Tobacco and Substance Use

Individuals who have substance use disorders often have symptoms that include but are not limited to using a substance, such as alcohol, heroin, opiates, cocaine or other stimulants, etc., in a way that demonstrates cravings, the inability to stop or cut down, and the consumption of larger amounts for a greater duration than intended. These symptoms become a disorder when they cause significant difficulties in a person's daily activities, have legal ramifications, or impair their social and family relationships.

Long-standing research suggests that anywhere from 40% to 90% of people with substance use disorders concurrently use tobacco products. The reasons for this relationship are explained by genetic, bio-behavioral, social, and environmental factors.

References

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For example, studies have found shared genetic pathways that may link specific substance use disorders with tobacco product use, nicotine dependence, and greater challenges with stopping tobacco use.

In addition, people with substance use disorders often have co-occurring mental health problems for which they try to use different substances to help them feel better, but eventually, get addicted. Moreover, for many women with substance use disorders, tobacco use remains a challenge because it can increase their perceptions of being stigmatized, detrimentally affect their health, and also increase the chances of their child developing respiratory complications and other health conditions.

The good news is that when offered proper treatment, people with substance use disorders can stop tobacco use along with their other substances. Tobacco cessation for people with substance use disorders not only improves their health but also increases their chances of staying sober and recovering after substance use treatment

References

Prochaska, J. J., Delucchi, K., & Hall, S. M. (2004). A meta-analysis of smoking cessation interventions with individuals in substance abuse treatment or recovery. Journal of consulting and clinical psychology, 72(6), 1144.

For more information on evidence-based tobacco treatment approaches for individuals with substance use disorders, please see the link available below: www.samhas.gov

<u>**Current issues:**</u> 24-year-old post-partum female, currently in a 90-day residential treatment facility for substance use disorders. She just completed a 30-day detox program and is responding well to treatment after being sober for 1-month. She has a 6-month-old baby. She would like to stop using tobacco products.

<u>Psychiatric history:</u> Pt has Post Traumatic Stress Disorder related to intimate partner violence in a prior relationship. She possibly has underlying depressive or anxiety disorders but these have not been formally diagnosed.

Social: Currently in a 90-day residential treatment facility to support sobriety and recovery. She is unemployed at this time. She is estranged from her biological father but has a very supportive biological mother and stepfather with whom she normally lives. She is working on re-establishing strained relationships with an older stepbrother and younger stepsister.

Medical history: History of alcohol and opiate abuse. No other remarkable medical history.

Tobacco use history: The patient's Fagerstrom Test for Cigarette Dependence score was a 6, placing her in the moderate dependence category. She has been smoking since she was 12 years old and has tried to stop smoking a few times in the past. She used to consume approximately 1 pack (20 cigarettes) per day and smoked cigarettes within 30 minutes upon awakening, but has cut down after giving birth. She stopped smoking cigarettes during her last trimester by switching to vaping. Since giving birth, she restarted smoking and continued vaping.

She wants to stop smoking so that she will be a better care provider for her daughter. She wants to be a good mother and stop all addictions.

Narrator: As a review, the steps in the 5 A's are:

- ASK about tobacco use
- ADVISE to stop use
- ASSESS readiness to stop use
- ASSIST to stop use
- ARRANGE for follow-up and support

<u>Scenario</u>

Advanced Practice Provider: Thanks for coming in today! How may I help you?

Patient: Well...in our group meeting last week, we were talking about addiction and how bad it is. Along with stopping my drug use, I know I need to stop smoking and vaping but I'm not sure where to start.

Advanced Practice Provider: Well, before we begin, would it be alright if I get some additional information from you?

Patient: Sure...what kind of information would you like?

[ASK]

Advanced Practice Provider: Other than cigarettes and vapes, do you currently use any other tobacco products like pipes, cigars, or chewing tobacco?

Patient: Nope...just the cigarettes and the vapes...

Advanced Practice Provider: About how many cigarettes do you smoke per day?

Patient: Well...I used to smoke a whole lot more....like a pack a day...but since I had her *(gestures towards the baby sitting in her lap)*...I cut down to like half a pack...

Advanced Practice Provider: And how much do you vape?

Patient: Well, I'm not sure how to describe it...I mean...I usually vape around three times a day...usually sometime in the late morning, then in the early afternoon, and after dinner...I usually smoke cigarettes around the same time too...so it's either I'm smoking or vaping but usually not both...

