

## CONNECTING PATIENTS WHO USE TOBACCO TO CARE.

### WHAT IS THE COLORADO QUITLINE?

The Colorado QuitLine is a FREE service designed to help Coloradans quit using any form of tobacco or nicotine product. Whether patients prefer to connect online, over the phone, through text, chat or e-coaching, QuitLine coaches are ready to help. Each QuitLine client begins their quit journey by answering a short series of confidential intake questions that help coaches deliver tailored support options. Trained coaches work with clients to develop personalized treatment plans that include FDA-approved cessation medications and supportive coaching sessions to build practical skills for managing cravings and stress.

### WHY USE THE COLORADO QUITLINE?

Research shows that people who use Colorado QuitLine services are more likely to quit successfully than people who try to quit on their own. Since 2002, the Colorado QuitLine has been offering evidence-based solutions to help people who use tobacco get compassionate, effective support for their nicotine dependence.

### WHO DOES IT SERVE?

- All Colorado residents 12 years of age and older, regardless of income or health insurance status.
- People seeking help for use of any nicotine-containing product, including cigarettes, cigars, smokeless tobacco products, and e-cigarettes.
- People who use tobacco in any stage of readiness: people ready to set a quit date, those just contemplating quitting and those who have relapsed.

### The QuitLine welcomes:

**ALL** races • religions • genders  
countries of origin • abilities  
ethnicities • sexual orientations

**We stand with you.**

### WHAT DOES IT OFFER?

- Call center open 7 days/week; 5 am-11 pm MST, offering coaching services in all languages.
- Five coach-initiated check-in calls.
- COQuitLine.org for 24/7, self-guided, web-based support.
- Live chat support and e-coaching now available 24/7.
- Up to 8 weeks of FREE nicotine replacement therapy products (patches, gum, and lozenges) for up to 2 quit attempts per year if the client is 18 years of age and over and medically eligible. Provider consent for nicotine replacement therapy (NRT) is required for people who are pregnant or breastfeeding or who have been previously advised not to use NRT.

## WHAT DOES IT OFFER? (CONT.)

- Chantix may be available for clients who qualify
- Companion print materials, text messages, and email programs.

For more resources in treating tobacco dependence visit: [tobaccofreeco.org/health-providers/](http://tobaccofreeco.org/health-providers/)

## Brief advice by a health care provider can significantly increase the chances that a patient will quit tobacco.

Referring patients to the QuitLine takes just a few minutes.

**ASK** every patient at each appointment about tobacco use, including smokeless tobacco and e-cigarettes, and document status.

**ADVISE** every person who uses tobacco to quit with a clear, strong, non-judgmental, personalized health message about the benefits of quitting.

**REFER** patients to the Colorado QuitLine. **Offer treatment to every person who uses tobacco**, including the option of QuitLine services. Active referrals to the QuitLine from providers (using fax, web or e-referral) are more effective than asking a patient to call.

## HOW TO REFER PATIENTS TO THE QUITLINE

**STEP 1** The patient provides verbal consent for program participation and to receive text messages.

**STEP 2** Care team member or provider initiates referral using either QuitLine Fax Referral form, [Provider Web Referral](#) portal or e-referral through electronic health record (EHR). Copies of the fax form are available at [www.coquitline.org](http://www.coquitline.org).

**STEP 3** Provider indicates on the fax or web referral if approving\* nicotine replacement therapy (NRT) for patients who are pregnant or breastfeeding, or for those who have previously received medical advice to not use NRT.

**STEP 4** Provider sends the completed referral to National Jewish Health either via fax (1-800-261-6259) or by [Provider Web Referral](#) or e-referral.

**STEP 5** QuitLine staff calls the patient to enroll them in the program, and schedule personalized coaching sessions. If the patient consents to text messages (step 1), the patient will receive a text message prior to the QuitLine staff phone call to alert the patient to the call.

**STEP 6** QuitLine sends information about the patient's enrollment status and progress to the health care provider to support follow-up with the patient. Patients who enroll themselves do not trigger QuitLine progress notes to the provider.

\*Provider consent is not required for Nicotine Replacement Therapy obtained through the QuitLine, except in cases outlined above; pregnant or breastfeeding, or persons who have previously received medical advice to not use NRT. In these cases, provider consent may be given by any clinician with prescriptive authority in Colorado.

## PREGNANCY

### Treating pregnant patients who use tobacco or vape

## WHAT IS THE TOBACCO USE RATE AMONG PREGNANT PERSONS IN COLORADO?

Nicotine is a health danger for pregnant women and developing babies and can damage a developing baby's brain and lungs. Use during pregnancy remains a major preventable cause of disease and death of the pregnant person, fetus and infant.<sup>1</sup> Pregnancy is an important life event that prompts people to evaluate their tobacco use. The good news is that the majority of people quit smoking and vaping during pregnancy. But:

- 7.1% of all pregnant persons continue to smoke during the last three months of their pregnancy.<sup>2</sup>
- 1.2% of all pregnant persons continue to use e-cigarettes during the last three months of their pregnancy.<sup>2</sup>
- Because nicotine dependence is a chronic relapsing disorder, approximately 44% of pregnant persons in Colorado who successfully quit smoking during pregnancy relapse within six months of giving birth.<sup>2</sup>

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## WHAT ARE THE BENEFITS OF QUITTING DURING PREGNANCY?

