Welcome to NAQC Connections

Next Issue
August 17, 2009

SPECIAL FEATURE

FDA Regulation of Tobacco Products

NAQC Plans to Submit Comments to FDA
On June 22nd, President Obama signed HR1256, the Family Smoking Prevention and Tobacco Control Act, into law (available at http://www.fda.gov/tobacco). Under this law, the U.S. Food and Drug Agency (FDA) is authorized to regulate tobacco products. Shortly thereafter, FDA published a request for comments in the Federal Register, asking for the public's input on approaches and actions the agency should consider to reduce the incidence and prevalence of tobacco product use and to protect the public health.

FDA has asked for comments on 17 specific topics. NAQC plans to submit comments on at least two topics and encourages all U.S. members to consider submitting comments as well. The two topics of interest to NAQC are (1) smoking cessation; and (2) label statements and warnings. NAQC will circulate draft comments to members by mid-August for your feedback. The FDA's call for comments can be found at http://www.fda.gov/NewsEvents/PublicHealthFocus/ucm168412.htm.

CDC System to Gather Questions and Ideas Around FDA Regulation
To assist FDA with the implementation of the Family Smoking Prevention and Tobacco Control Act, CDC has developed a system to gather questions and ideas from states and localities regarding potential actions states and localities are looking to undertake that could be pre-empted (as well as other questions and concerns related to FDA regulation of tobacco products). This system will support FDA in issuing appropriate rules and guidance to address these areas.

CDC's system includes a designated email (fdaquestions@cdc.gov). Email to this address will be monitored daily by a designated Office on Smoking and Health Program Consultant. As soon as a comment/question is received, the Program Consultant will log the comment/question in an FDA Inquiry Database, which has been organized by topic and includes all pertinent information. This centralized system will allow OSH to capture all inquiries and work with FDA to address, as appropriate, in a timely manner.

NEWS & UPDATES

NAQC News

2009 NAQC Seminar Series Updates
July's Webinar Summary is Now Posted to the NAQC Calendar!
The summary for the Webinar, "Communicating Your Quitline's Effectiveness: How to Strengthen Your Message Using National Data," can be found on the NAQC Calendar for July 8 and 10. Simply click on the title and upload the summary - including Q&A.
from the calls!

**August Call: Updates to the Minimal Data Set (MDS)**
Please join us on August 5 from 3:30 to 5 PM ET and August 7 from 12:30 to 2 PM ET to learn more about the recommended updates to the MDS and tools available to help quitlines implement the updates.

Registration is not required. All seminar-related materials will be on the NAQC calendar no later than July 29. We look forward to your participation! If you have questions, please email tthomas-haase@naquitline.org.

**Time is Running Out to Renew your NAQC Membership for Fiscal Year 2010**
Your involvement and support as a member of NAQC enables us to continue to make great strides for quitlines through education, training, advocacy and communication.

Quick reminders about renewal:
- CDC funds can be used for NAQC membership dues
- No increase in dues levels for FY2010
- New partner category added

In March 2009, NAQC sent email invoices to all members. To ensure you continue to receive NAQC membership benefits, please submit payment to NAQC by August 15. Watch for email membership reminders in July and August. Please note: As of August 15, all membership benefits will be suspended for those who have not completed the renewal process.

**NAQC Annual Conference 2009 - Poem Read at Closing**
Several members asked for the poem read by Jeannette Noltenius, MA, PhD, National Coordinator of National Latino Tobacco Control Network, at the closing plenary of the Conference last month. Here it is!

Risk
To laugh is to risk appearing the fool.
To weep is to risk being called sentimental.
To reach out is to risk involvement.
To expose feeling is to risk showing your true self.
To place your ideas and dreams before the crowd is to risk being naive.
To love is to risk not being loved in return.
To live is to risk dying.
To hope is to risk despair.
To try is to risk failure.
But risk must be taken, because the greatest risk in life is to risk nothing.
Those who risk nothing do nothing, have nothing, are nothing and become nothing.
They may avoid suffering and sorrow, but they simply cannot learn to feel, and change, and grow, and love, and live.
Chained by their servitude, they are slaves; they have forfeited their freedom. Only people who risk are truly free.