Advanced Practice Provider: Just to confirm that I heard you correctly, you currently smoke about half a pack of cigarettes per day....about 10 cigarettes a day... but sometimes you alternate cigarettes with vapes?

Patient: Yeah...I'll smoke if I got the cigarettes, but if not I'll vape...I always try to keep a pack of cigarettes around, just in case...I prefer cigarettes to vapes, but I'll vape when I don't have cigarettes or to make the pack last longer...

Advanced Practice Provider: Thank you for clarifying...may I ask, what are some of the positive things you like about smoking cigarettes and vaping

Patient: Hmmm...no one's ever asked me that before...I mean...with cigarettes, I like the hit and the buzz...you know...it's always been there with me and for me...like when I'm sad or angry or happy....it just helps to calm me down or chill me out or perk me up...

Advanced Practice Provider: Anything else?

Patient: Well...I had kind of a messed up childhood...my mom and dad's relationship was really bad...my dad was really really messed up...I started smoking when things were *really* bad...and it kind of became my friend...you know...even before drinking and oxy's, cigarettes have always been there...

Advanced Practice Provider: So, it sounds like you started cigarettes mostly because they made you feel calm and they provided some comfort in difficult times in your life?

Patient: Yeah...I know it sounds kind of crazy, but even thinking of giving them up is like...like... losing a friend... I mean I like the feeling of the smoke going into my lungs when I inhale...I like the...the...ritual of just holding the cigarette, puffing, inhaling slowly, and waiting for the calm to hit when I've been stressed out or mad...y'know?

Advanced Practice Provider: I believe I understand what you mean....given how long you've been using cigarettes, it can feel like a loss even thinking of giving it up

Patient: Yeah...it's like...what am I going to do without them? I only started vaping when I was pregnant and it's not quite the same...it's kinda like the difference between Pepsi and diet Pepsi...it's just not the real thing.

Advanced Practice Provider: So, it sounds like even though you vape, it's only really a substitute for times when you don't have cigarettes and you don't quite get the same feeling from vaping that you get from cigarettes?

Patient: Yeah...vapes are kind of like hanging with my best friend's sister or something...its sort of a substitute, but not really...I know that's like a lame example, but you know what I mean...

Advanced Practice Provider: Well, tell me what are some of the things that aren't so good about smoking or vaping for you?

Patient: Uhh...I guess, on the one hand, it's always been there for me...but on the other hand smoking is a bit demanding... it's getting really expensive and I've seen how my baby's nose wrinkles whenever I hold her after I've had a drag.... I know it makes my clothes a bit smelly...I also hate the looks I get from people when they see me smoking while I go for a stroll with my baby...I feel like a horrid mom...I really don't want to hurt my baby.... Even my mom and stepdad are nagging...

Advanced Practice Provider: Anything else?

Patient: mmm...not really....but...mmm...I guess...I don't want to be addicted to anything anymore...I'd like to take control of myself and not have to depend on anything...that's important

Advanced Practice Provider: So, on the one hand, cigarettes are important to you because they can help calm you down and you've used them for so long that they've almost become like a friend

Patient: Yeeaaah...

Advanced Practice Provider: But on the other hand, they're rather expensive, it's uncomfortable for people to see you smoking around your baby, and you are concerned that smoking around her could harm your baby's health...did I miss anything?

Patient: No...you got it...I know they're not good for me but I've been using them for so long...it's kind of hard to just quit...but I'd like to

Advanced Practice Provider: Well I'm glad you are meeting with me today and I'm sure that together we can come up with a plan to help you in your desire to stop smoking and vaping. Does that sound good?

Patient: Yeah, it sure does.

[ADVISE]

Advanced Practice Provider: Would it be alright if I start by telling you a little bit about treating tobacco use when people are in substance use recovery?

Patient: Sure...I bet it's much harder...I bet I'm going to be a really hard case for you, won't I? **Advanced Practice Provider:** Well, there are indeed different reasons....genetic, biological, and social....why people who have substance use disorders and other addictions are also more likely to use tobacco products. And these different reasons may indeed make treatment seem more challenging. However, really good research has shown that when people with addictions, and particularly those who are in recovery, stop their tobacco use, they are more likely to improve their physical health, but they are also more likely to achieve recovery and stay sober. What do you think about that?

