



# Dental Patients with Tobacco Dependence

Mark D Macek, DDS, DrPH, FICD, Professor, Professor at University of Maryland School of Dentistry

Niharika Khanna, MD, MBBS, DGO, Professor of Family and Community Medicine, University of Maryland, School of Medicine

# Learning Objectives

- Describe what constitutes tobacco products.
- Identify different oral health problems affecting people who use tobacco products.
- Discuss ways to speak to and support patients to stop using tobacco products.
- Discuss FDA-approved evidence-based strategies for cessation.
- Understand current tobacco cessation resources and the referral process to connect patients.

#### What is a tobacco/ nicotine product

- Cigarettes
- Cigars
- Hookah
- Chewing tobacco
- E-cigarettes, which often contain nicotine
- And many more!



## How do tobacco products affect oral health?

- Periodontal (gum) disease
- Tooth loss
- Smoker's keratosis (whitening of the soft tissue in the mouth)
- Mouth cancer
- Poor healing after gingival surgery
- Poor healing after tooth removal (dry socket)
- Tooth decay
- Decreased taste and smell
- Halitosis (bad taste in the mouth and bad breath)



#### How do tobacco products affect oral health?

BAD BREATH	FTAINING	GUM DISEASE	
The chemicals in cigarette smoke can linger in the mouth and lungs for hours causing the characteristic smoker's breath.	The nicotine and tar in tobacco can make teeth go yellow in a very short time. Some of this staining can be permanent.	Smoking can increase the number of bacteria in the mouth that cause gum disease. In severe cases this can cause the teeth to fall out.	Two thirds of mouth cancer cases are linked to smoking. Second-hand smoke increases the risk for those who have never smoked. Ex-smokers reduce

their risk by a third.

#### Are your health history forms working for you?

#### Which tobacco products are you <u>currently</u> using?

Туре	Yes	No	Amount
Cigarettes	Х		1 pack per day
Cigars / Cigarillos	Х		1-2 per month
Chewing/smokeless tobacco		Х	
Pipe		Х	
E-cigarettes		Х	
Other		Х	

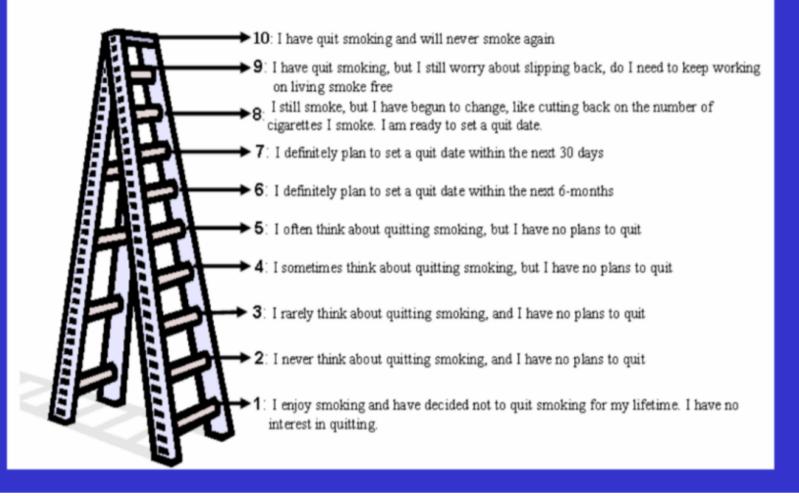


#### Assessing your patient's readiness to quit



#### **Contemplation Ladder**

On the ladder below, each step represents the mindset of various smokers when they think about quitting. Circle the number that best indicates where you are now.



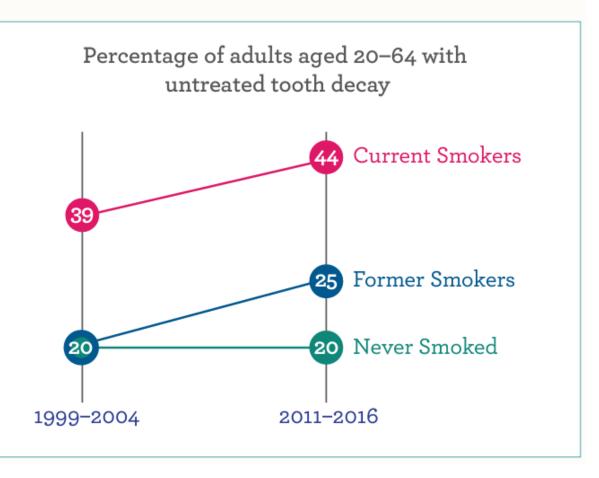
Biener, L., & Abrams, D. B. (1991). The Contemplation Ladder: Validation of a measure of readiness to consider smoking cessation. Health Psychology, 10(5), 360-365.

