

Ask every patient "Do you smoke?"

Advise them to quit

Refer them to the California
Smokers' Helpline by giving them the
"Take Charge" Gold Card

Diabetes Educators Toolkit

The **Do you cAARd**? project is a collaborative effort of California Diabetes Educators, the California Smokers' Helpline and the California Diabetes Program.





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"Do you cAARd?" Campaign Toolkit

Acknowledgements

The "Do you cAARd?" Campaign is a collaborative effort with:

- ◆ California's Diabetes Educators Do you cAARd? Task force
- California Diabetes Program
- ♦ California Smokers' Helpline

This project is a part of the "Be Proactive" Collaborative Diabetes and Tobacco Intervention Project which consists of:

- California Diabetes Program
- ♦ California Smokers' Helpline
- ◆ California Department of Public Health Tobacco Control Program

Funding for this project is a part of the "State-Based Tobacco Cessation Quitlines" supplemental tobacco control award from the Centers for Disease Control and Prevention (CDC).

Overall goals of the "Do you cAARd?" Campaign are to:

- Increase use of telephone-based tobacco cessation services by persons with diabetes
- ♦ Improve the extent to which health care providers assess smoking status of persons living with diabetes and advise them to quit
- Increase referrals to the California Smokers' Helpline

Appreciation and thanks to California's diabetes educators and the "Do you cAARd?" task force.

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"Do you cAARd?" Campaign Toolkit



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Section 1

Why cAARd?





Section 1: Why "cAARd"?



1.1. Introduction

There are over 2.5 million people with diabetes in California and 13.6% of people who smoke. Although the prevalence of smoking has decreased over the last decade in the U.S. one in 6 adults with diabetes still smokes (*Diabetes Care 30: 1883-1885, 2007*)

Smoking increases insulin resistance, negatively impacts diabetes control, and increases diabetes related complications.

Diabetes Educators from throughout California have joined forces with the California Diabetes Program and the California Smokers' Helpline to assist their patients with diabetes to quit smoking. Join the "Do you cAARd?" Campaign, learn about the Ask, Advise, Refer intervention, and help your patients reduce their risk of complications related to diabetes and improve their health.

The California Diabetes Program is pleased to be partnering with the California Smokers' Helpline on the "Do you cAARd?" Campaign. "Do you cAARd?" Campaign challenges Diabetes Educators to use the Ask, Advise, Refer intervention and give the California Smokers' Helpline "Take Charge" Gold Card to patients with diabetes who smoke or chew tobacco.

Do you Ask, Advise, Refer and give the Gold Card?



The Gold Card is a marketing piece that urges smokers and other tobacco users to call the Helpline, 1-800-NO-BUTTS for free cessation services.

1.2. About the "Do you cAARd" Toolkit

The "Do you cAARd?" Toolkit has been developed by a Task Force of California's Diabetes Educators as a resource to assist you in supporting your patients with diabetes who smoke or use other tobacco products. Diabetes Educators do not have to be tobacco cessation providers but can use the 30 second Ask, Advise, Refer intervention to refer patients to the California Smokers' Helpline with the "Take Charge" Gold Card.

The Toolkit is a referral guide for communication, ideas, and motivational tools. It provides Diabetes Educators access to real people, materials, and Web sites to assist in our client, colleague, or community interactions.

The Toolkit incorporates materials from the "Be Proactive" program on tobacco and diabetes including:

- Patient education fact sheets in English, Spanish, Chinese, Korean, and Vietnamese (all of the languages supported by the Helpline)
- A health care provider education fact sheet
- Ask, Advise, Refer intervention cues
- California Smokers' Helpline materials and order form
- Information about the California Diabetes Program and the California Smokers' Helpline

1.3. Quick facts about smoking and diabetes

You may be well aware of the dangers tobacco use poses to your patients. But what you might not know are the specific dangers and effects smoking has on your patients with diabetes.

- Smoking and diabetes is a dangerous combination.

 Cigarette smoking remains the leading preventable cause of death (1 of every 5) in the United States (Centers for Disease Control and Prevention Office on Smoking and Health, 2007 Fact Sheet Adult Cigarette Smoking in the United States: Current Estimates)
- The advice of a health care provider can double a smokers' chance of quitting (U.S. Department of Health and Human Services)
- Smoking narrows blood vessels contributing to high blood pressure, heart disease and poor circulation (2004 U.S. Surgeons General Report on Smoking Consequences)
- Smoking exacerbates the harmful effects of diabetes by increasing insulin resistance and deteriorating diabetes control (*Haire-Joshu*, *D. et al. Smoking and Diabetes. Diabetes Care 1999 November*; 22 (11); 1887-1898)
- Each year there are over 300,000 diabetes-related hospitalizations in California at an annual cost of \$3.4 billion (*California Diabetes Program 2008 Fact Sheet www.caldiabetes.org*).
- Tobacco addiction is a chronic disease and deserves ongoing clinical treatment. Effective smoking cessation can reduce illness and improve patient quality of life. (*Treating Tobacco Use and Dependence. Quick Reference Guide For Clinicians. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service October 2000*)
- Smoking increases the risk of peripheral vascular disease resulting in amputations (Clinical Diabetes Vol. 24, number 3, 2006)
- Currently there are studies suggesting tobacco use is an independent risk factor for type 2 diabetes (Willi et al JAMA 2007;298:2654-64; Ding and Hu editorial 2675-76)
- Seventy percent of smokers in California want to quit and it is easier than ever to help them do so with the California Smokers' Helpline services (California Smokers' Helpline www.nobutts.org)

As a health care professional, you are in a unique position to double smokers' likelihood of quitting by simply advising them to quit and referring them to the California Smokers' Helpline. For more facts and references on diabetes and smoking see the patient and provider fact sheets in Section 4 of the toolkit.

1.4. About the Diabetes and Tobacco Cessation Project

This Diabetes and Tobacco Cessation Project is the first diabetes specific collaborative effort between the California Diabetes Program, the California Smokers' Helpline (CSH), and the California Tobacco Control Program (CTCP). Funding for this project is a part of the "State-Based Tobacco Cessation Quitlines" supplemental tobacco control award from the Centers for Disease Control and Prevention (CDC).

The purpose of this collaboration is to share expertise, foster relationships and develop intervention methods for health care providers to proactively refer their patients with diabetes that smoke to the Helpline. Goals of the campaign are to increase use of the Helpline by persons with diabetes and improve the extent to which health care providers assess smoking status of persons living with diabetes, advise them to quit and refer them to the Helpline (1-800 NO-BUTTS).

The "Do you cAARd?" Campaign is a collaborative effort with Diabetes Educators throughout California. This effort is directed by a Task Force of Diabetes Educators who have developed a campaign plan including a toolkit, a public relations campaign, and continuing education program, to support the projects goals. The goals for the "Do you cAARd?" Campaign are to increase the percentage of Diabetes Educators who screen their patients with diabetes regarding tobacco use and refer identified smokers to the Helpline and other cessation services.

1.5. About the California Diabetes Program

The California Diabetes Program was established in 1981 within the California Department of Public Health and is primarily funded by the Centers for Disease Control and Prevention (CDC). The Institute for Health and Aging at the University of California, San Francisco provides fiscal administration for the program.

The California Diabetes Program works in partnership with organizations in California and nationally to:

- Improve the quality of care in Health Care Delivery Systems
- Provide Communications to increase awareness about diabetes
- Offer leadership, guidance, and resources for Community Health Interventions
- Conduct Surveillance to monitor statewide diabetes health status and risk factors
- Guide Public Policy to support people with and at risk for diabetes

As a coordinating leader for diabetes prevention and control in California, the California Diabetes Program is guided by national initiatives and statewide goals, as well as community input. Our work ranges from supporting system-wide improvements in health care delivery organizations, to developing peer-to-peer education programs led by community volunteers. We promote proven methodologies including the Chronic Care Model and the team approach to care.

Program staff includes regional health promotion specialists who are available to provide consultation and technical assistance to your organization. For more information about the program and on the "Do you cAARd?" Campaign, please visit www.caldiabetes.org. While you are online visit the Diabetes Information Resource Center (DIRC) and register to become a Content Contributor. (Click "Register" on the left menu bar)

1.6. About the California Smokers' Helpline

The California Smokers' Helpline is a toll *free* telephone counseling service provided by the California Department of Health Services, through the University of California, San Diego's (UCSD) School of Medicine, Cancer Center.

Counselors are available:

- Monday-Friday, 7am-9pm
- Saturday 9am-1pm
- Voice mail operates 24 hours a day, 7 days a week
- Online at www.nobutts.org through the "click to call"

Anyone in California can call the Helpline - it doesn't matter if you are currently smoking, have already quit, or want information for friends or relatives. Research has proven that utilizing Helpline counseling may double a smoker's chances of quitting successfully.

