US Public Health Service (PHS)
Clinical Practice Guideline
*Treating Tobacco Use and Dependence: 2008 Update*¹

2008 Update Sponsoring Organizations:

- US Public Health Service
- Agency for Health Care Research & Quality
- Centers for Disease Control & Prevention
- National Heart, Lung, and Blood Institute
- National Institute on Drug Abuse
- National Cancer Institute
- American Legacy Foundation
- Robert Wood Johnson Foundation
- University of Wisconsin School of Medicine and Public Health’s Center for Tobacco Research and Intervention

Approximately 20 percent of the US population smokes, and more than 70 percent of smokers say they want to quit.² However, many smokers lack the support needed to be successful, and most are not aware of the tools and treatments available to help them succeed. This updated Guideline is designed to provide health care professionals, payers and others with evidence-based recommendations for smoking cessation treatments that increase the likelihood of a successful quit attempt.

Highlights of *Treating Tobacco Use and Dependence: 2008 Update* include:

- **Tobacco Dependence**
  - Tobacco dependence is increasingly recognized as a chronic disease that requires ongoing assessment and repeated intervention. Health professionals must consistently identify, document, and treat all tobacco users within the health care setting

- **Treatment/Intervention**
  - Clinicians should encourage all individuals making a quit attempt to engage in both counseling and medication treatments
    - There is an addition to the list of first-line effective medications for smoking cessation, allowing clinicians and patients several medication options
    - Individual, group, and telephone counseling are effective, and their effectiveness increases with treatment intensity

- **Insurance Coverage**
  - Tobacco dependence treatments are both clinically effective and highly cost-effective, relative to interventions for other clinical disorders. Insurers and purchasers should ensure that all insurance plans include effective counseling and medication as covered benefits

Key Findings and Recommendations From
Treating Tobacco Use and Dependence: 2008 Update

1. Tobacco dependence is a chronic disease requiring repeated intervention and multiple quit attempts.

2. It is essential that all tobacco users are consistently identified, documented, and treated within the health care setting.

3. Tobacco dependence treatments are effective across many populations, and clinicians should encourage willing patients to use these treatments.

4. Clinicians should offer every tobacco user at least brief treatments to help them quit.

5. Individual, group, and telephone counseling are effective, and their effectiveness increases with treatment intensity. Clinicians should encourage both practical (problem-solving/skills training) and social support counseling when helping patients quit.

6. Many effective medications for tobacco dependence exist, and clinicians should encourage their use by all patients attempting to quit, except when medically contraindicated or with specific populations where insufficient evidence of effectiveness is available.

7. Clinicians should encourage use of counseling and medication for treating tobacco dependence, which have been shown to be more effective in combination than alone.

8. Telephone quitline counseling has been shown to be effective. Clinicians should encourage patients to access and use these resources.

9. For tobacco users unwilling to quit, clinicians should use proven motivational treatments to increase future quit attempts.

10. Tobacco dependence treatments are clinically and cost-effective. All insurance plans should include effective counseling and medication as covered benefits.

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