

# New York City Free Patch Program



**Rashed U. Abedin, M.D., M.P.H.**

**Acting Assistant Commissioner, Bureau of Tobacco Control**

**Nancy Miller, PhD, CHES**

**Sze Liu, MPH**

**New City Department of Health & Mental Hygiene**

**Chicago, Illinois**

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# Acknowledgements

**Thanks to all who are involved in ongoing tobacco control projects at the DOHMH:**

**Special thanks to:**

**Thomas Matte, MD, MPH; Mary Bassett, MD, MPH; Thomas Frieden, MD, MPH; Epi, MIS, Call Center, TB, Public Information, Minority Health, Chronic Disease, Policy and Planning, Commissioners Office, Legal, Mental Health, Purchasing, Contracts —among others**

# BACKGROUND AND OVERVIEW




*"He's a quitter,  
and that makes  
me smile."*

**EVERYBODY LOVES A QUITTER.**

You can quit smoking, too.  
Call 311 and we'll help you do it.

Think. Talk. Quit.

NYC Health THE NEW YORK CITY DEPARTMENT OF HEALTH and MENTAL HYGIENE  
Michael R. Bloomberg, Mayor • Thomas R. Frieden, M.D., M.P.H., Commissioner



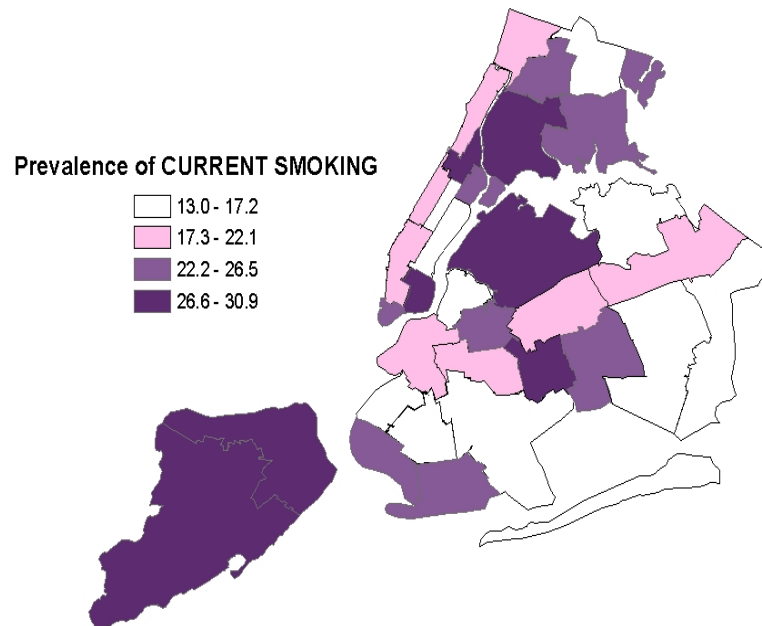
# Tobacco Use in NYC

- Smoking is the **#1 preventable** cause of death in New York City
- **1.2** million New York City residents are smokers
- **10,000** New Yorkers die each year from smoking
- **65%** of smokers in New York City want to quit

# Smoking Prevalence in NYC

## Prevalence of All Smoking

Prevalence of CURRENT SMOKING among Adults, by Neighborhood (UHF)  
New York City, 2002



Source: NYC DOHMH 2002 Community Health Survey (n=9,674)

