

بسم الله الرحمن الرحيم



-Call 6000





شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم





جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأقراص المدمجة يعيدا عن الغيار













بالرسالة صفحات لم ترد بالأصل



A Study to Guide the Family Physicians in Formulating a Smoking Cessation Program

Thesis

Submitted in fulfillment of the requirements for the M.Sc. Degree in Family Medicine

By

Sarah Mohamed Nader Mohamed Abuelfoutouh

M.B. B.Ch.

Faculty of Medicine, Cairo University.

Supervised by

Prof. Dr. Abdel Rahman Mohammed El Naggar

Professor of Medical Pharmacology Faculty of Medicine - Cairo University Head of the National Toxicology Center (NECTR)

Dr. Rehab Abdel Hai Ahmed

Assistant Professor of Public Health Faculty of Medicine – Cairo University

Dr. Maha Abd Elrahman Mowafy

Lecturer of Family Medicine Faculty of Medicine – Cairo University

Family Medicine Department
Faculty of Medicine
Cairo University
2011

بسم الله الرحمن الرحيم

"وما توفيقى إلا بالله عليه توكلت وإليه أنيب"

صدق الله العظيم

(سورة هود، آية 88)

Dedication

To:

My mother, my father and my husband

Acknowledgement

First and foremost, I am thankful to God, for without His grace, this work would never have been accomplished.

My sincere appreciation goes to **Prof. Dr. Abdel Rahman Mohamed El Naggar** Professor of Medical Pharmacology, Faculty of Medicine, Cairo

University and Head of the National Toxicology Center (NECTR) for

guiding me through this work and for his critical insights.

I am deeply indebted to **Dr. Rehab Abdel Hai Ahmed,** Assistant

Professor of Public Health Faculty of Medicine, Cairo University for her great advice and support through the different phases of this work.

I am really grateful to **Dr. Maha Abd Elrahman Mowafy** Lecturer of

Family Medicine Faculty of Medicine – Cairo University for her support

and supervision during the course of this work.

Abstract

A cross sectional study was conducted in the family medicine outpatient clinics in Kasr el Ainy to identify the characteristics of the smokers to aid in formulating a smoking cessation program. 200 smokers were included with ages ranging from 16 – 79 years from August 2010 to January 2011. They were asked for informed verbal and written consents to complete 3 questionnaires which were: Fagerstrom questionnaire, Horn questionnaire and a questionnaire developed by the researcher to determine the smokers' various characteristics. Results showed that the majority were below 18 years (59%) when they started smoking. Most participants smoked more than one packet per day (24 cigarettes) which cost them about 194.74 L.E per month. The most common cause for starting smoking was peer pressure (68%). Smoking motives assessed by Horn questionnaire found that craving was the main motive (93.5%). It was found that (59.5%) were highly dependent on nicotine as assessed by Fagerstrom questionnaire. 147 participants tried to quit mainly due to suffering from health problems (44.9%) and most participants quit because they were self motivated (97.96%). The main reason they relapsed was to cope with stress (35.37%). 24.5% of smokers did not know of the availability of smoking cessation methods.

Key Words: Smoking cessation, Nicotine dependence, Smoking motives

Table of Contents

Content	<u>Page</u>
List of abbreviations	i
List of tables_	ii
List of figures	<u>i</u> v
Introduction	1
Aim of work	2
Review of literature	3
 Prevalence of tobacco use and tobacco economics in Egypt 	3
Methods of tobacco consumption	7
Health hazards of smoking	13
Methods to assist in smoking cessation	
Benefits of smoking cessation	36
Subjects and methods	38
Results	41
Discussion	65
Conclusion	69
Recommendations	70
Summary	71
References	73
Annexes	88
Arabic summary	

List of Abbreviations

- CAPMAS: Central Agency for Public Mobilization and Statistics
- CDC: Centres for Disease Control and Prevention
- CEA: Carcinoembryonic Antigen
- CHD: Coronary Heart Disease
- CI: Confidence Interval
- COPD: Chronic Obstructive Pulmonary Disease
- CVD: Cardiovascular Disease
- CYP450: Cytochrome P 450
- DHS: Demographic and Health Survey
- DNA: Deoxyribonucleic Acid
- EGP: Egyptian Pounds
- ESPRI: Egyptian Smoking Prevention Research Institute
- ETS: Environmental Tobacco Smoke
- FDA: Food and Drug Administration
- GATS: Global Adult Tobacco Survey
- GHPS: Global Health Professionals Survey
- GHPSS: Global Health Professions Student Survey
- GYTS: Global Youth Tobacco Survey
- **HDLC:** high-density lipoprotein cholesterol
- HIV: Human Immunodeficiency Virus
- IARC: International Agency for Research on Cancer
- IHD: Ischemic Heart Disease
- IVF: In Vitro Fertilization
- LDL-C: Low-density Lipoprotein Cholesterol
- MI: Myocardial Infarction
- NCP: Non-calcified Plaques
- NO: Nitric Oxide
- NRT: nicotine replacement therapy
- OCs: Oral Contraceptives
- OR: Odds Ratio
- OTC: Over the Counter
- OxLDL-C: Oxidized low-density lipoprotein cholesterol
- **RR:** Relative Risk
- SCORE: Systemic Coronary Risk Evaluation
- SR: Sustained Release
- SSRIs: Selective Serotonin Reuptake Inhibitors
- USDHHS: U.S. Department of Health and Human Services
- WHO: World Health Organization
- YPLL: Years of Potential Life Lost