### How do tobacco products affect oral health?

Untreated tooth decay is higher in people who smoke cigarettes



Among adults aged 20–64 years, over 40% who currently smoke cigarettes had untreated tooth decay.



Source: CDC, Tobacco Use, https://www.cdc.gov/oralhealth/fast-facts/tobacco-use/index.html

### How do tobacco products affect oral health?

#### People who smoke are 3 times more likely to lose all of their teeth



4 in 10 older adults who currently smoke cigarettes lost all of their teeth.

Percentage of adults aged 65 or older who lost all of their teeth, 2011–2016 43% 12% smoker non smoker

Source: CDC, Tobacco Use, https://www.cdc.gov/oralhealth/fast-facts/tobacco-use/index.html

# Benefits of stopping tobacco

- Regardless of age, people can benefit from stopping tobacco:
  - Increased life expectancy
  - Improved quality of life
  - Lower risk of developing or exacerbating chronic conditions
  - $\circ$  Healthier pregnancies
  - Children are less likely to use tobacco if their parents do not use tobacco
  - $\,\circ\,$  Saves money\*
  - \*1 pack/day = \$3,700/year!

#### The power of stigma

- No other legal product is as stigmatized as tobacco
- Stigma prevents people from getting help: "I need to do this on my own"
- Most patients need help to stop permanently
- Fight stigma:
  - Address tobacco use as a chronic condition requiring evidence-based treatment
  - $\,\circ\,$  Support patients for as long as they want help
  - Argue for better coverage of FDA-approved therapies



### Best Practices: Patient Communication

- Ask
  - $\,\circ\,$  "Do you use any tobacco or nicotine products?"
  - $\circ$  "Do you vape or use an e-cigarette?"
- Advise
  - "We know this is hard and we have the tools to treat tobacco use. Stopping will help you feel better and save you money. Can I tell you more?"
  - Avoid the lecture Patients have already heard it and won't accept help if they feel ashamed

#### • Refer

- Maryland Quitline
- UMMC Tobacco Health Practice
- Truth Initiative

## FDAapproved medications Combine controller & rescue types for best results

- Controllers: long-acting meds to make tobacco less satisfying

   Varenicline (CHANTIX)
   Bupropion (Wellbutrin)
   Nicotine Patch
- Rescues: short-acting meds to be used throughout the day for quick relief

   Nicotine lozenge
   Nicotine gum
   Nicotine nasal spray
   Nicotine inhaler - recently discontinued due to supply shortage

#### Patients should start meds BEFORE stopping tobacco.

Continue meds for at least 3-6 months of abstinence, then wean slowly. Patients who stop meds early are more likely to relapse.

#### Can't patients stop cold turkey?

- Nicotine dependence can be even harder to treat than opioid dependence
- Nicotine hijacks the brain into only feeling safe when it is exposed to nicotine. It "tells" the patient common myths and promotes selfsabotage



What nicotine wants you to think	The truth
"I'm not addicted. I can stop whenever I want."	Nicotine makes the patient feel in control but never able to stop right now. "Maybe next time, I'm really stressed right now."
"If I stop smoking, my anxiety and irritability will make me miserable."	These are withdrawal symptoms that make tobacco use a chronic, relapsing disorder. Tobacco relieves the immediate symptoms but exacerbates them long-term.
"The meds are dangerous."	Nicotine wants the patient to be more afraid of the treatment than the dependence. The meds are safe and effective when used correctly.
"Vapes are safer than cigarettes, so I'll switch."	There is no safe level of exposure to a tobacco product. Switching can expose patients to additional health risks, and they may become addicted to the new product.

