Reports from the Field: Two health care providers “on the right track”
By Judy Gerard, ATOD Network Project Manager

Treatment of tobacco dependence has finally become a ‘mainstream’ health care concern. With the upcoming implementation of the Affordable Care Act in Jan. 2014, tobacco cessation is taking on even more importance. This increased emphasis will result in higher quality health care services, improvement in treatment outcomes, and will reduce health care costs associated with chronic diseases that are often caused, or worsened, by tobacco-use. Alameda County providers are stepping up their efforts to be sure they are offering the tobacco treatment interventions and services that comply with federal mandates and meet consumer demand.

We’d like to share what two agencies are doing to be ‘on the right track.’

East Bay Community Recovery Project (EBCRP) is one of the largest and most comprehensive substance abuse and mental health treatment programs in Alameda County. With locations in Oakland and Hayward, EBCRP offers a variety of programs designed to fit the needs of consumers of all ages. Over the last several years, through a series of small Special Tobacco Project grants, funded through Alameda County Behavioral Health Care Services, (ACBHCS), EBCRP has been working to change protocols in their out-patient programs to better address and treat tobacco dependence with clients, and to implement agency-wide tobacco policies for staff.

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E-cigarette use is increasing - though data about risks and benefits are still scant:
WHAT YOU SHOULD KNOW
By Cathy McDonald, MD, MPH, FAAP, ATOD NETWORK Project Director

Recently a team of psychiatrists, tobacco training staff and an administrative pharmacist from ACBHCS met and reviewed information on the e-cigarette and wrote up a succinct informational document related to e-cigarettes which is posted at www.acbhs.org under the tobacco tab. This article will provide some additional information.

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ATOD Network to launch online Yahoo group exclusively for Alameda County Tobacco Cessation Providers
By Rosalyn Moya, MPH

ATOD Network to launch online Yahoo group for Alameda County Tobacco Cessation Providers. Providers can use this online forum to share information and resources, ask or answer questions, network with colleagues in Alameda County, and receive professional support on tobacco cessation from Dr. Cathy McDonald. We will also be posting training announcements, newsletters and other tobacco cessation events in Alameda County.

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Electronic cigarettes, or e-cigarettes, are devices that allow users to inhale a vapor containing nicotine. The e-cigarette usually comes in three parts: the battery, the atomizer and the cartridge. The battery looks like the part of the cigarette that contains the tobacco. The atomizer lies between the battery and the cartridge. The cartridge contains an absorbent material soaked in e-juice—the liquid nicotine—and is made to look like the filter of a cigarette. When a smoker pulls on the cartridge, the e-juice reacts with the heat from the atomizer, and the battery and produces steam. This enters the smoker’s mouth as smoke. Most e-cigarettes also have a light at the end of the battery that “smoulders” like the tip of a cigarette would. Reusable e-cigarettes come with a charger similar to a cell phone charger.

Use of the electronic cigarette and or cigar has grown tremendously since it was first introduced overseas in 2002 and in the US in 2006 yet e tobacco products remain completely unregulated by the FDA at this time. This March, the American Cancer Society Cancer Action Network (ACS CAN) asked the FDA once again to regulate these products after an ad for Enjoy e-cigarettes appeared on TV during the Oscars. ACS CAN felt the ad indirectly promoted e-cigarettes as a way to quit smoking. The ad also mimicked information about e-cigarettes communicated on multiple “vaping blogs” - blogs that support e-cigarette use. Currently, there is not enough scientific evidence to prove that e-cigarettes can help people to quit. However, there are 7 safe first-line FDA-approved cessation products that have been scientifically proven to more than double success in quitting. One mimics hand to mouth activity similar to cigarettes — the nicotine inhaler. These products: nicotine patch, gum, lozenge inhaler and nasal spray as well as non nicotine bupropion or Chantix, when combined with counseling are the evidence—based approach to quit smoking and generate quit rates as high as 30-50%.