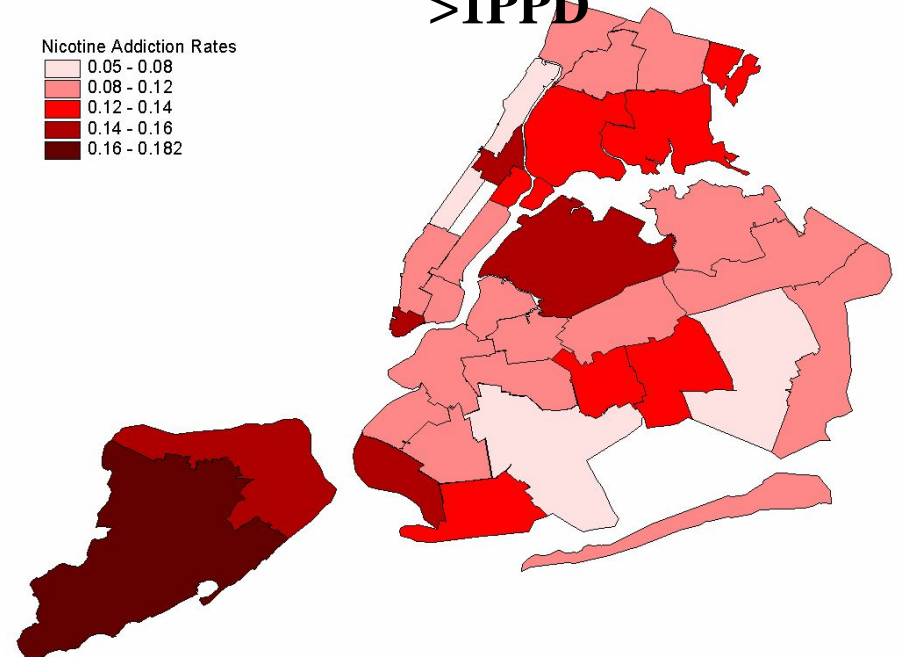
EVERYBODY  
LOVES  
A QUITTER.

