A5-18: Hospital Based Smoking Cessation Interventions for Patients Admitted with Respiratory Diseases: An Integrative Literature Review

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Abstract:

Introduction: Smoking related illness continues to account for a significant amount of hospitalizations each year. Pneumonia (PNA), Chronic Obstructive Pulmonary Disease (COPD), and Asthma account for approximately 2 million hospital admissions annually. As many as 53% of readmitted patients with pneumonia are current smokers and 31% are former smokers, reinforcing the need for active tobacco cessation interventions among patients with respiratory disorders. The purpose of this integrative literature was to determine the impact of nurse driven tobacco cessation interventions with patients admitted to the hospital with COPD, PNA or Asthma.

Method(s): The Cochrane, MEDLINE and CINAHL databases were searched from 1996 to April 2009 with the key search words “smoking cessation, tobacco cessation” combined with exploded MeSH key search words “chronic obstructive pulmonary disease, asthma, and pneumonia”. Abstracts and articles were also reviewed to determine if trials included “hospitalized” patients and if tobacco cessation interventions were delivered by nurses.

Results: Only one systematic review identified 5 studies for tobacco cessation interventions with COPD patients of which only two were high-quality and they were in out-patient settings. No studies were identified specific for PNA or asthma tobacco cessation interventions. Several selective and systematic reviews evaluated tobacco cessation interventions during hospitalizations without regard to specific diagnosis.

Discussion & Conclusions: Although the effectiveness of smoking cessation interventions delivered by nurses in hospital settings is widely reported, a comprehensive literature search did not find research studies specific to hospitalized tobacco dependent patients with COPD, PNA or asthma. Opportunities exist for nurses to close the gap with targeted tobacco cessation interventions for patients with acute respiratory disorders.

Abstract History:
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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