Several studies have been done to assess knowledge and use of these products. A recent CDC study by B. King et al. showed that between 2010 and 2011 knowledge of e-cigarettes by adults grew from 40-60%. Simultaneously use by adults had doubled from 3-6%. Use by current adult smokers had doubled from 10-21%. And use by former smokers had tripled from 2.5% to 7.4%. There is no data on how many of the former smokers had quit and started up with e-cigarettes vs those who were able to quit using e-cigarettes. And we have no data on how long users had stayed quit. A prior study by Pearson showed that younger smokers (18-24) were more likely to have tried an e-cigarettes than older smokers. Preliminary results of a recent study demonstrate that “ever-use” by teens is about 3.3% ranging from 1% in 6th grade to 6.5% in seniors. As with adults, teens who smoked were much more likely to have used the e-cigarettes. Use of e-cigarettes is expected to continue to grow. This year sales of $1 billion are anticipated with the availability of over 200 different unregulated products, with little or no quality control. This growing use of e-cigarettes by youth and adults with little knowledge of e-cigarettes harms or their effectiveness in helping people quit is a cause for concern.

An additional concern is that their appealing flavors and intriguing appearance will attract young never smokers and lead them to cigarettes. Alternatively they may be used by existing smokers to get around smoke-free ordinances and interfere with the known impact of smoke free ordinances on improving public health and decreasing the rate of smoking. The latest concern is in an article published by Public Library of Science (PLOS) in March 2013. It revealed that particles from metals and silicon carbide are found in the aerosol from it.

**Tobacco Industry Role**

As e-cigarettes have penetrated the market, the tobacco industry has joined the marketing and promotion. Lorillard, makers of Newport, purchased a popular e-cigarette – Blu in April 2012. Blu e-cigarettes are using the latest marketing strategies. They are sold on the internet with a simple request for you to select if you are over or under 18. If you select over 18, you can proceed with order. If you select under you exit the site. (selecting over is a no brainer for teens). Then as you select from a series of flavors, including liquor flavors like Peach Schnapps and Pina Colada you are offered the chance to like them on Facebook spreading the word through social networks. Your pack is set up so that it will vibrate if you are within 50 feet of a Blu user so you can connect, or 50 feet of a supplier where you can stock up on cartridges. Cartridges are sold in strengths identified as: High: 13-16mg nicotine; Medium: 9-12mg nicotine; Low: 6-8mg nicotine; Non-nicotine: 0mg. A Single use Blu costs $9.99. A multiuse version costs $60-90 to get started. There are at least 234 suppliers in Alameda County, easily found on their site including drug stores, grocery stores, pharmacies etc. RJ Reynolds, who brought us Joe Camel, has developed and is test marketing it’s own VUSE single use e-cigarette and Swisher Sweets is selling it’s own e-cigarette and e-cigar.

Initially most e-cigarettes were intended for multiple use and battery operated with chargers like your cell phone so you can reuse them by putting in a new cartridge. Now there are many in which the user refills the “tank” from a supply of nicotine necessitating the handling of nicotine “juice” which is poisonous (30-60mg being the lethal dose for an adult, 10mg for a child). Sometimes the user replaces a filler in the tank that is made of polyfi or other materials. You can drip more into your e-cigarette using a different mechanism.

Some of our clients, both teens and adults, are definitely beginning to experiment with these products. Some have had e-cigarettes recommended by providers when trying to quit even though they have not tried all appropriate safe and effective FDA products.

Currently I do not have enough information to recommend e-cigarettes to clients because we don’t know if they are safe for the user or those who live, work and play with them; we don’t know if they will get more young people started on nicotine and eventually cigarettes; we don’t know if they will delay successful quitting in those who use them as a cessation method and in those who maintain their smoking by using them to avoid smoke-free ordinances. Hopefully the FDA will issue requirements for safety and efficacy and eliminate flavoring. What we do know is that they are currently being used by an estimated 5 million Americans. The market will continue to expand. The tobacco industry sees this emerging market as serious competition—hence they have joined the ranks of manufacturing and distribution of e-cigarettes to maintain their customer base and market share.
**Tobacco Product Menthol Ban Still Needed**

Research has made it clear that menthol added to cigarettes is luring more teens to begin smoking and makes it harder to quit smoking. The brunt of the devastating health consequences of tobacco is being born by youth and minorities especially African Americans - eighty percent (80%) of African Americans who smoke, smoke menthol cigarettes. Surveys have shown that the majority of the population supports a ban on menthol: 56% of all Americans and 76% of African Americans. The surveys also showed that 47% of African Americans would quit smoking if menthol were banned. In November 2010, the FDA advisory group Tobacco Product Scientific Advisory Committee (TPSAC) put out a report: “The Case Against Menthol Cigarettes.” In the report they stated that, “Menthol has no redeeming value other than to make the poison go down more easily.” However, the FDA has yet to act. Watch for opportunities for advocacy around this issue.