**NAQC Policy Playbook Update 2009 - Seeking New Examples and Ideas**
With funding from the Robert Wood Johnson Foundation, NAQC plans to update the Policy Playbook, an online resource that focuses on promoting the availability of quitline services following the passage of smokefree policies and tobacco excise tax increases. We are looking for more ideas and strategies ranging from low-cost options such as public relations and earned media to approaches requiring a sizable budget such as paid media. Online, outreach and education strategies are welcome. Examples should preferably demonstrate the integration of the quitline with implementation of a smokefree policy or tobacco tax increase, but examples that could easily integrate the quitline phone number will be considered. To view over 100 examples currently in the current edition of the Policy Playbook, visit the Ideas and Strategies section. Please submit your electronic files and/or questions to rlachter@naquitline.org.

**KIQNIC Update - Thank You for Completing Your Surveys**
The KIQNIC research team would like to thank all those who completed their surveys for year one of the study. We realize you have many competing interests for your time and attention, and we sincerely appreciate your efforts and contributions to advancing our knowledge of the quitline community of practice. We look forward to presenting the results. Final follow-up messages will go out over the next week for those few who have not yet completed their surveys. If you have any questions about the study or about your participation, please contact Gregg Moor, study coordinator, at gregg.moor@in-source.ca.

Quality Improvement Initiative Implementation -Due Date for Member Feedback Oct. 1
Implementation of the first two quality standard calculations (reach and quit rates) is in progress. The original target date for implementation by members was July 1. In order to allow for additional feedback from members, the process has been extended to October 1. Draft reporting templates and implementation checklists have been developed based on initial feedback from members. For copies of these documents or with feedback or questions, contact jsaul@naquitline.org by July 25.

Quitline, Cessation & Tobacco Control News

American Legacy Foundation® and Georgetown University Medical Center Create Research Collaboration
The Steven A. Schroeder Institute for Tobacco Research and Policy Studies at the American Legacy Foundation and the Lombardi Comprehensive Cancer Center at Georgetown University Medical Center ("GUMC") recently announced the establishment of the Schroeder/Lombardi Cancer Control Consortium. The Consortium will seek to advance tobacco-related research, policy and education, utilizing the shared knowledge and expertise of these two leading research organizations.

Recent Update to Safety Information in Label and Medication Guide for CHANTIX
Pfizer recently updated the safety information in the label and medication guide for CHANTIX. Specifically, the updated label highlights safety information about reports of serious neuropsychiatric events in a boxed warning; updates the warning about reports of neuropsychiatric symptoms and suicidality; adds warnings about reports of allergic reactions and serious skin reactions; and updates precautionary information about driving or operating machinery to include details about reports of accidental injury. To read Pfizer's full statement, go to www.Pfizer.com.

New Survey Highlights Emotional, Financial Toll Multi-Generational Tobacco Use Takes on Parents Sandwiched In Between
American Legacy Foundation® has released the results of a recent survey analyzing the unique concerns associated with tobacco use and prevention for Americans raising their own kids while simultaneously caring for their aging parents - millions of whom have been life-long smokers and are now struggling with the resulting health effects.

The survey, conducted by Opinion Research Corporation, found that 75 percent of respondents with a parent who is a current or former smoker are concerned about their aging parent's current or past smoking or their diagnosis of having a tobacco-related disease. Thirty-four percent of respondents with teenage or adult children indicated that they were concerned about their child's current or potential smoking. About five percent of respondents were "sandwiched" in between: struggling with issues related to both their parents and children smoking. Nationwide, this small percentage translates to more than 10 million Americans in this situation.