Patient: Really? ...well...I guess it kind of makes sense though...doesn't it? I mean, many of the other ladies in the program with me also smoke. When I told them that I'm thinking of quitting, one of them said that even though she was able to kick heroin, she just couldn't kick the

cigarettes.... So, I imagine, if you can get rid of smoking, you could probably just about stop anything!

Advanced Practice Provider: That's a pretty good way of looking at it. I've heard similar comments from other women who I've worked with to stop smoking. They've told me that quitting smoking has been the hardest thing they ever did, but they were eventually successful. And I believe that with the proper plan in place, we can work hard towards getting you tobacco free as well.

Patient: Yeah?... I hope so...

Advanced Practice Provider: Well, as your health care provider, the best advice I can give you is to certainly stop smoking and vaping to not only cut down on expenses, but also to keep your baby healthy, and to help you maintain your sobriety and health. I'm truly proud of you for having the desire to quit and seeking help to do so...

Patient: Why thank you! I know that it would be almost impossible to do it on my own...

[ASSESS]

Advanced Practice Provider: Well, have you ever tried to stop smoking before?

Patient: Yeah... a few times...it didn't go so good...but I was able to quit cigarettes when I was going to have my baby by vaping...

Advanced Practice Provider: Well, congratulations on your ability to quit while pregnant. I can imagine that it was not an easy feat!

Patient: It's like the hardest thing I've ever done...I don't think it would have been possible without the vapes though...

Advanced Practice Provider: Well, I have to say that your determination paid off, and you used what you had available to you at the time to accomplish your goal! But, let's see if we can find another way to help you stop smoking on a more permanent basis. Does that sound good? **Patient:** Absolutely!

Advanced Practice Provider: Based on the questionnaire you filled out earlier, your cigarette dependence score was a 6, which means that you have a moderate dependence on cigarettes... However, since you also use vapes, I would suggest that your addiction may be more moderate to high...what do you think about that?

Patient: I wouldn't argue with that! I definitely know that I'm addicted to tobacco.

Advanced Practice Provider: So, on a scale of zero being not at all important and ten being very important, how important is it for you to stop smoking and vaping at this time? Where would you place yourself on the scale?

Patient: A ten!

Advanced Practice Provider: It seems that stopping is really important to you. Can you tell me why you chose a ten and not a lower number?

Patient: I want to be sober...like...really sober. No oxy's, no alcohol, no smokes, no vapes, no nothing! No more addiction...I'm done with living a life of addiction!

Advanced Practice Provider: That's pretty powerful! Well, how about your confidence in stopping smoking? On the same zero to ten scale, how confident are you that you can stop smoking and vaping? Zero would be not at all confident, and ten would be extremely confident. **Patient:** That's where it gets tricky...I'd say a five...

Advanced Practice Provider: That's not too bad...but why a five and not a three or four. Patient: Well, I thought that I couldn't stop drinking or doing oxy's, but I'm one month sober now...and to be honest...I feel great and hopeful. So, I've started on my journey to full recovery...I didn't think I could do it before, but I got a lot of help in the detox program... and I'm getting some help in my recovery group...and I've got my baby too, to motivate me...

Advanced Practice Provider: Congratulations on your sobriety! I'm glad to hear that the recovery program has made such a difference for you and that your baby is an additional little cheerleader!

Patient: Yay!!

Advanced Practice Provider: Then, what do you think would help move your confidence up from a five to a six or a seven?

Patient: I don't know...maybe if I knew that I could actually...like...really stop smoking and vaping for good...I mean I've been smoking for so long that I can't picture myself without a cigarette...like when I get stressed or angry or like emotional... or upset...it's kind of automatic...you know...like if I light a cigarette and.. like take a few puffs...then I can just see myself calming down and like getting a hold of myself...you know...like I can see it...but I can't see how else to do it without cigarettes...d'you know what I mean?

Advanced Practice Provider: Yes, I think I do...it sounds like you're saying that cigarettes have been such a big part of your life and especially how you regulate your emotions that it's hard for you to see your identity change from a smoker to a nonsmoker or something like that? Patient: Yeah...that's it...I like the way you put it...it's like an identity change...I'm a smoker...I've been one for so long...now I gotta be a nonsmoker...what's that like? Advanced Practice Provider: Well, it sounds to me like it's really important for you to stop

smoking and you are kind of confident that you can quit, but a big challenge is going to be understanding how to cope with emotions when they come up without smoking or vaping? **Patient:** Yeah...that's right.

