Comparing Two Ways to Help African Americans Who Are Non-Daily Smokers Quit Smoking

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What was the research about?
People who smoke tobacco are at higher than average risk for cancer, heart disease, and other health problems, even if they are non-daily smokers. Compared with non-daily smokers in other racial and ethnic groups, African Americans who are non-daily smokers have even higher risks of heart disease and cancer.

In this study, the research team looked at two ways to help African-American adults who were non-daily smokers quit smoking. One way included counseling plus nicotine replacement therapy, or NRT. NRT includes nicotine gum, patches, or lozenges to help control nicotine cravings. The team compared people who had counseling and NRT with people who had only counseling.

What were the results?
The percent of people who quit smoking didn't differ much between the two groups.

- After 12 weeks, 11 percent of those who had NRT and counseling and 9 percent of those who had only counseling had quit smoking.

- After 26 weeks, 7 percent of people in each group had quit.

People who had NRT and counseling reported more days without smoking and fewer total cigarettes used in the past month than those who only had counseling.

The two groups also didn't differ in
- Exposure to nicotine or a chemical found in tobacco that causes cancer
- Use of other tobacco products, such as chewing tobacco

Who was in the study?
The study included 278 African-American adults who reported smoking cigarettes between 4 and 27 days in the past month. The average age was 49, and 51 percent were women. All attended a clinic that serves people with low incomes in Kansas City, Missouri.

What did the research team do?
The research team assigned people by chance to one of two groups: NRT plus counseling or counseling only. In both groups, people set a quit date for two weeks from the start of the study. They first met one-on-one with a counselor. Then at 1, 4, 8, and 10 weeks, they had counseling sessions by phone. Tailored for African-American communities, the sessions aimed to

- Increase knowledge about the risks of non-daily smoking and the benefits of quitting smoking
- Promote skills to help quit smoking

In one group, people also received their choice of NRT, including nicotine gum, patches, or lozenges.
At 4, 8, and 12 weeks, people reported the number of cigarettes they smoked and other tobacco products used in the past month. They also reported how many days in the past month they didn't use tobacco. At 12 and 26 weeks, the research team checked if people had quit smoking. They collected urine samples to measure exposure to nicotine and the cancer-causing chemical.

Adults who were non-daily smokers, doctors, and tobacco quitline staff advised on the study.

What were the limits of the study?
On average, people took less NRT than recommended. Results may have differed if people used NRT at the recommended dose.

People may be more likely to use some forms of NRT, like the nicotine patch. Future research could focus on these treatments.

How can people use the results?
People helping African-American adults who are non-daily smokers quit smoking can use the results.

To learn more about this project, visit www.pcori.org/Nollen275.