**FDA Changing Over the Counter NRT Package Inserts: Product Directions Updated to Reflect Current Science for Recommended Use.**

The Food and Drug Administration announced Monday April 1, 2013, that it is relaxing some of the restrictions on labels for nicotine gum, patches and lozenges that are available over the counter. It is lifting a requirement that the products carry a strict limit on how long they can be used. And it is eliminating instructions that people stop smoking before starting to use one of the products. “If you are using an [over-the-counter nicotine replacement therapy] while trying to quit smoking, but slip up and have a cigarette, you should not stop using [it],” the FDA said in its new consumer guidance. “You should keep using the [product] and keep trying to quit.” A consumer handout can be found at http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm345087.htm

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**Medi-Cal Members: Want to Stop Smoking?**

Get a FREE $20 gift Card
When you call the California Smoker’s Helpline.

**1-800-NO-BUTTS**

Here’s How:
♦ Have your Medi-Cal ID ready.
♦ Call 1-800-NO-BUTTS
♦ Ask for the $20 gift card*
♦ Talk to a friendly person to create a free “stop smoking” plan.
(fax referred clients are also eligible)

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**CA Smokers Helpline and Website**

Call: **1-800-NO-BUTTS (662-8887)** The helpline also provides tobacco cessation counseling support to callers who self identify with substance abuse and mental health conditions. Counseling in multiple languages available.

Website: The CA Smokers Helpline now has on-line cessation support and you can download directories of local cessation services.

www.californiasmokershelpline.org
ADVANCED TOBACCO CESSATION AND PHARMACOTHERAPY INTERVENTIONS

A DAY-LONG SKILL-BUILDING WORKSHOP TO BECOME A MORE KNOWLEDGABLE
AND SKILLFUL TOBACCO CESATION COUNSELOR

Trainer:
Cathy McDonald, M.D., MPH

Description:
Learn more advanced tobacco cessation counseling techniques and pharmacotherapy protocols that will enhance your clients’ chances of quitting smoking.

Who Should Attend: Clinical staff who are already knowledgeable and practicing basic tobacco cessation techniques and need additional skills for solving more complex tobacco treatment issues. (Clinical Staff of substance abuse, mental health and primary care providers, Health Educators, Community Cessation Facilitators, Case Managers, Home Health Care Workers, Nurses and other Healthcare providers).

Learning Objectives: At the end of the training, participants will be able to:
1) Feel comfortable applying at least 3 client-centered cessation treatment and counseling techniques
2) Feel comfortable discussing pharmacotherapy treatments with clients
3) Know how to access nicotine replacement products from Medi-Cal

Wed, June 19, 2013
8:30 a.m. - 3:30 p.m.
Free training, plenty of free parking

Behavioral Health Care Services
2000 Embarcadero, 4th Floor
Oakland, CA 94606
Alameda Room—4th Floor

For more information, please call
Judy Gerard at 510-653-5040 x 349.
Please register using the form below.

This training is sponsored by Alameda County Behavioral Health Care Services (BHCS) in contract with the Alameda County Provider Network for Tobacco Dependence Treatment and Cessation, located at Thunder Road in Oakland, CA. (Thunder Road is an affiliate of Alta Bates Summit Medical Center and Sutter Health).

CEU Credits: This course meets the qualifications for 6 hours of continuing education credit for MFTs and/or LCSWs as required by the California Board of Behavioral Sciences, Provider Approval Number PCE 307, the California Board of Registered Nurses, BRN Provider Number 12040, and California Association of Alcoholism and Drug Abuse Counselors (CAADAC), Provider Number 4C-04-0614. Certificates of Attendance issued for counselors registered with a State Certifying organization. All participants receive a Certificate of Completion.

*** Training is primarily for BHCS funded and Alameda County health care providers. As space permits, staff from non-BHCS-funded programs may register.

REGISTRATION FORM
Please fax registration to Rosalyn Moya at 510-653-6475
or Email the following information to moyar@sutterhealth.org

IMPORTANT: Registration deadline is June 13, 2013. Please register early.

NAME: ____________________________________________ AGENCY: ____________________________

MAILING ADDRESS: ________________________________________________________________

EMAIL: ____________________________________________________________

DAY PHONE: ____________________________ FAX: ____________________________

DISCIPLINE: ____________________________ LICENSE #: ____________________________

We will be unable to provide lunch. Participants will have an hour lunch break. Take out cafes and kiosks are close by. Or please bring your own snacks, lunch and beverages.
ATOD Network to launch online Yahoo group exclusively for Alameda County Tobacco Cessation Providers

By Rosalyn Moya, MPH  (Continued from Page 1)

This is a closed online group exclusively for Alameda County Tobacco Cessation Providers and is not associated with other social networking groups. Its sole purpose is to be a resource center and chat room for Alameda County providers who are working on helping clients to quit smoking, or need help with implementing tobacco policies.