The Helpline is **FREE** and offers a choice of services including:

- Self-help materials
- Referrals for local cessation programs
- One-on-one counseling over the phone

California Smokers' Helpline numbers:

English, 1-800-NO-BUTTS (1-800-662-8887)

Spanish, 1-800-45-NO FUME (1-800-456-6386)

Vietnamese, 1-800-778-8440

Korean, 1-800-556-5564

Cantonese, 1-800-838-8917

Mandarin, 1-800-838-8917

TDD/TTY, 1-800-933-4TDD (1-800-933-4833)

Chewline, 1-800-844-CHEW (1-800-844-2439)

Please refer your patients to the California Smokers' Helpline.

The Helpline provides FREE materials to health care providers to use in referring their patients.

For more information about Helpline services, please visit www.nobutts.org or call the Outreach Department at (858) 300-1010. To order free Helpline materials please visit the online order form at this link: http://www.californiasmokershelpline.org/Order.php or use the faxable order form on page 19.



We can help your patients quit smoking for good!

It's FREE. It's convenient. It's effective.

The Helpline offers **FREE**, telephone-based counseling to all Californians who want to quit smoking or chewing tobacco. After an initial session with a trained counselor, clients receive up to five additional calls at relapse-sensitive times. The Helpline also provides **free** self-help materials and referrals to local resources. Visit our website at www.nobutts.org for more information or contact the Outreach Department at cshoutreach@ucsd.edu or (858) 300-1010.

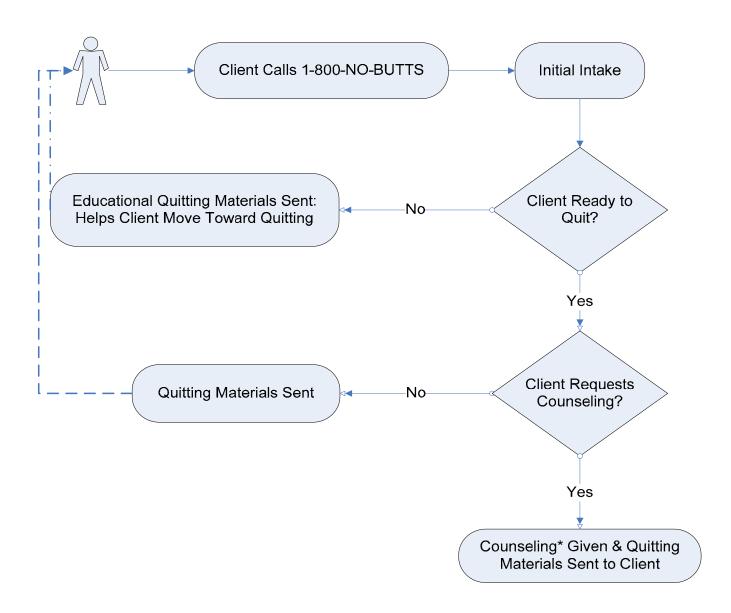
6 reasons why health care providers should refer their patients to the California Smokers' Helpline 1-800-NO-BUTTS:

- 1. Smoking has devastating effects on people with diabetes, yet, 1 in 6 people with diabetes still smoke. Quitting smoking is the **single most important action** a person can take to improve his or her health.
- 2. Clinical trials showed that the Helpline **doubles** a smoker's chances of successfully quitting. **Advice** from a health professional serves as a powerful motivator and increases the chance a person will quit for good.
- Helpline services are available in multiple languages including English, Chinese (Mandarin and Cantonese), Korean, Spanish and Vietnamese as well as a TDD line for the hard of hearing. There are also specialized services for teens ,pregnant women, and a line for tobacco chewers.
- 4. The Helpline works with Medi-Cal, Medicare and county health enrollees to utilize their quitting aid benefits. Medi-Cal and county health programs provide FREE pharmacotherapy for enrollees who participate in a behavior-modification program, such as the Helpline, and have a prescription from their doctor. Medicare covers some pharmacotherapy and reimburses for provider counseling. Helpline counselors assist all clients with their questions regarding quitting aids. For more information visit www.nobutts.org/quittingaids.shtml.
- 5. **Helpline counselors are available** Monday through Friday 7:00 am 9:00 pm and on Saturday from 9:00 am 1:00 pm. If clients call after hours they have the option of leaving a message and/or listening to a number of automated messages on topics such as the benefits of quitting, use of quitting aids and information for pregnant callers.
- 6. The Helpline provides **FREE cessation materials to health care providers** for their patients such as Gold Cards and brochures. To order your free materials via the Helpline website at www.nobutts.org and click on the "Promotional Materials" link.

See the next page to learn how Helpline callers are processed →



Client Process Flow



*Initial counseling 35-40 minutes long with focus on preparation to quit. Follow-up calls are delivered at relapse sensitive times and last 10-15 minutes long.

Do you caard?



Section 2

How do you cAARd?





Section 2: How "Do you cAARd?"



2.1. Talking Points and Ideas for smoking cessation

Diabetes Educators and other health care providers are in a unique position to help influence their patients who smoke to quit. This section provides talking points and ideas on how to interact with your clients to help them with tobacco cessation, to talk with your colleagues about the "Do you cAARd?" Campaign, and how to talk with people in your community about the dangers of tobacco use.

2.1.1. Talk with Your Patients: Ask Advise Refer Intervention Cues

Systematically ask every patient about tobacco use at every visit:

Step 1. Ask: "Do you smoke or use tobacco?" In a clear, strong, and personalized manner, urge every tobacco user to quit.

Step 2. Advise: "Make it a priority to quit smoking - It is important for your health." Determine if the patient is interested in quitting.

Step 3. Refer: Give them the TAKE CHARGE gold card. "Call 1-800-NO-BUTTS and your chances of successfully quitting will at least double!"



Incorporate the Ask, Advise, Refer intervention into your patient intake protocol or include it in some way as a regular part of your patient's visit.

For more information see the "Ask-Advise-Refer Intervention Cues" on the next page.

ASK - ADVISE - REFER Intervention Cues



STEP 1: ASK (1 min)

- ☐ Systematically ask every patient about tobacco use at every visit.
- Determine if patient is current, former, or was never a tobacco user.
- ☐ Determine what form of tobacco is used.
- Determine frequency of use.
- Document tobacco use status in the patient's medical record.

Step 1 Sample Intervention Cues

For the patient who never regularly used tobacco:

- "Congratulations, you have made a wise choice to protect your health."
- "Congratulations, you have very good judgment."
- "Congratulations on being a non-smoker."

For the patient who quit using tobacco:

- "Congratulations, you made a wise decision."
- "Congratulations on quitting tobacco use. We have some good programs to help you remain tobacco-free. I can give you the contact information for the program."

For the patient who uses tobacco:

- "How many cigarettes per day do you smoke?"
- "How many cigars per day do you smoke?"
- "How many bowls of pipe tobacco do you use per day?"
- "Do others in your household use tobacco?"

STEP 2: ADVISE (1 min)

- ☐ In a clear, strong, and personalized manner, urge every tobacco user to quit.
- Tobacco users who have failed in previous quit attempts should be told that most people make repeated quit attempts before they are successful.
- ☐ Employ the teachable moment: link diabetes health issues with advice.

Step 2 Sample Intervention Cues

For the patient who currently uses tobacco:

- "Have you thought about quitting?"
- "Do you want to quit? I can help you. Let me give you the phone number for the California Smokers' Helpline. You can receive free counseling on how to quit and remain tobacco-free."
- "Quitlines have had proven success in helping people get through the difficult stages of quitting and most people prefer to use them."

ASK - ADVISE - REFER Intervention Cues

STEP 3: REFER (1 min)

- Determine if patient is interested in quitting. For those interested:
- Give them a California Smokers' Helpline (1-800-NO-BUTTS) Gold Card/Brochure.
- ☐ Give them the Diabetes and Smoking Fact Sheet.
- Provide a referral to a local cessation program (when appropriate).
- ☐ Document in patient's medical record.

Step 3 Sample Intervention Cues

For the patient who currently uses tobacco:

- "I know quitting smoking is very difficult. Most people who want to quit are successful. Sometimes it takes more than one try. I know you can do it. Let me refer you to the cessation quitline, they can help you quit."
- "I can't see what tobacco is doing to your diabetes, heart, lungs, brain and other organs, but I would like to discuss some health issues and complications that could be due to your smoking."

Local Cessation Resources:

www.nobutts.org

Web based cessation program:

http://smokefree.gov/ or http://www.quitnet.com

Diabetes Resources:

California Diabetes Program www.caldiabetes.org

American Diabetes Association www.diabetes.org





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2.1.2. Talk with Your Colleagues: What to do and how to do it

Let others know how to make a difference by being informed and being prepared.

Be prepared to talk with your colleagues about how to "cAARd"?