2003  
USA- 22.5%  
NYC- 19.2%

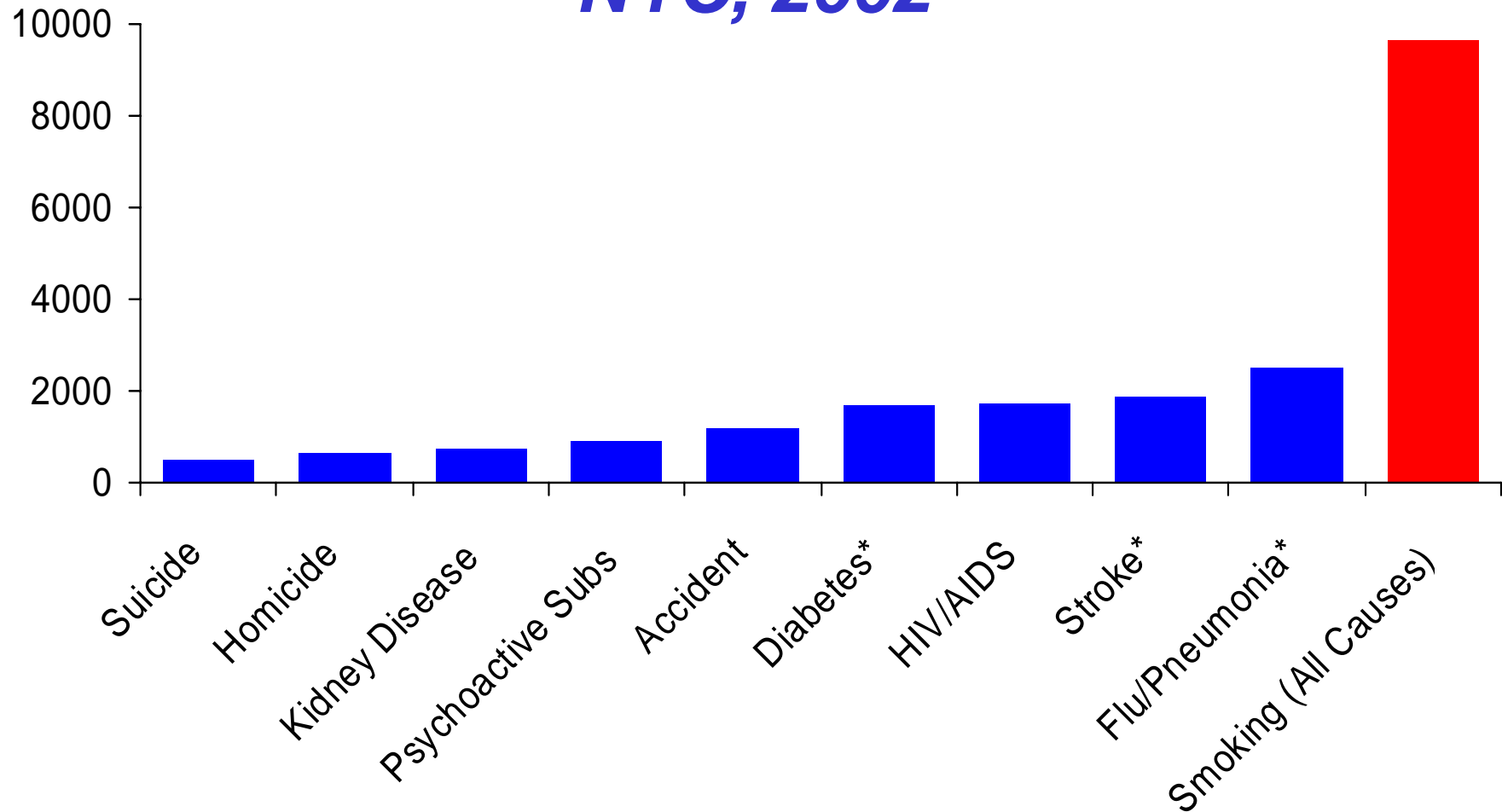
## Prevalence of Heavy Smoking >1PPD

Nicotine Addiction Rates

0.05 - 0.08
0.08 - 0.12
0.12 - 0.14
0.14 - 0.16
0.16 - 0.182



# Annual Deaths from Smoking Compared with Other Causes NYC, 2002



\* Total includes smoking-related deaths

# NYC's Five-Point Plan for Tobacco Control

- Taxation: Enforce \$1.42 tax
- Legal action: E.g., protect virtually all NYC workers from second-hand smoke
- Cessation: Entire health care system to promote cessation; free NRT; cessation registries
- Education: Targeted counter-advertising campaigns
- Evaluation: Monitor tobacco industry tactics and program effectiveness





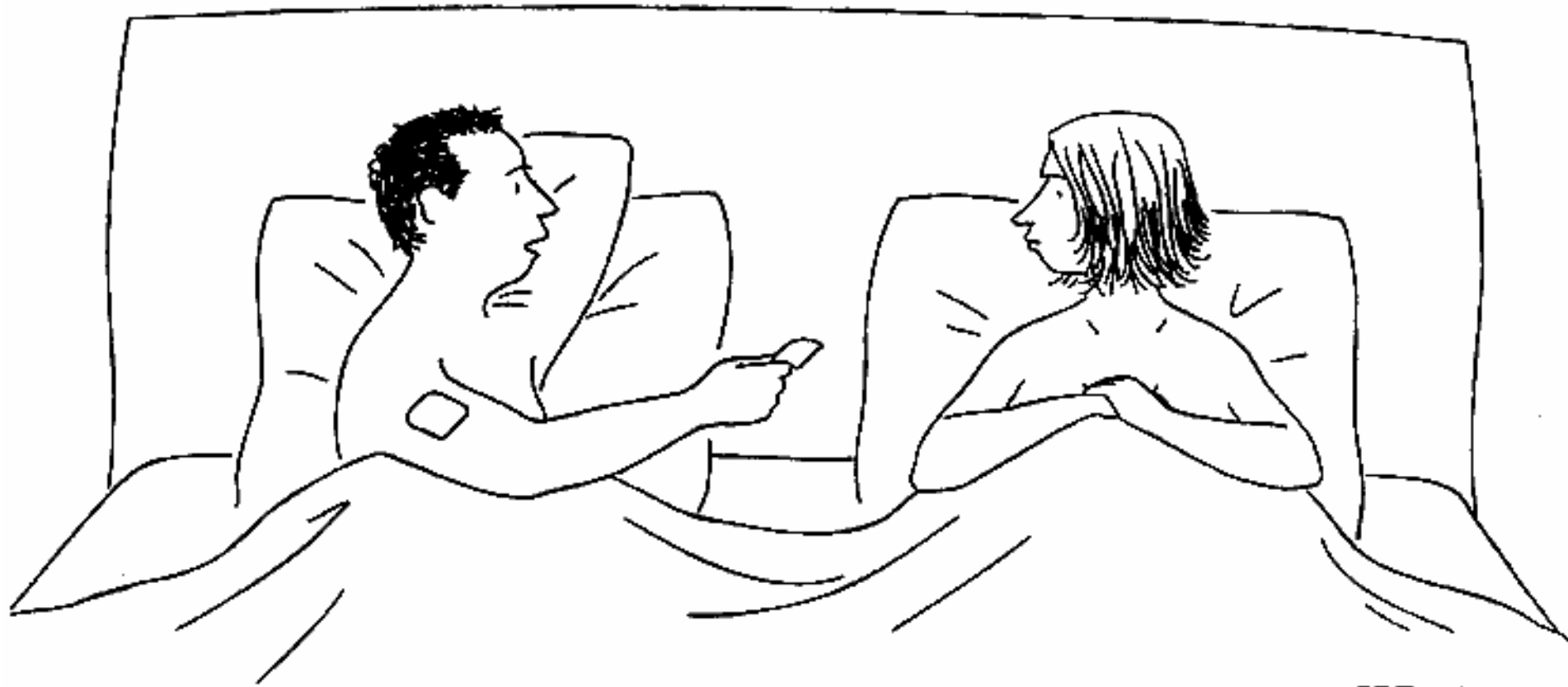
*"Would you like to go to my place for a cigarette?"*

