U.S. Preventive Services

USPSTF Bulletin

An independent, volunteer panel of national experts in prevention and evidence-based medicine

U.S. Preventive Services Task Force Seeks Comments on Draft Recommendation Statement for Behavioral and Pharmacotherapy Interventions for Tobacco Smoking Cessation in Adults, Including Pregnant Women

Task Force recommends that clinicians ask all adults and pregnant women about smoking and offer interventions to help smokers quit

WASHINGTON, D.C. – May 5, 2015 – The U.S. Preventive Services Task Force (Task Force) today posted a draft recommendation statement on behavioral interventions and medications for tobacco smoking cessation in adults, including pregnant women, stating that all adults who smoke should be encouraged to quit with appropriate cessation aids.

The Task Force is providing an opportunity for public comment on this draft recommendation statement and draft evidence review until June 1. All public comments will be considered as the Task Force develops its final recommendation and final evidence review.

Smoking is the leading preventable cause of disease, disability, and death in the United States. It results in more than 480,000 premature deaths each year and accounts for approximately one in every five deaths. Smoking during pregnancy increases the risk of complications before birth,

Grades in this recommendation:

- A: Recommended.
- I: The balance of benefits and harms cannot be determined.

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low birth weight, and impaired lung function in childhood. It is estimated that 42.1 million U.S. adults (almost 18% of the population) are current smokers.

"Quitting smoking can be difficult, but it is one of the most important actions people can take for their health," says Task Force chair Albert Siu, M.D., M.S.P.H. "Fortunately, there are many effective smoking cessation aids available to help."

The Task Force reviewed evidence on smoking cessation interventions, including behavioral interventions, medications, and more.

For nonpregnant adults, the Task Force recommends behavioral therapy or U.S. Food and Drug Administration–approved medications, including nicotine replacement therapy, alone or in combination. This is **a grade A recommendation**. For pregnant women, the Task Force recommends behavioral interventions. This is also **a grade A recommendation**.

There was not enough evidence for the Task Force to assess the benefits and harms of the use of ecigarettes for smoking cessation in adults, or the use of smoking cessation medications, including nicotine replacement therapy, in pregnant women. The Task Force has issued **an I statement** and calls for more research on these interventions. "Clinicians should ask all patients whether they smoke, and provide appropriate interventions to help smokers quit," says Task Force member Francisco Garcia, M.D., M.P.H. "We're fortunate that doctors and patients have a choice of many interventions that have been proven to be effective."

The Task Force's draft recommendation statement and draft evidence review have been posted for public comment on the Task Force Web site at <u>www.uspreventiveservicestaskforce.org</u>. Comments can be submitted from May 5 to June 1, 2015 at

http://www.uspreventiveservicestaskforce.org/Page/Name/us-preventive-services-task-forceopportunities-for-public-comment. A fact sheet that explains the draft recommendation statement in plain language is also available.

The Task Force is an independent, volunteer panel of national experts in prevention and evidencebased medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

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