List of Tables

Table No.	Pa	age
Table (1):	Socio-demographic characteristics of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011)	41
T 11 (2)	2011)	41
Table (2):	Smoking characteristics of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011)	43
Table (3):	Percent distribution of tobacco forms other than cigarettes used by smokers attending the familymedicine outpatient clinics in Kasr el Ainy (August 2010- January 2011)	44
Table (4):	Percent distribution of reasons that smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011) started smoking	45
Table (5):	Percent distribution of smoking motives among smokers attending The family medicine outpatient clinics in Kasr el Ainy (August	
Table (6):	2010- January 2011) as assessed by the Horn Questionnaire Percent distribution of nicotine dependence among smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011) as assessed by Fagerstrom	45
	questionnaire	46
Table (7):	Characteristics of trials to quit smoking of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010-	
	January 2011)	46
Table (8):	Percent distribution of the reasons that smokers attending the	
	family medicine outpatient clinics in Kasr el Ainy (August 2010-	
	January 2011) tried to quit smoking	46
Table (9):	Percent distribution of the methods that smokers attending the	
	family medicine outpatient clinics in Kasr el Ainy (August 2010-	
	J / 1 &	47
Table (10):	Percent distribution of the reasons that smokers attending the	
	family medicine outpatient clinics in Kasr el Ainy (August 2010-	
		47
Table (11):	Percent distribution of addicting substances used by smokers	
	attending the family medicine outpatient clinics in Kasr el Ainy	
	` ' ' '	48
Table (12):	Percent distribution of the frequency of use of hashish by smokers	
	attending the family medicine outpatient clinics in Kasr el Ainy	
	` ' ' '	48
Table (13):	Percent distribution of problems faced by smokers attending the	
	Family medicine outpatient clinics in Kasr el Ainy (August 2010-	
	January 2011) due to smoking	49
Table (14):	Percent distribution of the methods of smoking cessation that	
	smokers attending the family medicine outpatient clinics in Kasr el	
	Ainy (August 2010- January 2011) have heard about	49
Table (15):	The relation between the age groups of smokers attending the family	y
	medicine outpatient clinics in Kasr el Ainy (August 2010- January	
	2011) and their motives to smoke	50
Table (16):	The relation between the job groups of smokers attending the family	y
	medicine outpatient clinics in Kasr el Ainy (August 2010- January	
	2011) and their motives to smoke	51

Table (17):	The relation between the education level of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010-	
	January 2011) and their motives to smoke	52
Table (18):	The relation between the marital status of smokers attending the	
	Family medicine outpatient clinics in Kasr el Ainy (August 2010-	
	January 2011) and their motives to smoke	53
Table (19):	The relation between presence of a smoker in the family of smokers	
	attending the family medicine outpatient clinics in Kasr el Ainy	
	(August 2010- January 2011) and their motives to smoke	54
Table (20):	The relation between the presence of a smoker friend for smokers	
	attending the family medicine outpatient clinics in Kasr el Ainy	
	(August 2010- January 2011) and their motives to smoke	55
Table (21):	The relation between the trials of smokers attending the family	
	medicine outpatient clinics in Kasr el Ainy (August 2010- January	
	2011) to quit smoking and their motives to smoke	56
Table (22):	The relation between consuming other forms of tobacco and	
	the motives of smokers attending the family medicine	
	outpatient clinics in Kasr el Ainy (August 2010- January	
	<i>'</i>	57
Table (23):	The relation between addiction and motives of smokers attending	
	the family medicine outpatient clinics in Kasr el Ainy (August 2010	
	• /	58
Table (24):	The relation between the presence of problems due to smoking and	
	the motives of smokers attending the family medicine outpatient	
	clinics in Kasr el Ainy (August 2010- January 2011)to smoke	59
Table (25):	The relation between the readiness of smokers attending the family	
	medicine outpatient clinics in Kasr el Ainy (August 2010- January	
	' 1 C	60
Table (26):	The relation between the stage of the behavior change cycle of	
	smokers attending the family medicine outpatient clinics in Kasr el	
	, · · · · · · · · · · · · · · · · · · ·	61
Table (27):	The relation between the acceptance of smokers attending the	
	family medicine outpatient clinics in Kasr el Ainy (August 2010	
	-January 2011) to use medications for quitting and their motives to	
		62
Table (28):	The relation between the nicotine dependence of smokers attending	
	the family medicine outpatient clinics in Kasr el Ainy (August 2010)
	-January 2011) according to Fagerstrom questionnaire and their	
	0 1	63
Table (29):	The relation between the nicotine dependence of smokers attending	
	the family medicine outpatient clinics in Kasr el Ainy (August 2010)
	-January 2011) according to Fagerstrom questionnaire and a	
	group of studied features	64

List of Figures

Pa	age
Cigarettes	7
Cigar	8
Shisha	9
Pipe	9
Beedies	10
Kreteks	11
Smokeless tobacco	12
Distribution of the smokers attending the family medicine outpatien clinics in Kasr el Ainy (August 2010- January 2011), by age groups	
Percentage of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011)according to their education level	42
Percentage of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011) according to the age of starting smoking	44
	Cigar Shisha Pipe Beedies Kreteks Smokeless tobacco Distribution of the smokers attending the family medicine outpatien clinics in Kasr el Ainy (August 2010- January 2011), by age group Percentage of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011)according to their education level Percentage of smokers attending the family medicine outpatient clinics in Kasr el Ainy (August 2010- January 2011) according to