# NYC's Tobacco Control Program Saves Lives

- \$1.42 per pack NYC sales tax increase
  - Will save 50,000 lives over lifetime of tax
- Expanded provisions of 2002 Smoke-Free Air Act
  - Will save 11,000 lives over lifetime of Act
- Free nicotine patch distribution (35,000 6-week courses of treatment in 2003)
  - Helped at least 5,000 NYers quit for good
  - Saved more than 1,500 lives

# IMPORTANCE OF NRT PATCH PROGRAM

- Smokers are **6 times** more likely to quit with patches and counseling than on their own
- Nicotine patches double abstinence rates
- Free medication increases quit attempts



GREGORY

*"Patch?"*



# NEW YORK CITY FREE PATCH PROGRAM 2003

**EVERYBODY  
LOVES  
A QUITTER.**



*"My buddy's a quitter. Is he great, or what?"*

**You can quit smoking too.  
For help, talk to your  
doctor or call 311.**



THE NEW YORK CITY  
DEPARTMENT of HEALTH  
and MENTAL HYGIENE



# Acknowledgements

**Special thanks to :**

**NY State Tobacco Control Program  
NY State Smoker's Quit Line Staff  
DOITT –311 and King Teleservices  
Pfizer**

# Program Intervention

**April-May 2003, screened for eligibility**

**Provided FREE nicotine patches --6 week course**

**Enrolled 35,000 NYC residents**

**LARGEST program in US**

**Brief counseling calls**

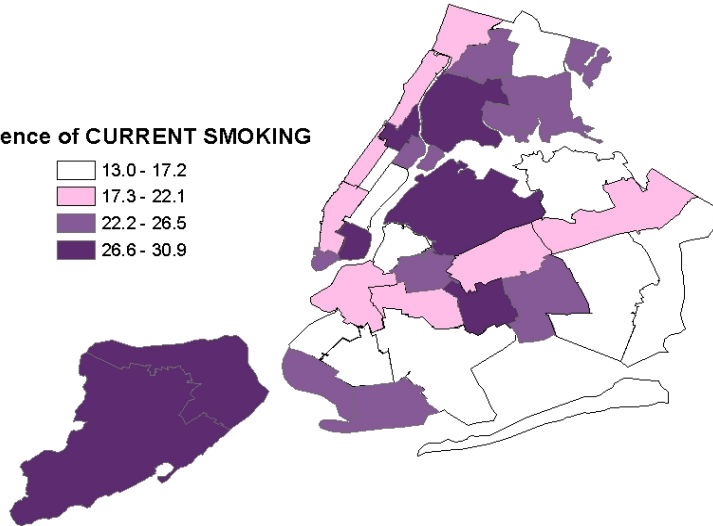
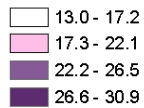
**45% reached**