Langley RCMP Hand Out First Ticket to Man Smoking in Car With a Child
In Vancouver, Langley RCMP handed out the first ticket recently to a driver caught smoking with a child in the car. Read full story.

Panel Suggests Eliminating Tobacco from Military Within 20 Years
According to a new Institute of Medicine study commissioned by the departments of Defense and Veterans Affairs, a complete ban on tobacco in the military is needed, but
would likely take about 20 years to implement. Read more.

**Using The Internet To Help Young Smokers Quit**
The University of Illinois at Chicago is leading a $2.9 million National Cancer Institute project to increase demand for evidence-based, Internet-based smoking cessation treatment among young adults. A multidisciplinary team of investigators from UIC, the University of Iowa and the American Legacy Foundation will work with GDS&M Idea City advertising agency to develop interactive, Internet-based ads and evaluate what messages motivate young smokers to use the evidence-based stop smoking program www.BecomeAnEx.org. View full story.

**RESEARCH**

**Cessation Articles**

**Smoking cessation initiated during hospital stay for patients with coronary artery disease: a randomized controlled trial**

Smith, PM, Burgess, E. Canadian Medical Association Journal. 2009;180(13)

This study tested a smoking cessation intervention for patients admitted to the hospital because of a myocardial infarction (MI) or coronary artery bypass graft (CABG). Those who received an intensive intervention were much more likely to be quit at 12 months than those with a minimal intervention, using either self-reported or biochemically confirmed cessation. The minimal intervention included advice from physicians and nurses and two pamphlets. The intensive intervention included the minimal intervention plus 60 minutes of counseling while still in the hospital, take-home materials and seven proactive counseling calls with a nurse for two months after leaving the hospital. The authors conclude that an intensive intervention for these types of hospital admissions could have dramatic impacts on health and health care costs.

**Unplanned quit attempts-Results from a U.S. sample of smokers and ex-smokers**


This study further explored the nature of unplanned quit attempts among U.S. smokers by surveying 900 smokers and 800 ex-smokers. When asked about their most recent quit attempt, 39.7% of subjects reported that it was an unplanned quit attempt. Controlling for factors such as race, education, time to first cigarette and use of pharmacotherapy, the odds of an unplanned quit attempt lasting for six months or more were twice that of preplanned quit attempts. The authors conclude that unplanned quit attempts are common and can be successful. Considering how many smokers make unplanned quit attempts, the authors recommend making treatment available to assist such attempts.

**Precessation treatment with nicotine patch significantly increases abstinence rates relative to conventional treatment**


This study showed that treatment with a nicotine patch prior to the quit date approximately doubled continuous abstinence rates as compared to treatment with a placebo patch. The treatment was most effective for smokers with lower levels of dependence as measured by the Fagerström Test for Nicotine Dependence. The authors recommend that labeling for the patch should be reexamined, since current labeling only recommends using the patch after the quit date.

**Evaluating the acute effects of oral, non-combustible potential reduced exposure products marketed to smokers**

Cobb, CO, Weaver, MF, Eissenberg, T. Tobacco Control. 2009 Apr 2. [Epub ahead of print]

This study examined the acute effects of smokeless tobacco and other non-combustible products that are marketed to reduce the harm associated with smoking.
Products included Ariva, Marlboro snus, Camel snus, Commit nicotine lozenge, own brand of cigarettes, Quest cigarettes (low nicotine) and sham smoking (i.e., puffing on an unlit cigarette). Results showed that the non-combustible products, when compared to the smoker’s own brand of cigarettes, delivered less nicotine, did not expose the smoker to carbon monoxide and failed to mask withdrawal symptoms as effectively as combustible products. The authors conclude that due to the presence of abstinence symptoms while using the non-combustible products, those products may not be a viable harm-reduction strategy for U.S. smokers.