- 1. Have the "*Take Charge*" Gold Card and information handy. Teach others how easy it is to Ask, Advise, Refer.
- 2. Use the Toolkit when you meet with colleagues at: meetings, health promotion opportunities, fairs, community outreach opportunities, and collaborative presentations.
- 3. Give each contact something substantial to take with them: the "*Take Charge*" Gold Card, the "Do you cAARd?" Handout, or the California Smokers' Helpline materials order form.
- 4. See the "Do you cAARd?" Handout and California Smokers' Helpline materials order form on pages 20-21.

It's Easy! You don't have to be a tobacco cessation provider – but you can be a tobacco cessation promoter by referring people to the California Smokers' Helpline 1-800- NO BUTTS.

Here are some points to mention:

Why it is important to "cAARd"?

- 1. Over 2.5 million people in California have diabetes and 13.6% of them smoke!
- 2. Smoking and diabetes are a dangerous combination! Smoking increases the complications of diabetes and makes it hard to control. Smoking increases insulin resistance, cardiovascular disease (CVD), pulmonary vascular disease (PVD), neuropathy, nephropathy, retinopathy, sexual dysfunction, periodontal disease, lung cancer and more.
- 3. Your time spent = 30 seconds!

 Spend only 30 seconds of your time to Ask, Advise, Refer and you could save a life!
 - Ask every patient about tobacco use at every visit: "Do you smoke or use tobacco?"
 - <u>Advise</u> every tobacco user to quit. "Make it a priority to quit smoking- It's important for your health."
 - → Determine if the patient is interested in guitting and...
 - Refer them to the California Smokers' Helpline by giving them the "Take Charge" Gold Card.



- 4. Cigarette smoking causes reduced circulation by narrowing the blood vessels (arteries). Smokers are more than 10 times as likely as nonsmokers to develop peripheral vascular disease. (2006 U.S. Department of Health and Human Services. CDC Smoking and Tobacco Use Fact Sheet)
- 5. People with diabetes are at greater risk for severe PAD and are five times more likely to have an amputation. (*Diabetes Care 24 (2001):1433-37*).
- 6. The Helpline is a *FREE*, telephone-based smoking cessation program that is offered in 6 languages and TDD for the hearing impaired.
- 7. Tobacco cessation is a cost effective way to support diabetes self-management (DSM) goals.
- 8. The advice of a health care professional can more than double the likelihood a person who smokes will make a quit attempt. (U.S. Department of Health and Human Services)
- 9. The California Smokers' Helpline is a proven cessation service. A randomized, controlled study of the California Smokers' Helpline showed an increase in smoker attempts to quit and decreased rate of relapse when the Helpline was used. The quitline doubled their chance of success. (Zhu et al. N Engl J Med, Vol. 347, No. 14 October 3, 2002)
- 10. The use of Inhaled insulin is contra indicated for people who smoke. See Section 4 for more information.

For more details and literature sources about the dangers of smoking and diabetes see the provider fact sheet "Diabetes, Smoking and Your Patient" on the next two pages.

Diabetes, Smoking, and Your Patient

- People who have diabetes and smoke are at increased risk of complications associated with diabetes. Complications may include 1:
- Vascular disease Smoking damages blood vessels throughout the body. Your patients with diabetes who
 smoke are 11 times more likely to have a heart attack or stroke than your patients who don't have diabetes and
 don't smoke. 4
- **Neuropathy** (peripheral and autonomic) Smoking increases the risk of nerve damage for your patients with diabetes. This can result in impotence in men, gastroparesis, and amputations. ⁵
- Nephropathy Smoking triples the risk of kidney disease in your patients with diabetes. 4
- Retinopathy Smoking can increase the risk of blindness in your patients with diabetes. 3
- Periodontal disease Smoking increases the chance of tooth loss in your patients with diabetes.

To ensure your patients' optimum health and care, advise every smoker with diabetes to quit. Raise the issue at every visit. Smokers are more likely to take action when advised by their doctors.

To help your patients with diabetes quit smoking today:

ASK: Is your patient a smoker?

ADVISE: Your patient to quit smoking.

REFER: Your patient to the California Smokers' Helpline.

It's Free. It's Easy. It's Convenient. We can help your patients quit.

CALIFORNIA DIABETES English: 1-800-NO-BUTTS Spanish: 1-800-45-NO-FUME Mandarin & Cantonese: 1-800-838-8917 Vietnamese: 1-800-778-8440

Korean: 1-800-556-5564 **TDD/TTY**: 1-800-933-4TDD

Chewing Tobacco: 1-800-844-CHEW



What is the California Smokers' Helpline?

- A FREE telephone counseling program for Californians to quit smoking, in operation since 1992. Scientifically proven in randomized trials to help patients quit. ⁶
- Operated by the Cancer Center at the University of California, San Diego.
- The first statewide tobacco quitline in the nation, now a model of excellence for similar programs worldwide.

For More Information

- To order promotional materials to assist in your referrals, visit www.nobutts.org.
- To inquire about partnership opportunities, call (858) 300-1010 or email cshoutreach@ucsd.edu.
- To learn more about diabetes resources visit the California Diabetes Program at www.caldiabetes.org.
- See Diabetes, Smoking, and Your Patient references on page 2.

Diabetes, Smoking, and Your Patient

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Do you cAARd?

Spend 30 Seconds and

Save a Life!

Tobacco use is the leading preventable cause of illness and death in California.

The advice of a health care professional can more than double smoking cessation success rates. Refer your patients to 1-800-NO-BUTTS, the California Smokers' Helpline; a free, convenient and proven cessation service. The service is available in 6 languages.

For more information and to order free Helpline materials visit www.nobutts.org.



All you have to do is:

Ask

"Do you smoke?"

Advise

Your patients to quit:
"Make it a priority to quit,
it's important for your
health."

Refer

To the Helpline: "Call 1-800-NO-BUTTS and your chances of successfully quitting will at least double."

Rd?" A California Si Find the Do you cAARd? campaign online at www.caldiabetes.org

Free Smoking Cessation Materials Available from the California Smokers' Helpline































Visit our website at <u>www.nobutts.org</u> for more information on Helpline services.

Phone: (858) 300-1010 Fax: (858) 300-1099



Fax this Order Form to 858-300-1099

Ente				h item ord	erea.	
	"Want to	Quit Smoking?	" brochures (fa	or adult smokers)		
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#	"Regale Sa	alud" gift cards		El mejor re para su far es salus ¡Dejo do furm:	galo milla d 1-800-45-N0-FUME 1-800-456-6386	
#	"Want to I	Help a Teen Qu	it Smoking?"	brochure (for adults	s working with teen	(3)
#	"Want to	Quit Chewing?	" brochure (for	adults who use chew/	dip)	
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	N	OTE: Your deli	very will arrive	via ETR/TECC, n	ot the Helpline.	

2.1.3. Talk with Your Community

Health care providers, especially Diabetes Educators, are in a unique position to influence "healthy" living to their patients as well as the communities in which they work and live.

Take the opportunity to talk with community members about tobacco cessation and health when you have the chance. Here are some facts from the Centers for Disease Control and Prevention (CDC), Office of Smoking and Health to share with community members:

- Tobacco use remains the leading preventable cause of death in the United States, causing nearly 440,000 deaths each year and resulting in an annual cost of more than \$75 billion in direct medical costs (Centers for Disease Control and Prevention Office on Smoking and Health, 2007 Fact Sheet Adult Cigarette Smoking in the United States: Current Estimates)
- Nationally, smoking results in more than 5.5 million years of potential life lost each year (*Centers for Disease Control and Prevention Office on Smoking and Health, 2007 Fact Sheet Adult Cigarette Smoking in the United States: Current Estimates*)
- The advice of a health care provider can double a smokers' chance of quitting (U.S. Department of Health and Human Services)
- The majority of adult smokers started smoking by the age of 18. Every day an estimated 3,900 young people under the age of 18 try their first cigarette (*California Smokers' Helpline, www.nobutts.org*)
- On average, smokers die 13 to 14 years earlier than nonsmokers. (*California Smokers' Helpline, www.nobutts.org*)
- For every person who dies of a smoking—attributable disease, 20 more people suffer with at least one serious illness from smoking. Cigarette smoking increases the length of time that people live with a disability by about 2 years. (*California Smokers' Helpline, www.nobutts.org*)

For more information please visit the Office on Smoking and Health (OSH) at http://www.cdc.gov/tobacco/index.htm. The OSH is a division within the National Center for Chronic Disease Prevention and Health Promotion, which is one of the centers within the Centers for Disease Control and Prevention (CDC).