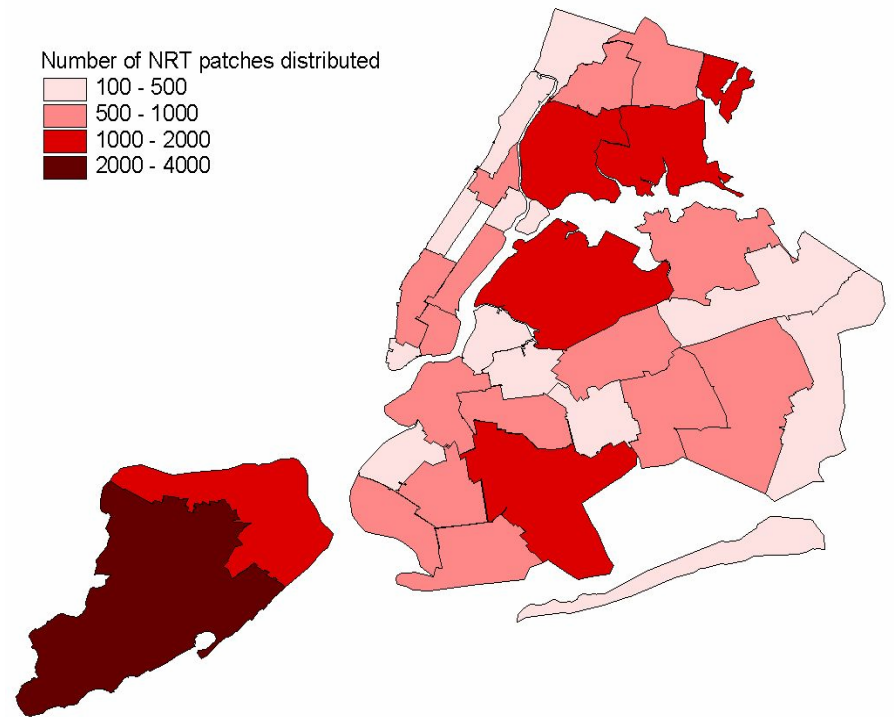
# Smokers vs. NRT recipients

Prevalence of CURRENT SMOKING among Adults, by Neighborhood (UHF)  
New York City, 2002

Prevalence of CURRENT SMOKING



Number of NRT patches distributed



Source: NYC DOHMH 2002 Community Health Survey (n=9,674)

# Study Objectives

**6 Mo Follow up survey evaluated outcomes:**

**Increase quit attempts**

- **% making a 24-hour quit attempt**
- **“Since you called for the free patches, have you ever stopped smoking for 1 day or longer because you were trying to quit smoking?”**

**Increase Quit Rates**

- **% 7-day smoking abstinence at 6-months**
- **“Have you smoked a cigarette, even a puff, in the last seven days?”**

