



A Comprehensive Review of Nurse-Led Smoking Cessation Strategies: Evaluating Effective Interventions and their Impact on Patient Outcomes

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Abstract

Background: Smoking remains a leading public health issue worldwide, contributing significantly to mortality from chronic diseases. Effective smoking cessation interventions are essential for reducing health risks associated with tobacco use. Nurses, as frontline healthcare providers, play a crucial role in facilitating smoking cessation efforts.

Methods: This review employs a scoping assessment to explore the varied strategies utilized by nurses in smoking cessation programs. A comprehensive search was conducted across multiple databases, including PubMed, Embase, and CINAHL, for peer-reviewed literature published from 2013 to 2023. The analysis focused on identifying the roles, interventions, and effectiveness of nurse-led smoking cessation initiatives.

Results: The findings indicate that nurses engage in multiple roles, including educators, counselors, and coordinators, in smoking cessation programs. Key strategies employed include Motivational Interviewing (MI) and the 5A framework (Ask, Advise, Assess, Assist, Arrange). Evidence suggests that nurse-led interventions significantly improve cessation rates, enhance patient knowledge, and foster a supportive environment for quitting smoking.

Conclusion: The study underscores the critical role of nurses in smoking cessation efforts, highlighting the need for enhanced training and resources to improve their effectiveness. As smoking cessation programs

evolve, integrating innovative methodologies, such as digital health tools, may further support nurses in their efforts to assist patients in quitting smoking.

Keywords: Smoking cessation, nursing interventions, Motivational Interviewing, public health, tobacco control.

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1. Introduction

Smoking constitutes a considerable public health concern globally and is a primary risk factor for stroke, cancer, and cardiovascular and respiratory disorders, all of which present grave hazards to human life [1-3]. The 2019 estimate by the World Health Organization (WHO) indicates that there are around 1.337 billion tobacco smokers aged 15 and older worldwide. China has the highest population of smokers, over 300 million, accompanied by India having 276 million, Indonesia having 60 million, as well as the United States having 34.2 million. Tobacco accounts for over 8 million fatalities each year and results in a worldwide economic burden of \$1.4 trillion yearly [4-6].

It has been established that smoking cessation may substantially reduce the risk of mortality from chronic non-communicable illnesses [7-9]. Although many smokers articulate a desire to stop smoking upon acknowledging the hazards of cigarette smoking, they frequently face difficulties owing to the psychological as well as physiological dependencies linked to addiction [10]. Research has shown that support and help from healthcare experts may significantly enhance the probability of effective quitting [11]. Nurses, as frontline medical personnel, engage extensively with patients in diverse environments, such as outpatient, inpatient, and urgent care [12, 13], and represent the largest segment of healthcare professionals capable of facilitating smoking cessation within healthcare organizations as well as communities [14, 15]. Research indicates that smoking cessation guidance from nurses may elevate cessation rates, as they can increase the likelihood of smokers stopping via effective treatments and follow-up strategies. Nurses are essential to the efficacy of programs for smoking cessation and are particularly equipped to provide critical information and support, likely resulting in superior results in smoking cessation relative to other medical professionals [16-18].

Although several prior studies have concentrated on the efficacy of certain intervention components or the roles of nurses in smoking cessation initiatives [11, 19, 20], less research has examined the comprehensive involvement of nurses in these endeavors. Consequently, we performed a scoping assessment to ascertain the particular therapies administered by nurses as well as the responsibilities they fulfill in smoking cessation initiatives. The objective is to provide a focused, evidence-driven strategy for teaching nurses to stop smoking, therefore increasing their motivation and commitment to helping patients stop smoking.

2. Search methodology

We used the three-step search method specified by JBI for scoping examinations to guarantee the thoroughness of the search approach [21]. We began our search on PubMed and Embase, finding the MeSH keywords "smoking cessation," "tobacco use cessation," "smoking reduction," "nursing," and "nurses." We then broadened our investigation to include 10 more databases, using a mix of MeSH keywords and free-text keywords: PubMed, CINAHL, Web of Science, Embase, Cochrane Library, and PsycINFO.