Advanced Practice Provider: That's important for us to keep in mind when we are making a plan...but going back to our scales, on a scale of Zero being 'I'm not ready and 10 being I'm ready', how would you rate your readiness to stop smoking and vaping.

Patient: Let's say an eight...

Advanced Practice Provider: So why an 8 and not a six or seven?

Patient: Cause why not...you know...like *why not now*...I'm in a good space in my recovery and life's kind of stable...so, if there's a good time to start, it's probably *now*.

Advanced Practice Provider: What can move you up to a nine or a ten?

Patient: I think... I need a bit of extra help...I mean...if I could stop tomorrow and know that I would be successful...like... have no cravings or have...like...no desire to smoke at all... or like...have no withdrawals...I'd do it right away...but each time I've tried in the past...without the vapes, you know...it's been really bad!

Advanced Practice Provider: Hmm...it sounds like we need to do something about the cravings and withdrawal...huh?

Patient: Yeah...we really do...

[ASSIST]

Advanced Practice Provider: Well, could we discuss some possible options and maybe make a plan to help you quit?

Patient: That'd be great! I'm ready...let's do it!

Advanced Practice Provider: First, I want to say that I'm really happy and want to congratulate you on your decision to stop smoking and vaping. Not only can stopping using all forms of tobacco help keep your baby healthy, but even as important, it can help *you* stay healthy

physically, prevent a host of terrible illnesses like heart problems, lung disease, and even cancer...and it can help you stay sober from using other drugs.... As we touched on earlier, one of the greatest challenges in stopping tobacco use is changing your identity from that of a smoker to a nonsmoker...and another challenge is dealing with cravings and nicotine withdrawal that can arise while quitting. The good news is that we have some good approaches, backed by research, that can help with both issues. Could we discuss some of them? **Patient:** Yeah...

Advanced Practice Provider: Which would you like to discuss first? Patient: Hmmm...let's talk about the identity change first...

Advanced Practice Provider: Ok..it is important to think about stopping smoking as a *process* and not an *event*. In other words, it takes time to think through how and why you smoke, to develop new coping skills to deal with things like emotions that would usually lead you to smoke and to build further resilience to help you stop smoking permanently. It's not just about setting a quit date and then trying not to smoke from then on. The process of stopping smoking often takes anywhere from four weeks to up to six months depending on the person...but what seems to work best is when we take a personalized approach in which you are in the driver's seat. How does that sound?

Patient: That sounds a bit scary being in the driver's seat...I mean...I kind of know where I want to go...but, how do I get there?

Advanced Practice Provider: Although you'll be in the driver's seat, I'll be with you every step of the way! The most successful people I've treated have always had a solid plan in place.... I like to think of it kinda like planning for a move to a new place...it's a big decision...but you'd need to think about both the kind of place you are going to and how to get there. For the journey, you'd need a few things like knowing your destination, having a road map, and planning your move.... For example, if you could go anywhere in the world, where would you like to go? Patient: Hmmm...my dream is to visit Hawaii...the beaches look so gorgeous and the people seem so laid back and nice...I could see myself like a Hawaii gal...

Advanced Practice Provider: That's a really good one! So let's say you're moving to Hawaii...you'd need to know some of the customs like what people wear and what they eat and what you could do for a living...you'd also need to think about how to get there...like would you drive across country to L.A. then fly to Honolulu from there...and you'd need a plan...like... when you drive across the country, would you stop at certain places...and like which cities would you stop and stay the night, where would you sleep, what clothes would you pack for the baby...you know, things like that...depending on your plan you may get there faster or slower, but depending on how well you plan, you'd be more likely to succeed...right?

Patient: Right? I get what you're saying.

Advanced Practice Provider: So, think of me like your travel mate, you're in charge, but I'm kind of like your personal travel agent whose coming alongside you making sure that we do everything to get you to Hawaii...I'll help you make the plan and while your traveling, I'll be checking in on you closely along the way to troubleshoot any problems you may encounter and support you all the way...does that sound like a plan?

Patient: That'd be great...I like that!