Add to the facts above and incorporate the following facts about smoking and diabetes:

- Smoking narrows blood vessels contributing to high blood pressure, heart disease and poor circulation (2004 Surgeon General's Report http://www.surgeongeneral.gov/library/smokingconsequences)
- Smoking exacerbates the harmful effects of diabetes by increasing insulin resistance and deteriorating diabetes control. (*Haire-Joshu*, *D. et al. Smoking and Diabetes. Diabetes Care 1999 November*; 22 (11); 1887-1898)
- Each year there are over 300,000 diabetes-related hospitalizations in California at an annual cost of \$3.4 billion. (California Diabetes Program 2008 Fact Sheet www.caldiabetes.org)
- Tobacco addiction is a chronic disease and deserves ongoing clinical treatment. Effective smoking cessation can reduce illness and improve patient quality of life. (Treating Tobacco Use and Dependence. Quick Reference Guide For Clinicians. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service October 2000)
- Smoking increases the risk of peripheral vascular disease (PAD) resulting in amputations (Clinical Diabetes Vol. 24, number 3, 2006)

- People with diabetes are at greater risk for severe PAD and are five times more likely to have an amputation. (Diabetes Care 24 (2001):1433-37).
- Currently there are studies suggesting tobacco use is an independent risk factor for type 2 diabetes (Willi et al JAMA 2007;298:2654-64; Ding and Hu editorial 2675-76)
- Seventy percent of smokers say they want to quit if there were an easy way (Treating Tobacco Use and Dependence. Quick Reference Guide For Clinicians. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service October 2000).
- It is easier than ever to help your patients quit using the California Smokers' Helpline services

The community outreach tools provided in the following pages can help provide you with the information you may need to communicate with your community. These can be used for email, newsletters, press, and other media connections.

- Sample press release (page 24)
- Sample news release for chapter newsletters (page 25-26)
- Talking points for the community (page 27)

FOR IMMEDIATE RELEASE

Contact: [Insert your contact name and phone number]

Change a Life in 30 Seconds – Give a Gold Card with no Fee

Diabetes Educators from throughout California have joined forces with the California Diabetes Program and the California Smokers' Helpline to develop the "Do you cAARd" campaign to assist their patients with diabetes quit smoking. Smoking has severe effects on diabetes such as:

- Of people with diabetes who need amputations, 95% are smokers
- Smoking one cigarette can cut a body's ability to use insulin by 15%
- Smokers with diabetes are 11 times more likely to have a heart attack than people who don't have diabetes and don't smoke

"Do you cAARd?" challenges Diabetes Educators to become smoking cessation promoters by using the Ask, Advise, Refer model:

- Ask every patient, every visit: "Do you smoke or use tobacco?"
- Advise them to quit.
- Refer them to the California Smokers' Helpline with the "Take Charge" Gold Card.

The "Do you cAARd?" campaign will celebrate its "kickoff" featuring:

- The "Do you cAARd?" Toolkit for Diabetes Educators and other Health Care providers
- A continuing education program on diabetes and tobacco cessation
- Education opportunities offered statewide by the "Do you cAARd?" Task Force

For more information on this campaign link to "<u>Be Proactive Project</u>" or <u>Smoking and Diabetes</u>. This campaign is a part of the "*Be Proactive*" Collaborative Diabetes and Tobacco Cessation Project of the California Diabetes Program, the California Smokers' Helpline and the California Tobacco Control Section at the California Department of Health Services. Funding for this project is a part of the "State-Based Tobacco Cessation Quitlines" supplemental tobacco control award from the Centers for Disease Control and Prevention (CDC).

Goals of the campaign are to increase use of the Helpline by persons with diabetes and improve the extent to which health care providers assess smoking status of persons living with diabetes, advise them to quit, and refer them to the Helpline (1-800 NO-BUTTS).



FOR IMMEDIATE RELEASE:

November 2006

Diabetes Awareness Month

Contact: Cindy B. Lopes (916) 772-5365

Change a Patient's Life in 30 Seconds Smokers with diabetes benefit from getting "Gold Card"

Sacramento – As part of November's Diabetes Awareness Month, a new campaign has been launched across California to empower Diabetes Educators and other health care providers working with patients who have diabetes and smoke. The **'Do you cAARd?'** campaign offers a wide range of *free* resources that make it easier than ever for health care providers to quickly help these patients.

The campaign was designed by Diabetes Educators, the California Diabetes Program and the California Smokers' Helpline. Training opportunities are being offered at planned meetings around the state or on-site at a provider's workplace.

A free "**Do you cAARd?**" kit is available at www.caldiabetes.org. The kit is an easy reference tool that gives health care providers an overview of the serious health complications associated with diabetes and smoking and the free help available. They can then share this information with patients for guidance and support.

"Physicians don't always have a lot of time to spend with patients, nor are we trained to provide counseling services," said Dr. Jennifer Tuteur, Medical Director of San Diego's National Medical Association Comprehensive Health Center. "So, having this free service to refer patients to is great."

The goal of the "Do you cAARd?" campaign is to educate and challenge Diabetes Educators and other health care providers to become smoking cessation promoters by following three simple steps...Ask, Advise, Refer using the California Smokers' Helpline Take Charge Gold Card.

Step One: Ask every patient at every visit: "Do you smoke or use tobacco?"

Step Two: Advise them to quit. "Make it a priority to quit smoking – it is important for your health"
Step Three: Refer them to the California Smokers' Helpline with the "Take Charge" Gold Card.

The "Take Charge" Gold Card looks like a credit card and is an easy reference tool to give to patients. It gives them simple smoking cessation tips and tells them how to contact the California Smokers' Helpline. Services available to patients include free self-help materials, referral to local cessation programs and/or free one-on-one counseling over the phone.

"We're on their side," explains California Smokers' Helpline Program Director Chris Anderson. "When someone calls us they're going to get a supportive, caring person, a counselor who is non-judgmental." Anderson adds that research is showing the counselors are having an effect. "People who use our telephone counseling are twice as likely to quit successfully as those trying to quit on their own."

Carolyn Salinas, a Kaweah Delta Healthcare District Hospital Registered Nurse and Certified Diabetes Educator (CDE) and Do you cAARd? Task Force member, visited the Helpline in San Diego. "I wanted to make certain the person on the other side of the line had the skills to help our patients succeed," says Salinas, who's been a CDE for seven years. "These people are well educated, some working on their masters or doctorates, and really know the business of smoking cessation. I'm on the bandwagon now!"

California Smokers' Helpline services are available six days a week in English, Mandarin, Cantonese, Korean, Spanish and Vietnamese, as well as a TDD line for the hard of hearing. There are also specialized services for teens, pregnant women and those who chew tobacco.

Resources for Healthcare Professionals				
www.caldiabetes.org	Download: "Do you cAARd? Toolkit"			
1-916-552-9888	"Be Proactive Campaign Toolkit"			
www.nobutts.org	Order FREE patient materials			
Resources for Healthcare Professionals and the Public				
California Smokers' Helpline	Monday-Friday 7am - 9pm			
	Saturday 9am - 1pm			
	Voicemail Available 24 Hours a Day			
English	1-800-NO-BUTTS			
	1-800-662-8887			
Spanish	1-800-45-NO-FUME			
	1-800-456-6386			
Vietnamese	1-800-778-8440			
Korean	1-800-556-5564			
Cantonese	1-800-838-8917			
Mandarin	1-800-838-8917			
TDD/TTY	1-800-933-4TDD			
	1-800-933-4833			
Chewline (Chewing Tobacco)	1-800-844-CHEW			
	1-800-844-2439			

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"Do you cAARd?" Talking Points



- Diabetes Educators from throughout California have joined forces with the California Diabetes
 Program and the California Smokers' Helpline to assist their patients with diabetes quit smoking.
- Most smokers who suffer from diabetes are seeing a primary care doctor who doesn't necessarily
 have all the tools and answers regarding smoking and diabetes this campaign can help them.
- For every person who dies of a smoking—attributable disease, 20 more people suffer with at least one serious illness from smoking. Cigarette smoking increases the length of time that people live with a disability by about 2 years.
- There are over 2.5 million people in California that have diabetes and 13.6% of them smoke.
- Smoking increases the harmful effects of diabetes by making diabetes more difficult to control and increasing diabetes-related complications (these include blindness, kidney disease, heart disease, and neuropathy).
- Smoking increases the risk of amputations.
- Smoking increases insulin resistance making diabetes harder to control.
- Smoking may be an independent risk factor for type 2 diabetes.
- The "Do you cAARd?" Campaign encourages Diabetes Educators to become cessation promoters by utilizing the Ask, Advise Refer method:
 - Ask every patient, every visit: "Do you smoke or use tobacco?"
 - Advise them to guit.
 - o Refer them to the California Smokers' Helpline with the "Take Charge" Gold Card.
- The California Smokers' Helpline provides FREE telephone counseling services and referral services.
- People who use the telephone cessation counseling are twice as likely to quit successfully as those trying to quit on their own.
- Helpline services are available six days a week in English, Mandarin, Cantonese, Korean, Spanish, and Vietnamese, as well as, a TDD line for the hard of hearing. There are also specialized services for teens, pregnant women and those who chew tobacco.