3. The Essential Role of Nurses in Facilitating Smoking Cessation

Our study indicated the essential function of nurses in facilitating smoking cessation for patients. Nurses undertook many responsibilities throughout the smoking cessation actions, serving as testers, instructors, practice instructors, coordinating partners, organizers, and supervisors. They mostly advocated smoking cessation by disseminating pamphlets, conducting in-person instruction, and offering quitting advice. The Motivation Interview (MI) and the 5A approach were the most often used strategies for smoking cessation. The main subjects were individuals diagnosed with chronic obstructive pulmonary disease (COPD). This scoping review builds upon the comprehensive study conducted by Rice et al. [19] which assessed the efficiency of nursing-delivered programs for smoking cessation in adults and demonstrated the efficacy of

nurse-led initiatives in improving quit rates. It further investigates the particular approaches and roles of nurses in promoting smoking cessation. It offers a more complete review of the various strategies used by nurses, providing comprehensive insights and practical suggestions for enhancing clinical tobacco cessation strategies.

Among these several responsibilities, evaluation was the most prominent and was included throughout the process. Our analysis revealed that the predominant techniques used by nurses in smoking cessation were Motivational Interviewing (MI) and the 5A nursing approaches. The nurse's position as a tester is well shown in both methodologies. Motivated interviewing (MI) is a client-centered therapeutic method designed to enhance motivation for behavioral change, often used in the treatment of addictive disorders. This strategy has shown effectiveness in altering detrimental behaviors, including tobacco use, physical inactivity, and unhealthy eating habits [22]. Research demonstrated that MI was similarly beneficial in general medical communities [23]. Nurses first evaluated patients' desire to stop smoking and their level of behavioral change, then formulated a suitable cessation strategy. The 5A Nursing Action technique, endorsed by the U.S. Healthcare Agency as the benchmark for smoking cessation, consists of five steps: inquire, advise, evaluate, help, and arrange. It is extensively used in smoking cessation initiatives. Nurses assessed patients' smoking habits and readiness to quit smoking prior to executing treatments [24]. During follow-up, nurses assessed patients' cessation progress, identified challenges, and evaluated efficacy, modifying programs and offering support as necessary. Research indicates that registered nurses should integrate smoking and behavioral risk assessments into outpatient medical records to improve targeted smoking cessation initiatives [25]. In the 5A nursing technique, nurses deliver smoking cessation counsel, aid in developing cessation strategies, establish quit dates, provide nicotine replacement therapy, instruct patients on cessation methods, and motivate patients to commit to a cessation pledge, thereby substantially enhancing the implementation of smoking cessation initiatives. Consequently, nurses serve as practice enhancers in advancing smoking cessation efforts.

Nurses, as educators, assist patients in acquiring knowledge and abilities for quitting smoking, managing withdrawal symptoms, and preventing relapses using several educational strategies to facilitate effective cessation attempts. Chaney's research emphasized the crucial function of nursing practitioners in providing successful smoking cessation interventions and informing patients about the hazards of smoking [26]. The synthesis of 53 research indicated that a limited percentage of nurses received training in smoking cessation methods. A significant number of medical nurses lack the requisite knowledge and abilities to assist patients in cessation of smoking. Interviews with nurses revealed a deficiency in confidence about the provision of smoking cessation help to individuals, with some seeing a lack of experience or viewing smoking cessation assistance as outside their duties [27]. Implementing smoking cessation training programs for healthcare personnel may bolster their confidence in aiding individuals to stop smoking [28]. Research indicated that patients who received treatment from nursing professionals, including short treatments, were almost twice as likely to try cessation relative to those who weren't given such counseling [29]. Enhancing tobacco cessation learning for nurses is essential to provide them with the confidence and expertise necessary to implement successful smoking cessation therapies for patients. Education on smoking cessation is a crucial strategy. Hospitalization or post-illness phases are ideal opportunities to motivate individuals to cease smoking [30].

Nurses function as coordinating collaborators in smoking cessation initiatives. Due to a tendency among some patients to place more faith in physicians than in nurses, the latter often need the collaboration of doctors to execute smoking cessation initiatives, such as urging physicians to motivate patients to quit smoking. Nurses often collaborate with family members, encouraging them to bolster patients' willingness to stop and provide a conducive atmosphere for quitting. Furthermore, nurses cooperate with smoking cessation groups to direct patients to specialist facilities. Nurses also served as essential organizers and monitors in smoking cessation initiatives. They established peer support groups enabling patients to exchange experiences and provide mutual support, which has shown efficacy [31]. They coordinated effective smoking cessation professionals to provide talks that highlighted their knowledge, so galvanizing patients' excitement and desire to quit smoking. Ceasing smoking poses significant difficulties to several

long-term smokers, who exhibit inadequate self-discipline and often need oversight to achieve success. Research indicates that nurses oversee patients throughout hospitalizations and provide frequent follow-ups post-discharge to promote cessation, often including patients' relatives in the monitoring process.