Advanced Practice Provider: Are you ready to be a Hawaii gal?

Patient: Hawaii here we come! Yay!

Advanced Practice Provider: Then let's talk about how to deal with the first set of speed bumps that you may encounter on the journey...especially understanding your pattern of smoking and vaping and dealing with nicotine craving and withdrawal... sound good? Patient: Ok...

Advanced Practice Provider: First, I'd like you to keep a smoking diary for the next week or so to figure out when you smoke or vape, for how long, and how you are feeling when you want to smoke or vape. How does that sound?

Patient: Yeah...I could do that...

Advanced Practice Provider: This could help us figure out your patterns of smoking and what kind of mood you are in when you do....we typically use the acronym 'HALT' which stands for 'Hungry', 'Angry', 'Lonely', and 'Tired' to sort of figure out how you are feeling right before you smoke or vape, so in your calendar, you can mark like an H, A, L or T as well as the time you smoked, how many cigarettes, and for how long you smoked or vaped just to get a clearer picture of your smoking and vaping patterns.

Patient: That should be interesting....I think I know what the pattern would look like, but it would be neat to see how it's linked to my mood....

Advanced Practice Provider: Yes, it would be very helpful to our planning, especially when we are thinking about preventing future relapse and anticipating tempting situations....remember

that sometimes those situations may have to do with triggers in your environment like people smoking or arguing...make sure to mark that down as well

Patient: Ok...will do...

Advanced Practice Provider: Great! In addition, to deal with cravings and withdrawals, we could consider using some sort of nicotine replacement product or tobacco treatment medication to help when the time comes...what do you think about that?

Patient: D'you mean something like the patch?

Advanced Practice Provider: Yes...there're different options that we can consider like the nicotine replacement products...like the patch, the gum, or the lozenge....there are also options for some medications like varenicline and bupropion.

What have you heard about any of these?

Patient: Well...I've never really tried any of them, but some of my friends have used them...one of the girls at the recovery program said that the patch didn't do anything for her... and that the gum gave her a stomach ache...

Advanced Practice Provider: I'm not surprised....when many of my patients come to me they've tried some of the smoking cessation products but they typically say that they didn't work too well for them.... I like to explore with them how they used the product and for how long...and with almost every person, I have found that the reason the products generally don't work too well is that either the products were not used as they were meant to be used or they used too little of the products. But can I tell you some information about them just to consider? Patient: Yes, please...

Advanced Practice Provider: Each FDA-approved smoking cessation medication has its own benefits depending on your goal of quitting. The nicotine replacement products, like the patch or gum, work by replacing the nicotine you would normally get from a cigarette or vape by giving you a *cleaner* delivery form. So, similar to cigarettes or vapes, the patch, gum, or lozenge will deliver nicotine to your body. But the big difference is that cigarettes, vapes, and other tobacco-containing products deliver nicotine, along with a host of harmful ingredients, to get nicotine to your brain in 7 to 10 seconds with every puff, just to get you addicted....However, the nicotine replacement products, like the patch and gum, come in different nicotine doses that are carefully delivered so that you don't get addicted. They were made specifically to help deal with cravings

and withdrawal when a person is trying to stop using tobacco products...what do you think about that?

Patient: Wow...I didn't realize smokes and vapes were made just to get nicotine to the brain in 7 to 10 seconds...no wonder they are so addictive...that's crazy...

Advanced Practice Provider: Yeah...it is kind of crazy...but that's why when it comes to the nicotine replacement products like the patch and gum we can use them to safely help people who want to stop smoking.... Here is some more information on the different smoking cessation products and medications and some of their benefits and their use

We can discuss each product in detail at a later time to see which, if you are interested, may be suitable for you...how does that sound?

Patient: That sounds like a good plan. Thank you....

[ARRANGE]

Advanced Practice Provider: So, just as a quick summary, in the coming week, you are going to keep a smoking diary and in addition, you will read about the different smoking cessation products that we could consider in your journey of stopping smoking.

Patient: Ok....

Advanced Practice Provider: Let's follow up next week for another session where we will discuss the results from your smoking diary and plan the next steps in helping you become a non-smoker.

Patient: That sounds good! Thank you so much for talking with me today and helping me....I feel even more hopeful!

Advanced Practice Provider: You are most welcome and I look forward to our next visit.