87	0.83
Nondaily smokers	0.66***	0.99	1.33	0.92
Daily smoker who smokes 1-5 cigarettes per day	0.60**	1.58	2.11	1.38
Nondaily smoker who smokes 10 or less days per month	0.65*	0.92	0.74	0.87

* significant at p≤0.05
 ** significant at p≤0.01
 *** significant at p≤0.001

Dentists **more likely** to advise

- Had a high school education or lower
- Were Asian

Dentists **more likely** to set a quit date

- Some college education
- Black

Implications

Older smokers are

- More likely to be socially disadvantaged
- Smoke more
- Less likely to be offered cessation services

Elderly individuals are in need of tobacco cessation intervention

Dental offices can be a point of intervention

Light and nondaily smokers

- Often not identified as smokers by others
- May not identify themselves as smokers

Dentists may need to take special steps to identify light and nondaily smokers

- Ask all patients if smoked even 1 cigarette in last 30 days



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