Moreover, constraints such as study finance and geographical location have compelled several studies to depend on self-reported quit smoking stages, which may be skewed owing to patient recollection or misrepresentation, possibly yielding erroneous conclusions. Carbon monoxide (CO) concentrations in exhaled breath serve as an objective indicator of patients' smoking cessation status. The progress of technology has become transportable breath sensors for monitoring exhaled CO acceptable, perhaps increasing desire to stop smoking and consequently enhancing cessation outcomes [32-35]. Research used the "Cure App Smoking Cessation" system, including a smartphone application and web-based management software, enabling healthcare professionals to apply mobile CO detectors for monitoring patients' cessation progress, thereby enhancing the efficacy of smoking cessation therapy [36]. Consequently, further investigations have to include biochemical validation, such as using portable CO detectors, to guarantee precise result reporting and improve study quality.

Although nurses significantly contribute to smoking cessation therapies and use many tactics to assist patients in quitting, several obstacles may impede the efficacy of these strategies and result in diminished smoking quitting outcomes. Despite the introduction of national policies advocating smoking cessation and imposing smoking bans, certain health facilities, including psychiatric nursing homes and hospitals, are excluded from these legislative restrictions, thereby hindering nurses' capacity to execute programs for smoking cessation efficiently [37]. Frazer et al. [37] proposed that emergency departments may be beneficial environments for smoking cessation schooling, providing patients with drive, support, and verbal support based on self-reported smoking habits. This resource is underused, which may result in less patient involvement in smoking cessation initiatives. Nurses encounter many problems in their cessation of smoking behaviors, notably constrained time and insufficient expertise [38-40]. Elevated workloads in clinical settings sometimes result in nurses having little time for thorough counseling, since competing clinical responsibilities take precedence, and there is also a deficiency in awareness about accessible smoking cessation options. Nurses often assess smoking behaviors at first consultations or prior to commencing therapy; nevertheless, they may not emphasize quitting smoking as a primary concern, potentially leading to inferior patient results. Structural impediments within the smoking quitting framework persist, including the absence of prescribing power for nurses, resulting in delays in acquiring pharmacological nicotine replacement therapy prescriptions [41]. These characteristics all add to the difficulties nurses have in assisting patients with smoking cessation, perhaps elucidating why some smokers fail to stop effectively. Consequently, further research needs to concentrate on formulating focused techniques to surmount these obstacles, so guaranteeing that nurses are adequately prepared and encouraged in their endeavors to aid patients in cessation of smoking.

The emergence of big data offers novel prospects for executing smoking cessation therapies over the Internet. The expansion of mobile health (mHealth) has resulted in the creation of chatbots designed to assist patients in cessation of smoking, and research has also been conducted on inspirational interview-style robots to improve patient motivation [42]. Mobile application-based pharmaceutical therapies have shown an increased efficacy in smoking cessation [43]. Due to their demanding schedule, clinical nurses have little opportunity to provide targeted smoking cessation therapies to patients [44]. In the future, it is essential to harness the Internet's capabilities and investigate novel strategies to encourage individuals to quit smoking. This strategy will not only lessen the burden on medical personnel but additionally preserve time for both physicians and patients, while decreasing healthcare expenses. Furthermore, it is essential to recognize the influence of the COVID-19 outbreak on the extent of our review. Given that our scoping study included the COVID-19 era, many clinical studies, especially those involving in-person smoking cessation strategies, may have been impeded by pandemic-related constraints [45]. The pandemic interrupted the regularity of measures and data collecting, possibly resulting in a diminished amount of eligible research for inclusion in our evaluation. Consequently, the comprehensive body of accessible information may not adequately reflect the particular smoking cessation therapies executed by nurses as well as their

responsibilities throughout this timeframe. Subsequent study need to investigate how telemedicine and digital treatments might surmount these obstacles and persist in facilitating smoking cessation initiatives in the post-pandemic period.