# Why coaching is important

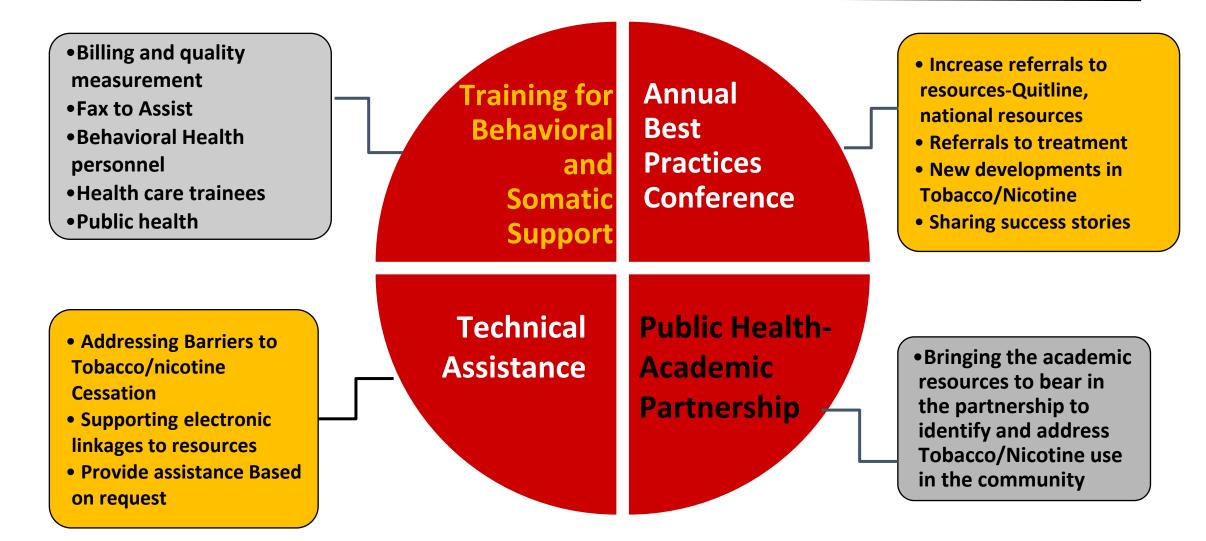
- Education reinforcement
- Patients may not have other support systems
- Motivational interviewing to empower patient
- Coaching helps patients with:
  - $\ensuremath{\circ}$  Insurance barriers
  - $\odot$  Managing side effects
  - $\odot$  Addressing triggers
  - $\odot$  Adhering to the treatment plan





# What resources are available?

#### **Maryland Tobacco Control Resource Center**



## **Maryland Quitline**

- 24/7 support for Maryland residents age 13+
- Offers special programs (pregnancy, youth, behavioral health, etc.)
- Up to 12 weeks of free NRT shipped to patient
- Call 1-800-QUIT-NOW (1-800-784-8669)
- Visit <u>https://smokingstopshere.com/resources/for-healthcare-providers/</u> to view different referral methods



