

European Respiratory Society Annual Congress 2013

Abstract Number: 2655

Publication Number: 3055

Abstract Group: 6.3. Tobacco, Smoking Control and Health Education

Keyword 1: Public health **Keyword 2:** Education **Keyword 3:** Health policy

Title: Smoking among women: We need a different approach!

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Body: Female smoking has increased dramatically over the last century, and currently about 250 million women smoke. Women have a greater risk of developing a smoke related disease and have more difficulty in quitting smoking than men. Aim: Analysis of women's follow up (2007-2012) of a Smoking Cessation (SC) Clinic in a Pulmonology Department. Methods: Retrospective analysis of medical records – SC clinic questionnaire. Results: 174 women were studied (average age: 46.6 ± 10.7 years). Only 28.7% are graduated. A respiratory disease was identified in 61.5% of patients; 45.4% of patients had a depressing mood and 50.6% had an anxiety disorder. On average, the onset of smoking was at 18 ± 6.0 years and smoking burden was 34.3 ± 19.0 pack-years. Many patients (70.7%) reported prior attempts to quit smoking. The Fagerström Test revealed high dependency in 23.5% of patients and the Richmond Test showed high motivation in 5.7%. Pharmacotherapy of patients: nicotine replacement therapy (NRT) to 48.3%; varenicline (V) to 39.7% and bupropion (B) to 10.4%. The SC rate at one year was 12.5% (V 62.5%, NRT 31.3% and B 6.39%) and the drop-out rate was 75.3%. Conclusions: The SC rate was reduced and the overall drop-out rate was high. The high rates of psychiatric comorbidities, low levels of quitting motivation and education, previous attempts and the lack of a multidisciplinary women-specific health education and quitting program compete for that result. The goal is to understand what motivates women to smoke and what barriers they face when quitting. Women's tobacco use is a global health problem and linking the specificities of nicotine dependence, smoking pattern, phase of menstrual cycle and external social factors is crucial to succeed.