(For more talking points please see pages 6, 16 and 22)

Free resources for healthcare professionals include:

California Smokers' Helpline 1-800-NO-BUTTS 1-800-662-8887 www.NoButts.org California Diabetes Program 1-916-552-9888 www.caldiabetes.org Download the Be Proactive Campaign Toolkit! Do you caard?

Ask every patient "Do you smoke?"

Advise them to quit

Refer them to the California
Smokers' Helpline by giving them the
"Take Charge" Gold Card

Diabetes Educators from throughout California have joined forces with the California Diabetes Program and the California Smokers' Helpline to help their patients with diabetes quit smoking.

Join the "Do you cAARd?" campaign, learn about the Ask, Advise, Refer intervention and help your patients reduce their risk of complications related to diabetes and improve their health.

- ◆ Find the Do you cAARd? Campaign online at www.caldiabetes.org
- Register on the Diabetes Information Resource Center (DIRC)
 - Download the Do you cAARd? toolkit
- Communicate via the **Forum** with other health care providers
 - Order free California Smokers' Helpline materials





Do you caard?



Section 3

Where to obtain the "Do you c**AAR**d?" Materials





Section 3: Where do I get the "cAARd"?



3.1. DIRC-Diabetes Information Resource Center

The "Do you c**AAR**d?" Toolkit can be found on the California Diabetes Program Web site at www.caldiabetes.org in the Diabetes Information Resource Center (DIRC). Most materials in this Toolkit are downloadable as PDF files and can be used and adapted for your needs.

Click here to go directly to the "Do you cAARd?" Campaign resource page on DIRC.

Register here to join the Diabetes Information Resource Center (DIRC) Learn more about the "Do you c**AAR**d?" Task Force via the "Do you c**AAR**d?" Forum on the California Diabetes Program Web site http://www.caldiabetes.org/forums/forum_display.cfm?ForumsID=32

DIRC is an easy portal to link you to the California Smokers' Helpline where you can order the "Take Charge" Gold Card and provide another useful resource - the "Be Proactive" Help Your Patients Quit Smoking Toolkit.

3.2. The California Smokers' Helpline

The California Smokers' Helpline offers a variety of tobacco cessation education and promotion resources (see materials list and order form on page 41-42). Resources and materials can be ordered online at http://www.californiasmokershelpline.org/Order.php. You can also visit www.nobutts.org or call the Outreach Department at (858) 300-1010.

3.3. Join the "Do you cAARd?" Campaign

The "Do you cAARd?" Diabetes and Smoking Task Force is available to help you with your tobacco cessation efforts. The Task Force is a volunteer group of Diabetes Educators from local AADE Chapters around the state of California who provide their time and expertise to successfully implement the "Do you cAARd?" Campaign. They are happy to offer their support and assist you as needed. They are also available to present the "Do you cAARd?" program presentation (an AADE continuing education program) to your diabetes chapter or health care provider event.

Please see the Task Force contact list to find the Task Force Member in your area on the following page.

"Do you cAARd?" Campaign

Diabetes and Smoking Cessation Project California Diabetes Educators Task Force



Diabetes Educators						
Name	Chapter	Email	Phone			
Lisa Hartley	Golden Empire Diabetes Educators (GEDE)	lhartley@marshallmedical.org	(530) 677-5950			
Chesney Hoagland-Fuchs	California Central Coast (CCCAADE)	chesneyhf@yahoo.com	(831) 759-6564			
Deb Greenwood	Golden Empire Diabetes Educators (GEDE)	deborah@wavesdiabetes.com	(916) 791-2570			
Lyla Prince	San Diego (SDADE)	Lyla.Prince@neighbor.org	(619)233-8500 ext. 1410			
Carolyn Salinas	California Central Valley (CCVC)	Carmarsal@aol.com	(559) 739-1943			
Suzanne Sanders	San Francisco Bay Area (SFBAADE)	shukuru@aol.com	(510) 236-7898			
Cindy Sandor	Orange (Orange-ADE)	csandor@sjf.stjoe.org	(714) 446-7891			
Organization Project Contacts						
Walter Silverman	California Smokers Helpline	wsilverman@ucsd.edu	(858) 300-1017			
Tami MacAller	California Diabetes Program	Tami.MacAller@cdph.ca.gov	(916) 552-9956			
Karin Omark	California Diabetes Program	karinomark@gmail.com	(619) 265-2343			
Catherine Saucedo	Smoking Cessation Leadership Center	csaucedo@ucsf.edu	(415) 502-8880			

Do you caard?



Section 4

Resources





Section 4: Resources:



4.1. Online Tobacco Cessation Information

There are many sources for tobacco cessation information. The California Diabetes Program and the California Smokers Helpline are available to assist you to find the resources that you may need. The following is a brief list of Web sites to help you in your search:

American Cancer Society

www.cancer.org

American Diabetes Association

www.diabetes.org

American Heart Association

www.americanheart.org

American Lung Association

www.lungusa.org

Become an EX

www.becomeanex.org

California Department of Public Health - Tobacco Control Program

http://www.cdph.ca.gov/programs/Tobacco/Pages/default.aspx

California Diabetes Program "Be Proactive: Help Your Patients Quit Smoking" Program

http://www.caldiabetes.org/content_display.cfm?contentID=303&categoryID=57

National Cancer Institute-Comprehensive Cancer Information

www.cancer.gov

National Center for Chronic Disease Prevention and Health Promotion (CDC)-Tobacco Information and Prevention Source (TIPS): How to Quit

www.cdc.gov/tobacco/how2quit.htm

Nicotine Anonymous – A 12 Step Program offering support to those who want to quit cigarettes www.nicotine-anonymous.org

Quit Smoking All Together with QuitNet.com - Stop Smoking Help and Cessation Support www.quitnet.com

Smokefree.gov

www.smokefree.gov

Surgeon General's Report – The Health Consequences of Smoking

http://www.cdc.gov/tobacco/data statistics/sgr/sgr 2004/index.htm

The Smoking Cessation Leadership Center

http://smokingcessationleadership.ucsf.edu/

Tobacco Education Clearinghouse of California (TECC)

www.tobaccofreecatalog.org

Tobacco Free California

www.tobaccofreeCA.org

Tobacco Free Nurses

http://www.tobaccofreenurses.org/

4.2. Patient Education Fact Sheets

For printable teaching resources, forms and information sheets see the following pages:

	P.A.	\GES
4.2.1.	Diabetes Smoking and your Health	
	– English	35
	 Spanish 	36
	- Chinese	37
	 Korean 	38
	 Vietnamese 	39
4.2.2.	Ask-Advise-Refer Intervention Cues	40-41
4.2.3.	Free Smoking Cessation Materials	42
4.2.4.	California Smokers' Helpline Materials FAX order form	43
4.2.5.	Cessation Medication and Quitting Aids	
	 FDA-Approved Medications to Help Patients Quit Smoking 	44
	 Quit Tobacco Series: Medication Chart 	45
	 Covering Quitting Aids 	46
	 Medi-Cal Checklist: How to Get Quitting Aids 	47

Diabetes, Smoking, and Your Health

Smoking has severe effects on your diabetes and your health. You can help to prevent and reduce the serious problems of diabetes by quitting.

Call the California Smokers' Helpline – It's Fast, it's Free, and it's Easy: 1-800-NO-BUTTS.

Eyes

Smoking can make vision problems worse which can lead to blindness.

Nerves

Smoking raises your risk of nerve damage. This can cause numbness, pain and problems with digestion.

Feet & Legs

Smoking can lead to serious foot and leg problems like infections, ulcers, and poor blood flow. Smoking raises your risk of amputation. Of people with diabetes who need amputations, 95% are smokers.

Kidneys

Smoking triples your risk of getting kidney disease. Drugs that help prevent kidney failure don't work as well for smokers.

Teeth

Smoking raises your risk of getting gum disease and losing your teeth.

Heart

Smokers with diabetes are 11 times more likely to have a heart attack or stroke than people who don't have diabetes and don't smoke.

Blood Sugar

Smoking raises your blood glucose (sugar) and reduces your body's ability to use insulin, making it more difficult to control your diabetes. In fact, smoking one cigarette can cut your body's ability to use insulin by 15%.





Quit Smoking Today
Call the California Smokers' Helpline at 1-800-NO-BUTTS

Chewing Tobacco: 1-800-844-CHEW

For more information about diabetes:

California Diabetes Program at (916) 552-9888 or www.caldiabetes.org American Diabetes Association at 1-800-DIABETES (1-800-342-2383) or www.diabetes.org



La Diabetes, el Fumar y Su Salud

El fumar tiene efectos negativos en su diabetes y su salud. Usted puede prevenir y reducir las complicaciones de la diabetes al dejar de fumar. Hable a la Línea de Ayuda para Fumadores – es gratis, es rápido y es fácil: 1-800-45-NO FUME o 1-800-456-3863.