Epic - A Home = Patient Lis	ts 🛗 Schedule 📙 Chart   🌗 Encounter 🖴 In Basket 🗸 Sign My Visits 🔎 My Reports   🌜 Telephone Call 🖕 Refill 🦞	Remind Me Quick Di	Disclosure   🚜 Appts   🗈 Releases 🤸 Mark Pabients For Merge 🧱 Snapboard 🖌 Links 🗸 🔷 😕 🌛 🔒 Secur	e 🕞 Log Out 🔒 Print 🚽
🔟 🛱 🏠 🖅 🗳 🖓 A	ddendum: Adamite, F 🗙		TRAINING ACE3 FINN AD	JAMITE EpicCare
FA	← → SnapShot Request Outside Records CRISP Or Chart Review  Request Outside Records Pr	reOp HP Notes 🙆 !	Plan 🚱 Wrap-Up	- &
	Plan			··· ? 🖍
Frank Adamite	Annotated Images Questionnaires Benefits Inquiry References Scans Open Orders Care Teams Print AVS Me	edia Manager Request O	*① Outside Records	
Male, 46 y.o., 4/27/1975	Meds & Orders		SmartSets BestPractice	J.
MRN: 6347	Medications & Orders	+ Comments		
Preferred Language: English Adv Dir: Not Received			₹ BestPractice Advisories	oand/Collapse All 🤤 🦷
Prim Ins:: None	+ Patient-Reported	s	Informational (1)	*
, <b>○</b> Search	Placing a new order?		() Flu Vaccine Due	Expand 🛛 🕹
Infection: None	Use the Visit Taskbar at the bottom of your screen to add, edit, and sign orders at any point during a visit.	Dismiss	Westing (2)	
Mickey Quinn, MD, MPH	Name 🔺	~	Warning (3)  Outstanding Depression Screening	Expand 🗶 😒
PCP - General	Outpatient and Clinic-Administered Medications			
Abdul A Aadam, MD Ref Provider	☆ atorvastatin (LIPITOR) 20 MG tablet	□ . C × ×	BMI Indicates Diagnosis is needed	Expand 😸
Coverage: None	C folic acid (FOLVITE) 400 MCG tablet (Expired)	□ x c x ×	(*) Maryland Quitline	Collapse 🗙 🐟
Allergies (2)	습 glucose blood test strip	□ x c x ×		
Outpatient	hydrochlorothiazide (HYDRODIURIL) 25 MG tablet	□ x C X ×	FREE Maryland's	
9:00 AM ACUTE VISIT 15	C lisinopril (PRINIVILZESTRIL) 10 MG tablet	□ . C × >	Tobacco Cessation Counseline 1-800 <b>QUIT NOW</b>	
for Sore Throat	metFORMIN (GLUCOPHAGE) 500 MG tablet	□ ♪C××	Nicotine replacement Therapy SmokingStopsHere.com	
Wt: 195 lb (88.5 kg) Ht: 5' 9" (1.753 m)	✓ Mark All Taking ✓ Mark as Reviewed Last Reviewed by Montana Nan, RN on 2/25/2022 at 10:46 AM			
BMI (Calculated): 28.8	R Northern Pharmacy at Overlea - Nott - Nottingham, MD - 7618 Belair Road 🐛 410-661-1655		Your patient is eligible for counseling sessions provided by the Maryland Quitline. If your patient enrolls, they may be eligible to receive free Nicotine replacement therapy (NRT). Please use the	
BP: 138/78 !	Associate Signed Orders     Patient Estimate     A Providers	V	attached SmartSet to create a referral, or click a reason why this is not appropriate at this time.	
SINCE LAST UM HEALTH CENTER -				
INTERNAL MEDICINE VISIT 악 No visits	Addendum Addendum		Open SmartSet Do Not Open Smoking Cessation Preview	
A No results			Click to provide feedback for this alert a	
Care Gaps: 😃 8			Acknowledge Reason	
BPA Present			Patient Refuses Defer Decision 6mo	
PROBLEM LIST (3)				
Social Determinants: Concern present			✓ Accept (1)	
NEXT APPT WITH ME None	Ann Ann			✓ Accept All
Start Review	+ ADD ORDER 8= + ADD DX (1)			SIGN ADDENDUM

## UMMC Tobacco Health Practice

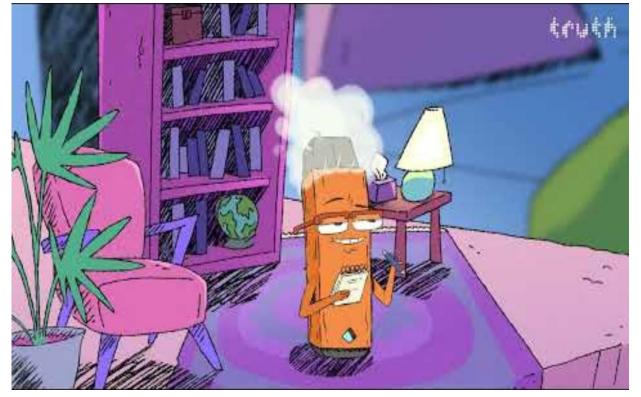
- Director: pulmonologist Dr. Janaki Deepak
- Clinic is integrated with pulmonary clinic to provide comprehensive lung health exam
- Lung Cancer Screening
- Free sample meds
- Combination med therapies + coaching
- Most insurances accepted, no referral needed
- Appointments: call 410-328-8141 or email Sherri Webster: <u>SWebster@som.umaryland.edu</u>