Instead of a mailing list, where the information is mostly from one source, this yahoo group will create a community so that any member of the group can post, making it a network in which the power to communicate with each other is shared as a community.

To get these features, a Yahoo, Gmail, or Facebook account can be used. Alternatively, joining the mailing list is also a good option for individuals who do not have any of these accounts and does not require the person to create a yahoo account.

When joining the group, members can control the ways that member receives emails:

- Individual email: you will get an email every time someone posts.
- Daily digest: you will get a maximum of one email per day, which means if 8 people post, it will be consolidated into one email. If no one posted, you will not receive an email.
- Manually: the person will have to manually go to the website and can browse through postings.

To request an invitation to the group, email moyar@sutterhealth.org.
Reports from the Field: Two Health Care Providers “on the right track”  
By Judy Gerard, ATOD Network Project Manager  
(Continued from Page 1)

Managing the complexity of implementing new protocols among staff working in diverse programs in two locations can be challenging to say the least. The process takes time. Over the last couple of years, EBCRP has kept tobacco policy and treatment issues on the ‘front burner’ as they continued to move forward. EBCRP started by inviting us, ATOD Network staff, to a series of very productive meetings with key staff from their Holistic Health program, and their medical and clinical directors. ATOD Network staff provided the necessary technical assistance and made suggestions on strategies for implementation. EBCRP also did a lot of internal work; they held meetings among their administrators, board members and key clinical staff, and they presented the proposed changes at staff meetings. During this time, clinicians also regularly attended our skill-building trainings at BHCS, such as: the Healthy Living Workshop, and the Tobacco Use Intervention Program. The combination of these efforts produced the momentum and systems changes EBCRP was seeking.

One protocol now being implemented is called Brief Tobacco Intervention (BTI). At intake, each client is asked 4 questions about tobacco-use.

These questions are designed to stimulate a dialogue and present clients with immediate access to cessation services. The questions:

1. Do you use tobacco products?
2. Are you interested in quitting?
3. Are you interested in using medicine to help you quit?
4. Our nurse is available to help you quit smoking. May I refer you, so she will call you?

Clients who express an interest in quitting are given a ‘warm handoff’ to the Holistic Health Program Manager and Registered Nurse Leora Myers, if she is available, or, if unavailable, arrangements are made for her to call the client later. Leora counsels the client, sets up access to medication, (nicotine replacement such as patches etc.), and also refers clients to attend healthy living and cessation groups. If the client isn’t ready to quit smoking, the BTI is repeated during the course of treatment and included in updates of the client’s treatment plan. This assures that all clients are asked about their tobacco-use, advised to quit, and offered services multiple times at various stages in their treatment process. The Holistic Health program also includes education and information to help motivate clients to make healthier lifestyle choices. Tobacco cessation support is a natural extension of this treatment approach. The goal is to be sure that every client is assessed for their tobacco use, provided with motivational interventions, and is given the opportunity and support they need to quit smoking while they are at EBCRP.

EBCRP has also implemented internal agency-wide tobacco policies. This has included establishing tobacco-free grounds at both sites, and posting indoor and outdoor signs declaring the no-tobacco use policies. EBCRP’s residential program for women and children, Project Pride, has been tobacco-free for clients since 2004. Further strengthening the tobacco-free policies, EBCRP recently rolled out staff policies that include ‘no evidence of tobacco-use at work.’ This means that staff cannot be identified as a tobacco user during work hours, including: not smoking in and around the premises, or in front of, or with clients, and not exhibiting tobacco products on their person, including smelling like smoke. Currently EBCRP is also providing support for staff members who smoke, and want to quit. EBCRP staff and clients receive a very clear message—Addressing tobacco use and tobacco treatment is part of high quality of care. Part of this high quality of care is encouraging staff to be healthy role models.

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Need help with your patients?

Dr. Cathy McDonald provides free technical assistance on tobacco dependence treatment and cessation techniques to physicians and other medical staff.