Ojos

El fumar hace que sus problemas de la vista empeoren, lo que puede resultar en ceguera.

Nervios

El fumar aumenta el riesgo de dañar a sus nervios. Esto puede causar entumecimiento, dolor y problemas de digestión.

Pies Y Piernas

Fumar puede causar problemas muy serios en sus pies y piernas, como mala circulación, infecciones y úlceras. El fumar aumenta el riesgo de amputaciones. De todas las personas con diabetes que han sufrido una amputación, el 95% son fumadores.

Riñones

El fumar aumenta tres veces el riesgo de desarrollar enfermedades de los riñones. Las medicinas para prevenir las complicaciones de los riñones no funcionan muy bien en los fumadores.

Dientes

El fumar aumenta el riesgo de desarrollar enfermedad en las encías y puede perder sus dientes.

Corazón

Los fumadores con diabetes tienen 11 veces más riesgo de sufrir un ataque al corazón o de sufrir una embolia comparado con las personas que no tienen diabetes y que no fuman.

Glucosa (Azúcar) En La Sangre

El fumar aumenta el nivel de azúcar en la sangre y disminuye la capacidad del cuerpo de usar la insulina, haciendo más difícil el control de la diabetes. De hecho, al fumar un cigarrillo, reduce en un 15% la capacidad del cuerpo de usar la insulina.



Deje de fumar hoy mismo

Hable a la Línea de Ayuda para Fumadores de California al 1-800-45-NO FUME

Para más información sobre la diabetes:

Programa de Diabetes de California: (916) 552-9888 ó www.caldiabetes.org Asociación Americana de Diabetes: 1-800-DIABETES (1-800-342-2383) ó www.diabetes.org



糖尿病、抽煙與您的健康

抽煙會對您的糖尿病和健康產生嚴重的不良影響。 您可以透過戒煙而協助預防或減輕糖尿病的嚴重後果。 請致電加州戒煙專線 - 快速、免費,又容易:**1-800-838-8917Ž**

間間

抽煙會使視力問題更加嚴重, 有可能導致失明。

抽煙會增加牙齦疾病 以及掉牙的風險。

神經

抽煙會增加神經損害的危險G 導致麻木、疼痛和消化問題。

腿足

抽煙會導致腿足的問題,例如感染、潰瘍和 血液循環不良。抽煙會增加截肢的風險。 需要截肢的糖尿病患者中有95%是抽煙者。

抽煙會使罹患腎臟病的風險增加三倍。 協助預防腎衰竭的藥物對於抽煙者 的效果較差。

抽煙的糖尿病患者心臟病發作 或中風的機率是不抽煙的 非糖尿病患者的十一倍。

血糖

抽煙會增加血糖,並減少身體 使用胰島素的能力,使糖尿病更難控制。 事實上,抽一根香煙會使身體 使用胰島素的能力降低 15%。





今天就戒煙 請致電加州戒煙專線 1-800-838-8917

洽詢糖尿病的詳情:

加州糖尿病計劃 (916) 552-9888 或網站 www.caldiabetes.org 美國糖尿病協會 1-800-DIABETES (1-800-342-2383) 或網站 www.diabetes.org

당뇨병, 흡연, 그리고 귀하의 건강

흡연은 귀하의 당뇨병과 귀하의 건강에 심각한 영향을 미칩니다. 귀하는 금연을 하므로써 당뇨병의 심중성을 방지하고 줄일 수 있습니다.

가주 금연 상담소로 전화하십시오 - 신속하고, 무료이며, 쉽습니다: 1-800-556-5564.

눈

흡연은 봉사를 <mark>초래</mark>할 수 있는 시각 문제를 <mark>더 악</mark>화시킬 수 있습니다.

치아

흡연은 잇<mark>몸</mark> 질병과 치아를 상실하는 위험성을 높입니다.

신경

흡연은 귀하의 신경을 손상하는 위험성을 높입니다. 이것은 저리며, 통증과 소화문제를 초래할 수도 있습니다.

심장

당뇨병<mark>을 가진</mark> 흡연자는 <mark>심장마</mark>비나 중풍에 걸릴 가능성이 당뇨병이 없거나 흡연하지 않는 사람에 비해 11 배 많습니다.

발과 다리

흡연은 발과 다리에 염<mark>증</mark>, 궤양, 저조한 혈액순환과 같은 심각한 문제를 초래할 수 있습니다. 흡연은 절단의 위험성을 높입니다. 절단을 해야하는 당뇨환자들중, 95%가 흡연자입니다.

혈당

흡연은 귀하의 혈액 글루코오스(당)를 높이며 귀하의 몸이 인슐린을 사용하는 기능을 줄여, 귀하의 당뇨 조절을 더 어렵게 합니다. 실제로, 한대의 담배는 귀하의 몸이 인슐린을 사용하는 기능을 15% 로 자릅니다.

신장

흡연은 신장병을 갖는 위험성을 세배로 높입<mark>니다. 신장 쇠약</mark> 방지를 돕는 약은 흡연자들에게 잘 듣지 않습니다.





오늘 담배를 끊으십시오 가주 금연 상담소로 전화하십시오. 1-800-556-5564



당뇨병에 관한 정보:

캘리포니아 당뇨병 프로그램 전화 (916) 552-9888 또는 www.caldiabetes.org 미국 당뇨병 협회 전화1-800-DIABETES (1-800-342-2383) 또는 www.diabetes.org

Bệnh Tiểu Đường, Hút Thuốc, và Sức Khỏe của Quý Vị

Hút thuốc gây ảnh hưởng rất nhiều đến bệnh tiểu đường và sức khỏe của bạn. Bạn có thể phòng ngừa và giảm bốt các vấn đề nghiêm trọng của bệnh tiểu đường bằng cách bỏ hút thuốc.

Hãy gọi Trung Tâm Cai Thuốc Lá - Nhanh chóng, Miễn phí, và Dễ dàng: 1-800-778-8440

Mắt

Hút thuốc có thể làm cho thị giác yếu hỏn và có thể đưa đến mù lòa.

Răng

Hút thuốc làm gia tặng cỏ nguy bị viêm nướu và rụng rặng.

Thần kinh

Hút th<mark>uốc làm gia</mark> tăng cỏ ngu<mark>y h</mark>ư hại th<mark>ần</mark> k<mark>inh, có</mark> thể gây tê, đa<mark>u</mark> nhức và khó khăn về đư**ởng tiêu hóa**.

Chân và Bàn Chân

Hút thuốc có thể <mark>đ</mark>ưa đến các tại hại c<mark>ho bàn</mark> chân và chân như nhiễm trùng, lỗ loét, và máu kém lửu thông. 95% số người mang bệnh tiểu <mark>đ</mark>ưởng bị c<mark>ư</mark>a chân là nhữ<mark>ng</mark> người hút thuốc lá.

Thân

Hút thuốc làm gia tăng cơ nguy bị bệnh thận gấp ba lần. Các thuốc giúp phòng ngừa hư th<mark>ận</mark> không có hiệu lực nhiều đối với những người hút thuốc.

Tim

Những người hút thuốc mang bệnh tiểu đường có cỏ nguy bị đứng tim hoặc tai biến mạch máu não gấp 11 lần những người không mang b<mark>ệnh</mark> tiểu đường và không hút thuốc.

Đường trong máu

Hút thuốc làm gia tăng lượng đưởng trong máu và làm giảm khả năng của cỏ thể dùng insulin, làm khó kiểm soát được bệnh tiểu đường của bạn. Thật ra, hút một điếu thuốc có thể làm

giảm khả năng dùng insulin đến 15%.



Bỏ Hút Thuốc Ngay Hôm Nay Hãy Goi <mark>Trung Tâm Cai Thuốc Lá tai số 1-800-778-8440</mark>



Để biết thêm thông tin về bệnh tiểu đường:

Chưởng Trình Bệnh Tiểu Đường California tại số (916) 552-9888 hoặc www.caldiabetes.org Hiệp Hội Bệnh Tiểu Đường Hoa Kỳ tại số 1-800-DIABETES (1-800-342-2383) hoặc www.diabetes.org

ASK – ADVISE – REFER Intervention Cues



STEP 1: ASK (1 min)

- ☐ Systematically ask every patient about tobacco use at every visit.
- Determine if patient is current, former, or was never a tobacco user.
- ☐ Determine what form of tobacco is used.
- Determine frequency of use.
- Document tobacco use status in the patient's medical record.

Step 1 Sample Intervention Cues

For the patient who never regularly used tobacco:

- "Congratulations, you have made a wise choice to protect your health."
- "Congratulations, you have very good judgment."
- "Congratulations on being a non-smoker."

For the patient who quit using tobacco:

- "Congratulations, you made a wise decision."
- "Congratulations on quitting tobacco use. We have some good programs to help you remain tobacco-free. I can give you the contact information for the program."

