

Cigarette Smoking, Quit Attempts, and Readiness to Quit Among People Who Inject Drugs Receiving Addiction Treatment Services in the Kathmandu Valley, Nepal

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Background: The American Society of Addiction Medicine and the U.S. Public Health Service have recommended the integration of smoking cessation treatment into substance abuse treatment services considering the smoking-related health hazards among people who use drugs. Despite the high burden of smoking and substance abuse, little studies have conducted in low and middle-income countries to describe smoking behaviors among people who use drugs. As a first step to develop smoking cessation intervention, therefore, we measured the prevalence of smoking, quit attempts, and readiness to quit smoking among people who inject drugs (PWID) receiving addiction treatment services. **Methods:** In 2016, we conducted a cross-sectional study among 225 PWID receiving residential addiction treatment services from 20 centers in the Kathmandu Valley. Measures included length of injecting drugs, history of receiving addiction treatment services, smoking initiation age, history of ever and current smoking, prior quit attempts, and readiness to quit smoking. We analyzed data using multivariable logistic regression analyses. **Results:** Of total, 216 (96.0%) PWID were current smokers and 7 (3.1%) were ever smokers. Over one-third of the current smokers (36.1%) attempted to quit smoking in past 12 months. Similarly, 15.3% of the current smokers were willing to quit smoking within six months. Prior quit attempt was significantly associated with higher readiness to quit smoking within six months among the surveyed PWID (21% vs 12%; $p=0.006$). Older age group (26 to 28 years) participants were more likely to report higher readiness to quit smoking within six months than those of younger (18 to 25) participants (26% vs 9%; $p=0.007$). **Conclusions:** The prevalence of smoking was remarkably high among PWID receiving residential addiction treatment services in the Kathmandu Valley, Nepal, suggesting urgent need of systemic response from addiction treatment services and from agencies regulating and funding such services.

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