**Tobacco Related Policy**

**Stealing a march in the 21st century: accelerating progress in the 100-year war against tobacco addiction in the United States**
In this article, the authors chart milestones in beating tobacco addiction and map a battle plan to eradicate tobacco use in the next few decades. They note that the prevalence of cigarette smoking has fallen from about 42% of all adults to less than 20% by 2007 and point to the possibility that tobacco could be eliminated in the U.S. by 2047. The authors urge an acceleration of progress towards this goal by the following:
- Substantial increases in federal and state tobacco excise taxes.
- A national clean-indoor air law.
- Elimination of nicotine from tobacco products.
- Funds for an aggressive mass media campaign to counter the tide of tobacco industry ads and sponsorships.
- A ban on tobacco advertising, promotion and sponsorship.
- Evidence-based counseling and medication for every smoker who wants to quit.
- Protecting young people, particularly those 17 and younger, from starting to smoke.
Research shows that a major genetic risk for lifelong nicotine dependence can be suppressed if young people avoid daily smoking prior to age 17.

**State-level Medicaid expenditures attributable to smoking**
Armour, BS, Finkelstein, EA, Fiebelkorn, IC. Prevention of Chronic Disease. 2009;6(3)
The smoking prevalence for Medicaid recipients is approximately 53 percent greater than that of the overall U.S. population. This study estimates state-level smoking-attributable Medicaid expenditures and reports that the smoking-attributable fraction of all Medicaid costs is 11 percent. This ranged from $40 million (Wyoming) to $3.3 billion (New York) in 2004 and totaled $22 billion nationwide. Due to the large portion of Medicaid expenditures resulting from smoking, the authors strongly suggest that state health departments and state health plans, such as Medicaid, provide free or low-cost access to smoking cessation counseling and medications.

**Impact of graphic and text warnings on cigarette packs: findings from four countries over five years**
This study examined the impact of new graphic health warnings (located on cigarette packs) on smokers in Australia and compared them to the impact of text-based warnings in the U.K. and graphic warnings in Canada. The study found that warning size increases warning effectiveness and that graphic warnings may be more effective than text-based warnings. Stronger warnings tend to have greater effects for longer periods of time. The authors conclude that their findings support governments exceeding the minimum FCTC requirements on cigarette pack warnings.

**Priority Populations**

**Lower quit rates among African American and Latino menthol cigarette smokers at a tobacco treatment clinic**
This study examined the relationship between menthol smoking, race/ethnicity and
smoking cessation among smokers attending a smoking cessation service. The results showed that despite smoking fewer cigarettes per day, African American and Latino menthol smokers are less successful at quitting compared to non-menthol smokers within the same racial/ethnic groups.

**RESOURCES & INFORMATION**

**1-800 QUIT NOW Monthly Volume Report: Now Posted**
The 1-800 QUIT NOW monthly volume report for the period November 9, 2004 through June 30, 2009 is now posted to the US Network of Quitlines bulletin board on the NAQC member site.

**Position Announcement - Director, Office of Behavioral and Social Sciences Research, NIH**
The National Institutes of Health (NIH) invites applications for the currently vacant position of Director of the Office of Behavioral and Social Sciences Research (OBSSR). Candidates should submit their applications not later than August 31, 2009. [Review the official announcement.]

**Publications**

**New User Guide - Coalitions, State and Community Interventions Published by CDC and CTPR**
The Centers for Disease Control and Prevention Office on Smoking and Health (OSH) and the Center for Tobacco Policy Research (CTPR) at Washington University in St. Louis announced a new resource developed as the first in a series of "User Guides" for the State and Community Interventions category of the 2007 Best Practices for Comprehensive Tobacco Control Programs. The purpose of the User Guide series is to provide tobacco control programs with the rationale and case studies as to why particular interventions or activities within this Best Practices category should be considered when designing programs and determining tobacco control funding. The First User Guide is Coalitions, State and Community Interventions User Guide. This Guide is the first in the series and focuses on the critical role coalitions play in comprehensive tobacco control programs. In addition, the reader learns about the history and adoption of coalitions in tobacco control, the characteristics of an effective coalition and examples of coalitions in action at the state and local levels. [View guide and learn more.]

