E-cigarettes and primary care

A cross-sectional survey of nurses and GPs across the UK

October 2019

Together we will beat cancer
Executive Summary

Background
Smoking remains the leading cause of preventable illness, cancer, and avoidable death in the UK\(^1\), placing an enormous burden on the UK’s health service\(^2\). Encouraging patients to quit smoking is therefore key for improving health outcomes for those who currently smoke.

Primary care clinicians have an important role to play in supporting smoking cessation, by delivering brief advice to patients who smoke, prescribing pharmacotherapy, or referring them to specialist stop smoking services.

Electronic cigarettes (e-cigarettes) provide an alternative method for smoking cessation. Their long-term health impacts are unknown and it is widely agreed that they should not be used by non-smokers and young people. Evidence currently suggests that they are much less harmful than smoking cigarettes\(^3-7\), and they can be an effective cessation tool\(^8-11\). In fact, despite being a relatively new product, they are now the most used tool for smoking cessation in the UK, used in around 3 in 10 quit attempts\(^12\). Several organisations in the UK, including Public Health England, the Royal College of Physicians, and the Royal College of General Practitioners, now recommend that clinicians give advice on e-cigarettes as one option to help their patients quit smoking. Despite these recommendations, qualitative research has found that primary care clinicians face barriers in discussing e-cigarettes with patients who smoke\(^13\).

This study builds on the previous research by surveying primary care nurses and GPs across the UK to gain a quantitative understanding of their advice, beliefs and knowledge around e-cigarettes. It will support policy-makers, professional bodies and health professionals to better understand how to make use of e-cigarettes as a tool to quit smoking in the clinical setting.

Key findings

E-cigarettes are frequently brought up in conversations between clinicians and patients who smoke

3 in 10 clinicians say that the topic of e-cigarettes is raised in the majority of conversations about smoking.

Beliefs: Clinicians are often unsure in their beliefs around e-cigarettes

Over 1 in 3 clinicians are unsure if e-cigarettes are safe enough to recommend as a quit tool to patients who smoke.

1 in 3 are unsure whether e-cigarettes are addictive.

Advice: Many clinicians are reluctant to suggest e-cigarettes as a tool to quit smoking

When asked what advice they would give patients on e-cigarettes, 3 in 5 clinicians said “we do not know enough about them so I don’t endorse them”.

2 in 5 said they would feel uncomfortable recommending e-cigarettes to their patients who smoke.

1 in 6 clinicians said they would never recommend using e-cigarettes to patients who smoke.

There was no clear agreement as to whether clinicians would primarily recommend e-cigarettes as a first line or last resort therapy.
Knowledge: Many clinicians feel they lack knowledge on e-cigarettes

Fewer than 3 in 10 clinicians agree that their current knowledge is sufficient for advising patients about e-cigarettes.

Worryingly, the most cited source of information on e-cigarettes amongst clinicians was news, media and advertising (3 in 5 clinicians). Fewer than 1 in 3 cited government and public health agencies, and only 1 in 10 cited training.

7 in 10 clinicians would like more training on e-cigarettes. However, 1 in 3 don’t see it as a priority.

Barriers: Clinicians are concerned about the long-term safety of e-cigarettes

3 in 10 said that they would not recommend e-cigarettes as they are a possible health risk.

Despite this, 3 in 5 clinicians agreed that using e-cigarettes is a good thing compared to tobacco smoking.

Nearly all clinicians agreed that they would be more likely to recommend e-cigarettes if recommended by professional associations, government, or public health agencies.

Policy recommendations

Embed smoking cessation advice and interventions routinely in primary care practice

Healthcare professionals should routinely employ very brief advice to initiate conversations with patients about stopping smoking.

They should be aware of treatment options available in their local area, and prescribe clinically-appropriate medicines, refer patients to specialist stop smoking services, and support the use of e-cigarettes as an aid to stop smoking.

Improve communication and dissemination of consistent, evidence-based messages about e-cigarettes to primary healthcare professionals

Governments, the health service, professional bodies and non-government organisations should more effectively signpost clinicians to clinical guidance on e-cigarettes.

Guidance on e-cigarettes should outline the unknown questions on long-term effects, their relative safety compared to combustible tobacco and provide clear, evidence-based recommendations on use as a cessation tool for patients with specific characteristics. It should also be frequently reviewed to ensure that recommendations are based on the latest evidence.

Incorporate information on e-cigarettes in education and training programmes

All smoking cessation education and training programmes in the UK should incorporate evidence-based information and guidance about a range of smoking cessation interventions and tools, including e-cigarettes.
License e-cigarettes as a smoking cessation tool

Cancer Research UK supports light-touch Medicines and Healthcare products Regulatory Agency (MHRA) licencing of e-cigarettes making cessation claims. This would also provide a system for assessing the products and evidence supporting their claim, and for tracking adverse reactions.

Methodology

An online UK-wide survey of over 2,000 primary care providers, including GPs, nurses in primary care, district nurses and other healthcare professionals including healthcare assistants, was undertaken. The survey focussed on current clinician knowledge about e-cigarettes and about current guidelines, as well as healthcare provider attitudes toward the use and recommendation of e-cigarettes for harm reduction and smoking cessation.

Report

This report should be referred to as follows:


Cancer Research UK

Cancer Research UK is the world’s largest independent charity dedicated to saving lives through research. We support research into all aspects of cancer which is achieved through the work of over 4,000 scientists, doctors and nurses. In 2018/19, we committed £546 million to fund and facilitate research in institutes, hospitals and universities across the UK. Thanks to research, survival in the UK has doubled since the 1970s so, today, 2 in 4 people survive their cancer. Our ambition is to accelerate progress and see 3 in 4 patients surviving their cancer by 2034. We receive no funding from Government for our research.

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Cancer Research UK is a registered charity in England and Wales (1089464), Scotland (SC041666) and the Isle of Man (1103)

http://www.cancerresearchuk.org/
References