

Provision of Eye Care Provider Smoking Cessation Advice to Patients with Age-Related Macular Degeneration

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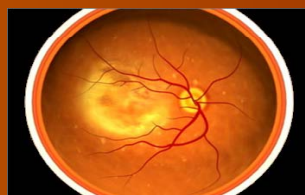
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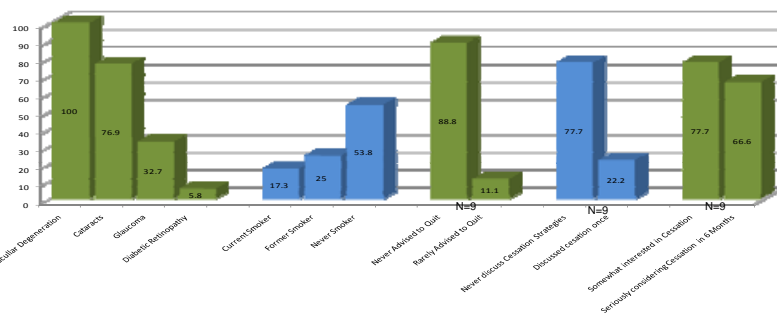


INTRODUCTION

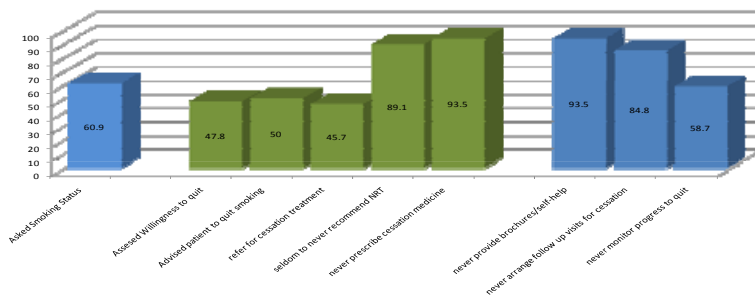
- Age-related macular degeneration (AMD) is the leading cause of severe and irreversible vision loss in the United States.
- Treatment options for AMD are limited; therefore addressing modifiable risk factors is of great importance. Smoking is one of the few modifiable risk factors associated with AMD.
- Presently little is known about AMD patient smoking cessation preferences, and the level of smoking cessation services offered to patients being treated for AMD.



Prevalence of Eye Conditions, Smoking Status, Cessation Advice and Motivation Among 52 Ocular Clinic Patients



Prevalence of Smoking Cessation Advice and Assessment for Treatment Options Among Ocular Health Providers (n=46)



RESULTS

- Patient results:** The reported smoking rate was 17%; the mean patient age was 81 years (standard deviation \pm 8 years).
- The majority of patients reported having more than one ocular condition.
- The majority of smokers reported never being advised to quit by their ocular health care provider; 2/3 reported that they were seriously considering quitting smoking in the next six months.
- Provider Results:** Among the 46 completed ophthalmic provider questionnaires, 60% reported asking their patients about their smoking status with half advising their patients to quit smoking.
- However, providers reported rarely providing advice on the use of nicotine replacement therapy and rarely wrote prescriptions for smoking cessation aids such as Wellbutrin, Zyban, and Chantix.
- The majority of respondents indicated that their undergraduate, graduate or post-graduate medical education training did not provide them with the tools to effectively provide smoking cessation assistance to their patients.

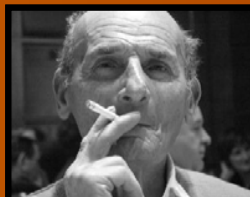
OBJECTIVE

- We examine patient and provider reports of smoking cessation advice in a patient population.

METHODS

Provider Measures & Administration: Clinical faculty, fellows and residents at Bascom Palmer Eye Institute (BPEI) were sent a letter, extending an invitation to participate in a brief, anonymous web-based survey (Survey Monkey). The survey included a modified question set obtained from the Association of American Medical College's national smoking cessation survey of primary health care providers (www.aamc.org/workforce/smoking-cessation-summary.pdf).

Patient Measures and Administration: Patients attending a BPEI ocular clinic were administered a study questionnaire based on standard tobacco questions from the Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System Survey and the National Cancer Institute's Current Population Survey-Tobacco Use Supplement as well as select study-specific questions.



CONCLUSION

- Findings from the present pilot study suggest a desire on the part of eye care providers to do more for their smoking patients and a desire among ocular patients to receive smoking cessation assistance from their provider.
- Tailored smoking cessation programs are therefore needed for this unique patient population, yet to date, there has been little development of such programs.