Call her at: 510-653-5040 X 315.
Axis Community Health Center - in Pleasanton and Livermore. As part of the Alameda County Community Health Center Network, Axis offers a full range of healthcare services for more than 14,000 residents at 5 sites, including Dublin. Over the last 3 years we, ATOD Network staff, have worked closely with Axis at the Pleasanton and Livermore medical clinic sites to integrate tobacco cessation services into adult primary care. This included providing funding support through Alameda County Public Health Tobacco Control, Tobacco Master Settlement Fund. This support has helped Axis build and sustain a tobacco cessation program.

The intervention includes: assessment, advice to quit, brief counseling, and medication (nicotine replacement – patches and gum). Patients are asked about their tobacco use at intake and may be referred by a physician for tobacco cessation counseling. The cessation program was set up so that a designated Medical Assistant (MA) provides counseling interventions throughout the week at each of the two medical clinics in Pleasanton and Livermore. Patients who have been advised to quit and are referred to counseling can make an appointment before they leave the clinic. At their appointment, the MA provides brief counseling and the client is offered nicotine patches and/or gum. Treatment is recorded in confidential medical record, and entered into a data collection spreadsheet to document the intervention and progress.

Currently, Axis is implementing a FAX referral system to the CA Smokers’ Helpline so the patient can receive telephone counseling to help them quit smoking. If the patient gives consent, a Helpline counselor will call him or her to provide additional coaching support at critical points during their quit process, this will offer clients an extra boost of support. Patients will still receive an on-site intervention from a MA, along with patches, however the additional coaching from the Helpline will increase their chances of successfully quitting. In the future, the ATOD Network Staff hopes to help Axis integrate electronic referral to the helpline into their newly implemented electronic health records system.

This successful cessation program started in 2010 with a commitment by former Axis Medical Director, Meena Rijhwani, who sought to improve her patients’ health outcomes by encouraging them to quit smoking. She believed that if Axis offered on-site cessation services, this would increase her clients’ probability of following through with their quit smoking efforts. She was right. Now current Medical Director, Dr. Divya Raj oversees the continued success of the tobacco cessation program. During the last 3 years, over 225 patients have received tobacco intervention and cessation services at Axis medical clinic sites.

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<td><strong>Wednesday, May 15, 2008</strong></td>
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<td><strong>1:30-3:30pm</strong></td>
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<td>Behavioral Health Care Services</td>
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<td>2000 Embarcadero, 4th Floor</td>
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<td>Oakland, CA 94606</td>
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<td>Gail Steele/ Alameda Room</td>
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The Roundtable Discussion will include:
- Time to talk about issues that are important to YOU
- Information and Resource Sharing: Bring your brochures and educational materials for the Resource Table
- Meet and Learn from your Peer
- Get CEU credits for RNs, MFTs, LCSWs, CAADAC.

This is a special session of the Alameda County Tobacco Control Program, Cessation Task Force Committee.

Space is limited. Please RSVP by May 9, 2013
Call Judy Gerard, Cessation Task Force Facilitator at 510-653-5040 ext 349 or email Judy at atodnetjudy@aol.com.
ATOD NETWORK UPCOMING TOBACCO TRAININGS

May 15, 2013 - Tobacco Cessation Roundtable
- Held at the Behavioral Health Care Services headquarters at 2000 Embarcadero, Oakland, CA
- 8:30 am to 12:30 pm

June 19, 2013 - Advanced Tobacco Cessation and Pharmacotherapy Interventions
- Held at the Behavioral Health Care Services headquarters at 2000 Embarcadero, Oakland, CA
- 8:30 am to 3:30 pm

Email: moyar@sutterhealth.org for training flyers

**ON-SITE STAFF TRAININGS AVAILABLE**
Alameda County AOD, Mental Health, and Primary Care Providers can schedule an on-site staff tobacco training at your agency by calling Judy Gerard at (510) 653-5040 X 349.

Free Cessation Services

- California Smoker’s Helpline
  For one-on-one cessation counseling call 1-800-NO-BUTTS

- Free cessation classes:
  - East & West Oakland Health Center - Joyce Riley, 510-835-9610
  - Berkeley Tobacco Prevention Program - Quit Smoking Classes. For more information and/or class schedule, call 510-981-5330 or email quitnow@ci.berkeley.ca.us.

- Check other free cessation classes listed in the Alameda County Cessation Resource Directory. Available at: www.tobaccofreealamedacounty.org or www.ACBHCS.org website under “TobaccoTreatment/References/and Resources”

The Nicotine-Free News is available by email.
Contact moyar@sutterhealth.org