**NTCC/YTCC Announces New Publications**
NTCC/YTCC recently released two new publications. The first is the 2009 update of the dual NTCC/YTCC highlights booklet, which provides an overview of both collaboratives and highlights their activities and accomplishments. The second is the first of the YTCC Learnings Documents that translates findings in youth tobacco cessation over the last 10 years into more practical information for various audiences. It is a resource sheet for tobacco control program managers on the PHS Guideline 2008 Update youth recommendations. It provides background information, summarizes the recommendations, provides suggestions for future research and outlines some actions for program managers to increase youth cessation. [Access documents.]

**Conferences, Meetings & Trainings**

**July 23, 2009: ACTTION Employer/Insurer Webcast Series Kick-off**
The National Working Group will be kicking off its Call for ACTTION Webcast series in July. The four-part series will highlight the critical role employers, insurers and benefits managers play in fostering access to comprehensive tobacco treatments. This first Webcast in the series, “States and Tobacco Cessation: Saving Dollars and Lives Among State Employees,” will highlight effective programs and strategies that State governments and tobacco control advocates use to provide tobacco cessation treatment to their employees. The Webcast will run from 12:30 to 1:30PM (ET). For more information, [visit the Call for ACTTION Web site.]

**2009 Disparities Conference, Health Equity: Through the Cancer Lens,**
American Cancer Society  
July 28-29, 2009, Las Vegas, NV  
For more information.

2009 Indian Health Service National Behavioral Health Conference - Honoring Our Traditions, While Embracing Change  
August 4-7, 2009, St. Paul, MN  
For more information.

National Conference on Health Communication, Marketing and Media 2009  
August 11-13, 2009, Atlanta, GA  
For more information.

5th National Summit on Smokeless and Spit Tobacco - New Products, New Users and a New Generation of Advocacy  
September 21-23, 2009, Madison, WI  
For more information.

SRNT IAHF Latin American Conference on Tobacco Control  
October 14-16, 2009, Mexico City, Mexico  
For more information.

December 9-11, 2009, Memphis, TN  
For more information.

Second Menthol Conference  
On October 19 and 20, 2009, Washington, DC  
More information will be available this summer.

National Conference to End Health Disparities II  
November 3-6, 2009, Winston-Salem, NC  
For more information.

6th National Conference on Tobacco or Health - Canada  
November 1-4, 2009, Montréal, Canada  
Early Bird Registration Now Open  
For more information.

Society for Behavioral Medicine 2010 Conference  
April 7-10, 2010 in Seattle, WA  
Deadline for abstract submissions has yet to be announced.  
For more information.

Society for Research on Nicotine and Tobacco  
Feb. 24-27, 2010, Baltimore, MD  
Deadlines for abstract submission have not yet been announced.  
For more information.

National Break Free Alliance Conference  
April 27-28, 2010, New Orleans, LA  
For more information.

Connect with NAQC Members!  
NAQC’s Listserv offers an opportunity for NAQC members to connect with one another. Through the Listserv, you can ask questions, post comments and share resources. To post a question or comment to the NAQC Listserv, email NAQC@listserv.naquitline.org. You must be a member of the Listserv to post a question or comment. If you are not on the Listserv and wish to participate, please email naqc@naquitline.org.
Visit the [NAQC Connections Archive](#).
For more information about NAQC Connections or to submit information for consideration in its next issue, email [naqc@naquitline.org](mailto:naqc@naquitline.org).

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**About the North American Quitline Consortium:**
NAQC is a Phoenix, Arizona-based 501(3)(c) organization that seeks to promote evidence based quitline services across diverse communities in North America.
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