Tobacco use during pregnancy and postpartum presents significant risks to fetal development and has been linked to 4.4% of premature births, 13.1% of low birthweight births, 23.2% of SIDS cases, as well as other adverse outcomes.<sup>3</sup> Quitting during pregnancy reduces the risk of all of these outcomes.

## WHAT IS THE COLORADO QUITLINE PREGNANCY PROGRAM?

The QuitLine offers a Pregnancy Program designed to support tobacco cessation and relapse prevention during pregnancy and postpartum. This enhanced program features nine coach-initiated check-in calls, including five during pregnancy and four postpartum, and up to \$220 in incentives for participation (based on completed sessions).

Designated coaches trained in perinatal tobacco treatment remain with the participant throughout their quit journey. To be eligible for the QuitLine's Pregnancy Program, callers must be pregnant at the time of enrollment. Individuals interested in quitting tobacco after delivery can enroll in other QuitLine services. Colorado QuitLine offers pregnant participants up to eight weeks of free nicotine replacement therapy with written consent from a provider.

<sup>1</sup> The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. National Center for Chronic Disease Prevention and Health Promotion (US) Office on Smoking and Health. Atlanta (GA): Centers for Disease Control and Prevention (US); 2014

<sup>2</sup> Colorado Pregnancy Risk Assessment Monitoring System. (2018)

<sup>3</sup> Dietz PM, England LJ, Shapiro-Mendoza CK, Tong VT, Farr SL, Callaghan WM. Infant morbidity and mortality attributable to prenatal smoking in the U.S. Am J Prev Med 2010; 39: 45-52.

## Additional considerations for talking about tobacco with expectant parents

Brief advice by a health care provider can significantly increase the chances that a patient will quit tobacco.

- consider nicotine replacement therapies under close supervision
- impact of secondhand smoke on family members
- offer family members who smoke a referral to treatment.

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**ASK** every patient at each appointment about tobacco use and secondhand smoke exposure, including smokeless and e-cigarettes, and document status.

**ADVISE** every person who uses tobacco to quit with a clear, strong, non-judgmental, personalized health message about the benefits of quitting.

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## SMOKELESS TOBACCO

Treating patients who use smokeless tobacco (chew, snus, snuff)

### WHO USES SMOKELESS TOBACCO IN COLORADO?

7% of adult men in Colorado reported using smokeless tobacco in 2018. This percentage is relatively unchanged since 2008 and is higher than the national average of 6.6%. Smokeless tobacco rates are significantly higher in rural parts of Colorado vs. non rural. In fact, some rural counties report rates greater than three times the state average.<sup>1</sup>

Among high school males, Colorado is doing significantly better than the national average, but rural smokeless tobacco use among high school males remains high.

In 2018, there was a higher use of chewing tobacco in current smokers than in former or non-smokers. This dual use of tobacco can lead to higher levels of nicotine exposure.

**Learn more about the current burden of tobacco use in your community.**

**Visit our state surveillance data visualization tool. <https://www.colorado.gov/pacific/cdphe/vision-data-tool>**

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### WHY IS SMOKELESS TOBACCO USE A PROBLEM?

Smokeless tobacco use can lead to addiction and serious health consequences, including cancers of the mouth, esophagus and pancreas. The use of smokeless products can also increase the risk of death from heart disease and stroke<sup>1</sup> and may lead to gum disease, tooth decay, and tooth loss.

### WHAT CAN PROVIDERS DO TO HELP PATIENTS QUIT CHEWING?

Screen every patient at every visit for all forms of tobacco use, including smokeless tobacco. Strongly encourage all people who use smokeless tobacco to quit and offer the same counseling interventions recommended for cigarette smokers. Due to the harmful dental effects of smokeless tobacco, brief advice given by an oral health provider can be particularly effective in motivating people who use smokeless tobacco to quit.

<sup>1</sup> 2018 Behavioral Risk Factor Surveillance System (BRFSS).

## Chantix and nicotine replacement therapy lozenges are both promising treatment practices.

The Colorado QuitLine offers free coaching and **nicotine replacement therapy** to all Coloradans who use tobacco, and Chantix is covered by many insurance plans, including Colorado Medicaid. QuitLine coaching includes tailored treatment plans for all people who use smokeless tobacco regardless of their degree of readiness to quit.

Nicotine replacement patches and gum can also help reduce withdrawal symptoms and cravings.

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