UMMC THP is located at the Midtown Campus: 800 Linden Ave, 9th Floor, Baltimore, MD 21201



- Research
- Prevention and education
- Community engagement
- Partnerships
- Quitting tools
  - $\odot\,\mbox{This}$  is Quitting
    - Text DITCHVAPE to 88709
  - $\circ$  EX
  - $\circ$  The EX Program



How the tobacco industry markets vaping nicotine as stress relief (truthinitiative.org)

## References

- Academy of Neurologic Physical Therapy. (n.d.). OARS Key Skills in Motivational Interviewing. Motivational Interviewing. https://www.neuropt.org/practice-resources/health-promotion-and-wellness/clinician-resources-and-tools/motivational-interviewing
- American Cancer Society. (2022, June 23). What do we know about e-cigarettes? Retrieved December 15, 2023, from https://www.cancer.org/cancer/risk-prevention/tobacco/e-cigarettes-vaping/what-do-we-know-about-e-cigarettes.html
- Cheng, Y., Hung, C., Kao, T., & Chen, W. (2021). The health risks of dual use of electronic and combustible cigarettes: exposure to acrylamide and glycidamide. *Polskie Archiwum Medycyny Wewnetrznej-polish Archives of Internal Medicine*. https://doi.org/10.20452/pamw.16103
- Crane, R. (2007). The most addictive drug, the most deadly substance: smoking cessation tactics for the busy clinician. *Primary Care: Clinics in Office Practice*, 34(1), 117–135. https://doi.org/10.1016/j.pop.2007.02.003
- Dark, M., Klyushnenkova, E. N., Gaynor, A., Kernan, C., & Khanna, N. (2022). Tobacco Cessation Champions: Recognizing physicians who ask, advise, and refer. Annals of Family Medicine, 20(6), 579. https://doi.org/10.1370/afm.2891
- Khanna, N., Klyushnenkova, E. N., Gaynor, A., Dark, M., Melamed, J., Bennett, M. E., & Deepak, J. (2023). Integrating a Systematic, Comprehensive E-Cigarette and Vaping Assessment Tool into the Electronic Health Record. *Journal of the American Board of Family Medicine*, *36*(3), 405–413. https://doi.org/10.3122/jabfm.2022.220410r1
- Khanna, N., Klyushnenkova, E. N., Quinn, D. I., & Wolfe, S. (2022). Patient engagement by the tobacco quitline after electronic referrals. *Nicotine & Tobacco Research*, 25(1), 94–101. https://doi.org/10.1093/ntr/ntac190
- Khanna, N., Klyushnenkova, E. N., Rao, V. N. M., Siegel, N., & Wolfe, S. (2021). Electronic referrals to the tobacco Quitline: implementation strategies in a large health system to optimize delivery of tobacco cessation to patients. *Translational Behavioral Medicine*, *11*(5), 1107–1114. https://doi.org/10.1093/tbm/ibaa094
- Leone, F. T., & Evers-Casey, S. (2022). Tobacco use disorder. *Medical Clinics of North America*, 106(1), 99–112. https://doi.org/10.1016/j.mcna.2021.08.011
- Lozano, P., Thrasher, J. F., Forthofer, M., Hardin, J. W., Reynales-Shigematsu, L. M., Santillán, E. A., & Fleischer, N. L. (2018). Smoking-Related stigma: a public health tool or a damaging force? Nicotine & Tobacco Research, 22(1), 96–103. https://doi.org/10.1093/ntr/nty151
- Maryland Department of Health. (n.d.). *The Maryland Tobacco Quitline*. Smoking Stops Here: 1-800 QUIT NOW. Retrieved December 15, 2023, from https://smokingstopshere.com/
- Selby, P., & Zawertailo, L. (2022). Tobacco addiction. The New England Journal of Medicine, 387(4), 345–354. https://doi.org/10.1056/nejmcp2032393
- Truth Initiative. (n.d.). Truth Initiative: inspiring lives free from smoking, vaping, and nicotine. Retrieved December 18, 2023, from https://truthinitiative.org/
- Truth Initiative. (2023, October 3). *Toxic "Therapy" From Your Vape | Hypnotherapy* [Video]. YouTube.

# Thank you! Questions?