For the patient who uses tobacco:

- "How many cigarettes per day do you smoke?"
- "How many cigars per day do you smoke?"
- "How many bowls of pipe tobacco do you use per day?"
- "Do others in your household use tobacco?"

STEP 2: ADVISE (1 min)

- ☐ In a clear, strong, and personalized manner, urge every tobacco user to quit.
- Tobacco users who have failed in previous quit attempts should be told that most people make repeated quit attempts before they are successful.
- ☐ Employ the teachable moment: link diabetes health issues with advice.

Step 2 Sample Intervention Cues

For the patient who currently uses tobacco:

- "Have you thought about quitting?"
- "Do you want to quit? I can help you. Let me give you the phone number for the California Smokers' Helpline. You can receive free counseling on how to quit and remain tobacco-free."
- "Quitlines have had proven success in helping people get through the difficult stages of quitting and most people prefer to use them."

ASK - ADVISE - REFER Intervention Cues

STEP 3: REFER (1 min)

- Determine if patient is interested in quitting. For those interested:
- Give them a California Smokers' Helpline (1-800-NO-BUTTS) Gold Card/Brochure.
- ☐ Give them the Diabetes and Smoking Fact Sheet.
- Provide a referral to a local cessation program (when appropriate).
- ☐ Document in patient's medical record.

Step 3 Sample Intervention Cues

For the patient who currently uses tobacco:

- "I know quitting smoking is very difficult. Most people who want to quit are successful. Sometimes it takes more than one try. I know you can do it. Let me refer you to the cessation quitline, they can help you quit."
- "I can't see what tobacco is doing to your diabetes, heart, lungs, brain and other organs, but I would like to discuss some health issues and complications that could be due to your smoking."

Local Cessation Resources:

www.nobutts.org

Web based cessation program:

http://smokefree.gov/ or http://www.quitnet.com

Diabetes Resources:

California Diabetes Program www.caldiabetes.org

American Diabetes Association www.diabetes.org





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Free Smoking Cessation Materials Available from the California Smokers' Helpline































Visit our website at <u>www.nobutts.org</u> for more information on Helpline services.

Phone: (858) 300-1010 Fax: (858) 300-1099



Fax this Order Form to 858-300-1099

Ente				h item ord	erea.					
	"Want to	Quit Smoking?	" brochures (fa	or adult smokers)						
#	English	Spanish	Korean	Vietnamese	Chinese	American Indian				
	"Take Ch	arge" gold card	Eyon was to laid change; all the control of the con	ARGE	Regale Salud					
#	"Regale Sa	alud" gift cards		El mejor re para su far es salus ¡Dejo do furm:	galo milla d 1-800-45-N0-FUME 1-800-456-6386					
#	"Want to Help a Teen Quit Smoking?" brochure (for adults working with teens)									
#	# "Want to Quit Chewing?" brochure (for adults who use chew/dip)									
#	Poster									
#	Wallet ca	rds (multi-language		Smoking With Help						
#	"Pregnant & Smoking: Want to help yourself & your baby?" brochure (for providers to use with pregnant women)									
#	English Spanish Gift Certificate (to encourage family/friends to quit)									
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4.2.5. Cessation Medications and Quitting Aids

FDA-approved Medications to Help Patients Quit Smoking

The United States Public Health Service guidelines for quitting smoking or chewing tobacco recommend a combination of counseling and medication. The following seven medications are approved by the FDA for that purpose.

Varenicline

This is the latest medication approved by the FDA for smoking cessation. Marketed by Pfizer, Inc. under the brand name **Chantix**, this medication acts on nicotine receptors with two types of action: it blocks some of the rewarding effects of nicotine (acts as an antagonist) and at the same time stimulates the receptors in a way that reduces withdrawal (acts as an agonist). For more information on varenicline, www.chantix.com.

Bupropion (Zyban or Wellbutrin)

Bupropion SR is a prescription pill marketed under the brand name **Zyban**. It is also available generically. It is designed to help reduce cravings for nicotine. It can also relieve symptoms of depression for some patients. This is not for use if you have a history of seizures or eating disorders or are currently using a monoamine oxidase (MAO) inhibitor or any other form of bupropion (such as Zyban or Wellbutrin). Treatment is recommended for seven to 12 weeks.

Nicotine Replacement Therapies (NRT)

- **Patch.** Patches are designed to provide a steady stream of nicotine through your skin over a designated time (16-24 hours, depending on the product). The patch is available via prescription or over the counter (OTC). It's designed to give you enough nicotine to ease cravings. Treatment is typically recommended for six to eight weeks.
- **Gum.** This OTC product is recommended for smokers who want something to turn to when experiencing urges to smoke. Chew up to 20-30 pieces a day for six to eight weeks. Use the 4 mg gum if you're smoking 25 cigarettes or more per day or using chewing tobacco. Use the 2 mg gum if you're smoking less than 24 cigarettes a day.
- **Inhaler.** Patients "puff" small doses of nicotine through this prescription product that looks similar to a cigarette. Unlike a cigarette, there is no harmful carbon monoxide. Treatment usually lasts eight to 12 weeks, depending on the patient.
- **Nasal spray.** This prescription product sprays nicotine into your nose. Recommended use is up to two sprays an hour for as many as three months.
- **Lozenge.** This OTC medication is usually used eight to 12 weeks. If you typically have your first cigarette or dip within 30 minutes of awakening, use the 4 mg dose. Otherwise use the 2 mg dose. Patients are urged to use at least 6 to 12 lozenges per day.

UW-CIRI

Quit Tobacco Series: Medication Chart

July 2006

Medication	Cautions	Side Effects	Dosage	Use	Availability	Average Cost
Bupropion SR 150	Not for use if you: * Currently use a monoamine oxidase (MAO) inhibitor * Use bupropion in any other form (Zyban/Wellbutrin) * Have a history of seizures * Have a history of eating disorders	* Insomnia * Dry mouth	* Days 1-3: 150 mg each morning * Days 4-end: 150 mg twice daily	Start 1-2 weeks before quit date; use 2 to 6 months	Prescription Only: * Zyban * Wellbutrin SR * Generic SR	1 box of 60 tablets, 150 mg: * Z: \$185.99 * W: \$167.99 * G: \$101.99
Nicotine Gum (2 mg or 4 mg)	* Caution with dentures * Don't drink acidic beverages during use	* Mouth soreness * Stomach ache	* 1 piece every 1 to 2 hours * If ≥ 24 cigs: 2 mg * If ≤ 25 cigs/day or chewing tobacco: 4 mg	Up to 12 weeks or as needed	OTC Only: * Nicorette * Generic	2 mg box of 50: * N: \$29.99 * G: \$22.99 4 mg box of 50: * N: \$32.99
Nicotine Inhaler	* May irritate mouth/throat at first (but improves with use) * Don't drink acidic beverages during use	* Local irritation of mouth and throat	* 6-16 cartridges/day * Inhale 80 times/cartridge * May save partially-used cartridge for next day	Up to 6 months; taper at end	Prescription Only: Nicotrol inhaler	1 box of 168 cartridges = \$166.99
Nicotine Lozenge (2 mg or 4 mg)	* Do not eat or drink 15 minutes before or during use * One lozenge at a time * Limit 20 in 24 hours	* Hiccups * Cough * Heartburn	* 2 mg: If smoking after first 30 minutes you're awake * 4 mg: If smoking within first 30 min. you're awake * Weeks 1-6: 1 every 1-2 hrs * Wks 7-9: 1 every 2-4 hrs * Wks 10-12: 1 every 4-8 hrs	Up to 12 weeks	OTC Only: * Commit * Generic (Nicabate)	2 mg, 48 tablets: * Commit: \$29.99 4 mg, 48 tablets= * Commit: \$29.99 * Generic: \$24.99
Nicotine Nasal Spray	Not for patients with asthma May irritate nose (improves over time) May cause dependence	* Nasal irritation	* 1 "dose" = 1 squirt per nostril * 1 to 2 doses per hour * 8 to 40 doses per day * Do NOT inhale	3-6 months; taper at end	Prescription Only: Nicotrol NS	1 box of 40 ml = \$190.99
Nicotine Patch	Do not use if you have severe eczema or psoriasis	* Local skin reaction * Insomnia	* One patch per day * If ≥ 10 cigs/day: 21 mg for 4 wks, then 14 mg for 2 wks, 7 mg for 2 wks * If <10/day: 14 mg for 4 wks, 7 mg for 4 wks	6-8 weeks	OTC: * Nicoderm CQ * Nicotrol * Generic Prescription: * Generic (Legend)	21 mg, box of 7: Nicoderm: \$29.99 Generic: \$21.99 14 mg, box of 7: Nicoderm: \$29.99 Generic: \$21.99
Varenicline	Use with caution and consider dose reduction in patients: * With significant renal impairment * Undergoing dialysis	* Nausea * Insomnia * Abnormal dreams * Headache	* Days 1-3: 0.5 mg every morning * Days 4-7: 0.5 mg twice daily * Day 8-end: 1 mg twice daily	Start 1 week before quit date; use 3-6 months	Prescription only: Chantix	Cost varies. Approximately \$115 per month (\$3.70 per day)

Covering Quitting Aids

If your patient has Medi-Cal, they may be able to get products to help them quit smoking.