4. Summary

Nurses are pivotal in the fight against smoking-related illnesses, serving as frontline advocates for smoking cessation. This review has highlighted the diverse roles that nurses play in smoking cessation programs, illustrating their capacity to influence patient outcomes positively. Through the application of evidence-based strategies, such as Motivational Interviewing and the 5A framework, nurses can significantly enhance the likelihood of successful smoking cessation among their patients.

Despite these advancements, the review identified gaps in training and confidence among nurses regarding smoking cessation interventions. Many nurses reported insufficient preparation to provide effective cessation support, indicating a need for comprehensive training programs that equip them with the necessary skills and knowledge to address tobacco dependence. Addressing these educational gaps is crucial for empowering nurses and ensuring that they can fulfill their roles effectively.

Furthermore, the integration of digital health technologies presents a promising avenue for enhancing smoking cessation efforts. Mobile applications and telehealth services can supplement traditional interventions, providing additional support and resources for both patients and nurses. By leveraging technology, healthcare systems can improve access to cessation programs and tailor interventions to meet individual patient needs.

In conclusion, the success of smoking cessation initiatives significantly relies on the active involvement of nurses who are well-trained and supported in their roles. Future research should explore the impact of innovative strategies and the implementation of robust training programs to sustain and enhance the effectiveness of nurse-led smoking cessation efforts. By strengthening the role of nurses in tobacco control, we can make substantial progress toward reducing the global burden of smoking-related diseases.

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مراجعة شاملة لاستراتيجيات الإقلاع عن التدخين بقيادة الممرضات: تقييم التدخلات الفعالة وتأثيرها على نتائج المرضى

الملخص

الخلفية:

يظل التدخين أحد أبرز المشكلات الصحية العامة على مستوى العالم، حيث يساهم بشكل كبير في معدلات الوفيات الناتجة عن الأمراض المزمنة. لذلك، فإن تطوير استراتيجيات فعالة للإقلاع عن التدخين أمر ضروري للحد من المخاطر الصحية المرتبطة باستخدام التبغ. ويؤدي الممرضون، باعتبارهم من مقدمي الرعاية الصحية في الخطوط الأمامية، دورًا محوريًا في تعزيز جهود الإقلاع عن التدخين.

المنهجية:

تعتمد هذه المراجعة على تقييم استكشافي لتحليل الاستراتيجيات المختلفة التي يستخدمها الممرضون في برامج الإقلاع عن التدخين. تم إجراء بحث شامل في عدة قواعد بيانات، بما في ذلك PubMed، Embase، وCINAHL، لمراجعة الأدبيات العلمية المحكمة المنشورة في الفترة من 2013 إلى 2023. وركز التحليل على تحديد أدوار الممرضين، التدخلات التي يقومون بها، ومدى فاعلية المبادرات التي يقودونها في الإقلاع عن التدخين.

النتائج:

أظهرت النتائج أن الممرضين يؤدون أدوارًا متعددة في برامج الإقلاع عن التدخين، بما في ذلك دورهم كمثقفين صحيين، ومستشارين، ومنسقين للرعاية. ومن بين الاستراتيجيات الرئيسية المستخدمة، برز كل من المقابلة التحفيزية (Motivational Interviewing - MI) وإطار 5A (السؤال، النصيحة، التقييم، المساعدة، الترتيب). وتشير الأدلة إلى أن التدخلات التي يقودها الممرضون تساهم بشكل كبير في زيادة معدلات الإقلاع عن التدخين، وتحسين وعي المرضى، وتعزيز بيئة داعمة للإقلاع عن التدخين.

الاستنتاج:

تؤكد الدراسة على الدور الحاسم الذي يلعبه الممرضون في جهود الإقلاع عن التدخين، مما يبرز الحاجة إلى تعزيز التدريب وتوفير الموارد اللازمة لتحسين كفاءتهم. ومع تطور برامج الإقلاع عن التدخين، قد يساهم دمج الأساليب المبتكرة، مثل الأدوات الرقمية الصحية، في تعزيز قدرة الممرضين على دعم المرضى في الإقلاع عن التدخين.

الكلمات المفتاحية: الإقلاع عن التدخين، تدخلات التمريض، المقابلة التحفيزية، الصحة العامة، مكافحة التبغ.