Two items are needed for coverage:

- Certificate of enrollment from an approved behavioral-modification program the California Smokers' Helpline is an approved program
- Prescription for quitting aid prescriptions are needed for both OTC and prescription medications
 - i. Patch, Zyban®/Wellbutrin® Treatment Authorization Request (TAR) not required
 - ii. Spray, gum, inhaler, lozenge Requires TAR with medical justification

The smoker presents these to the pharmacist, who then supplies the quitting aid or submits a Treatment Authorization Request (TAR) to Medi-Cal and approval may take two days to two weeks.

Private Insurance

Individual plans vary. Have the patient check with their carrier about procedures for coverage. Some carriers offer coverage with behavior-modification program enrollment, either their own plan or through the California Smokers' Helpline.

For more information please visit the California Smokers" Helpline website: http://www.californiasmokershelpline.org/quittingaids.shtml See the patient information handout next page.

Medi-Cal Checklist: How to Get Quitting Aids



If you have Medi-Cal, you may be able to get products to help you quit smoking.

Here's how:



Talk to your doctor or Medi-Cal plan health educator.

- Explain that you want help quitting smoking.
- Get a prescription for a quitting aid (for example, patches and/or Zyban®).



Call
California Smokers' Helpline:
1-800-NO-BUTTS
(1-800-662-8887)

- A trained counselor will help you make a personalized plan to quit.
- After the call, your counselor will send you a certificate.



Take the Helpline certificate and the doctor's prescription to your pharmacist.

- If your doctor prescribed an approved product (such as patches and/or Zyban®), the pharmacist can usually get it for you right away.
- If your doctor prescribed other products, the pharmacist will need to submit a Treatment Authorization Request (TAR). Approval may take two days to two weeks.

To give yourself the best chance of success, follow the plan you made with your Helpline counselor. Use your quitting aid as directed. And remember, the one doing the work is you, not the quitting aid. The quitting aid is just a tool to help. Give yourself credit for every day you don't smoke!

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4.3. Other resource information:

Inhaled Insulins

Inhaled insulin, an alternative to insulin injections, is contraindicated for people who smoke.

Inhaled insulin can not to be used if you smoke or if you recently quit smoking (within the last 6 months).

Like any insulin product, low blood sugar is a side effect of inhaled insulin. Patients need to be instructed to carefully monitor their blood sugars regularly. Other side effects in inhaled insulin may include cough, shortness of breath, sore throat, and dry mouth.

Pfizer Inc and Novo-Nordisk offer inhaled insulin products.

For more information on inhaled insulin visit online resource: http://www.diabetesnet.com/diabetes_treatments/insulin_inhaled.php

Do you caard?



Section 5

Diabetes Information Resource Center DIRC





5.1. Join DIRC and gain the benefits

DIRC is an easy-to-use portal to help you exchange information and tools to support their work to prevent or control diabetes. The California Diabetes Program developed DIRC in response to the needs of stakeholders throughout California.

DIRC is *your* resource to help you LEARN.SHARE.CONNECT with other health care organizations focusing on diabetes and other chronic diseases.

Benefits of becoming a DIRC Content Contributor:

- Be part of a growing state directory of organizations working to fight diabetes
- Use the Event Calendar to promote your events and facilitate on-line registration
- Create an organization (CDE Chapter) website so you can communicate with members
- Gain free access to the Forum and participate in online discussions
- Create a free Partner Profile of your organization and increase your visibility statewide!
- Share your resources (data, tools, and materials)
- Receive the free quarterly Cal Diabetes News e-bulletin
- Receive monthly tracking reports
- Get automatic reminders to refresh your content
- Gain eligibility to be featured on the home page
- Benefit from all DIRC promotion and advertising
- Be considered for the annual DIRC Award of Excellence

Join the "Do you cAARd?" Campaign

The "Do you cAARd?" Diabetes and Smoking Task Force is available to help you with your tobacco cessation efforts. Register on DIRC and join the "Do you cAARd?" Forum.

DIRC is easy to use and the California Diabetes Program staff can assist you in creating a partner profile. See the next two pages for more detailed information on DIRC.

Visit www.caldiabetes.org

Diabetes Information Resource Center (DIRC)

LEARN.SHARE.CONNECT.



lt's

Fun!

It's as easy as 1, 2, 3.

- I. Register
- 2. Become a Content Contributor
- 3. Submit a Partner Profile

What is DIRC? It is a quick and easy-to-use Web-based portal designed to help you find and share information, tools and programs about diabetes prevention and control.

What's in it for me? Let's say you represent a community organization and want to start a diabetes education program. You need simple tools in Spanish. DIRC is your first stop. Go to www.caldiabetes.org, enter Spanish in the Search field. All resources in Spanish will appear and you can browse for materials, download them, copy them and get them to your community.

Register and Become a Content Contributor

- 1. Go to www.caldiabetes.org and select Register from the Content Contributor menu.
- 2. Complete the brief registration and select your password.
- 3. Read the Submission Guidelines and then select Process Registration.
- 4. You will receive an email confirming the activation of your Content Contributor account.



How do I create a Partner Profile?

Partner Profiles are snapshots of organizations working to prevent or control diabetes. They include your organization's contact information, mission statement, and a general description of your work. You may make additions or update your Partner Profile anytime.

- 1. Go to www.caldiabetes.org. Select Log In from the left menu bar. Enter your email address and password. Select Process Log In. You are now in the Administration Area of DIRC.
- 2. Click Show Profiles from the left menu bar.
- 3. Select Add New Profile. Enter your profile name or title and click Add Profile. You are now on the Partner Profile data entry form.
- 4. Read the instructions and complete the form.
 - TIP: Carefully review and select the options in Population Served by Your Organization. Your choices determine how DIRC files and displays your information and impacts how visitors find your information when conducting a Search.
- 5. Once your profile is complete and you have saved the information using the Save/Exit Form button at the bottom of the form you will see the Profile Overview screen.
 - Preview your profile. Edit and Save your profile. Submit your profile for approval.
 - After your Profile is approved it will be activated and searchable on DIRC. Congratulations!





DIRC is at w.caldiabetes

The mission of the California Diabetes Program is to prevent diabetes and its complications in California's diverse communities. DIRC is a collaborative effort and is funded by the Centers for Disease Control and Prevention, industry sponsorships and in-kind donations from public and private organizations.



LEARN.SHARE.CONNECT.

DIRC Diabetes Information Resource Center

www.caldiabetes.org



California Diabetes Program

Help us expand DIRC into the most accessible online tool to find and share diabetes information in California!

Be part of DIRC! Become a Content Contributor. It's free! It's easy!

- 1. Register
- 2. Log in
- 3. Submit a Partner Profile of your organization

Benefits

Include your organization's Partner Profile on DIRC

Submit and share your Resources (educational tools, reports, etc.) on DIRC

DIRC Monthly E-Report tracks visits to your Partner Profile and Resources

DIRC's Event Calendar - post your event and manage responses, or view and register for events

DIRC's Forum - begin or participate in online discussion groups

Cal Diabetes News, a quarterly e-bulletin with diabetes updates and opportunities

Submit this form today! Or fax to 916.552-9988, or complete online at www.caldiabetes.org

*Required field NEW CONTENT CONTRIBUTOR REGISTRATION First Name: Credentials: (if any) Email Address: (Note: you must specify a valid email address to get access) Daytime Telephone Number: (xxx-xxx-xxxx) * extension: Organization Name: * Organization Web Site: * Please briefly explain why you would like to become a partner: Desired Username: Desired Password: (A copy of your username and password will be emailed to you.)

This program is supported by the collaboration of the California Diabetes Program, the California Smokers' Helpline and the California Department of Health Services Tobacco Control Program. It is supported by supplemental funding from the Centers for Disease Control and Prevention Office of Smoking and Health.

Ask, Advise, Refer. was developed by the American Dental Hygienists Association's (www.ADHA.org) national Smoking Cessation Initiative (SCI). It was designed to promote cessation intervention by dental hygienists. The Ask, Advise, Refer approach integrates the "5 A's" (Ask, Advise, Assess, Assist, Arrange) adapted from the Public Health Service's (PHS) clinical practice guideline, *Treating Tobacco Use and Dependence*, into an abbreviated intervention that remains consistent with recommended guidelines.

For more detailed information on this project please contact the California Diabetes Program (916) 552-9888 or visit www.caldiabetes.org contact us.