# Methods- Data Collection

**Pre-survey invitation letter**

**Telephone survey followed by mailing to non-responders**

**Incentives**

**Brief Instrument—SES, Smoking behaviors (14 items)**

- 966 (74%) completed by phone
- 339 (26%) completed by mail
- Response rate 61%

Quit rates nearly identical, phone vs. mail

- Pooled responses presented

# Study Population

Free Patch Program Participants  
n = 34,090

All English-speaking eligible participants  
n = 33,713

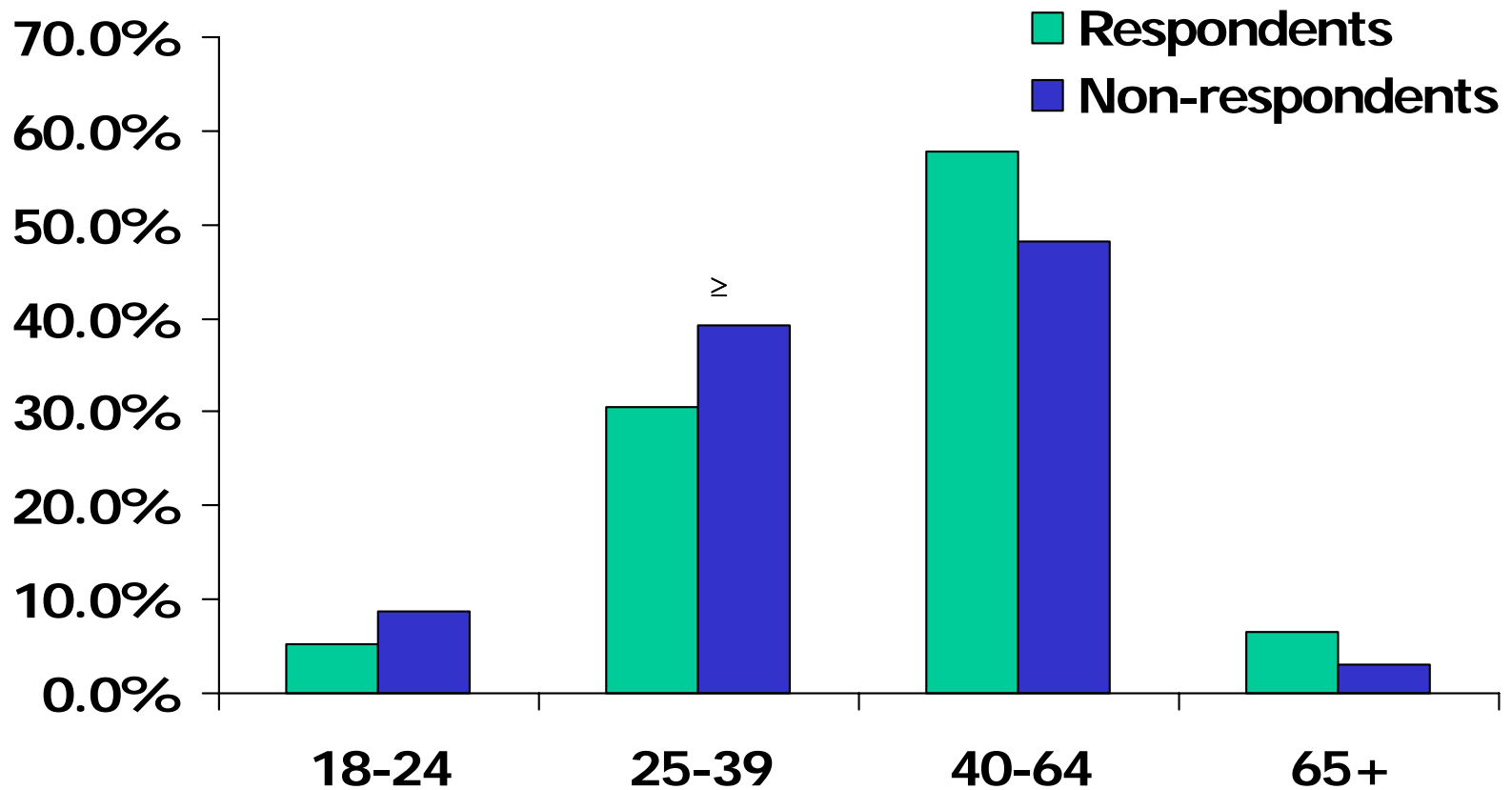
Comparison group  
= 547

Random sample of 2,150 participants

# Results— Characteristics of Participants

- Age            44.6 mean age
- Gender        39% male
- Education    34% HS degree or GED,  
                         52% some college education
- Race            47% White  
                         24% African-American  
                         16% Hispanic  
                         4% API
- Heavy smoking--78% > 1 pack/day

# Results— Respondents vs. Non-respondents



# Preliminary results

## Made quit attempts after enrolling

- **87%** (95% CI=86%-89%)

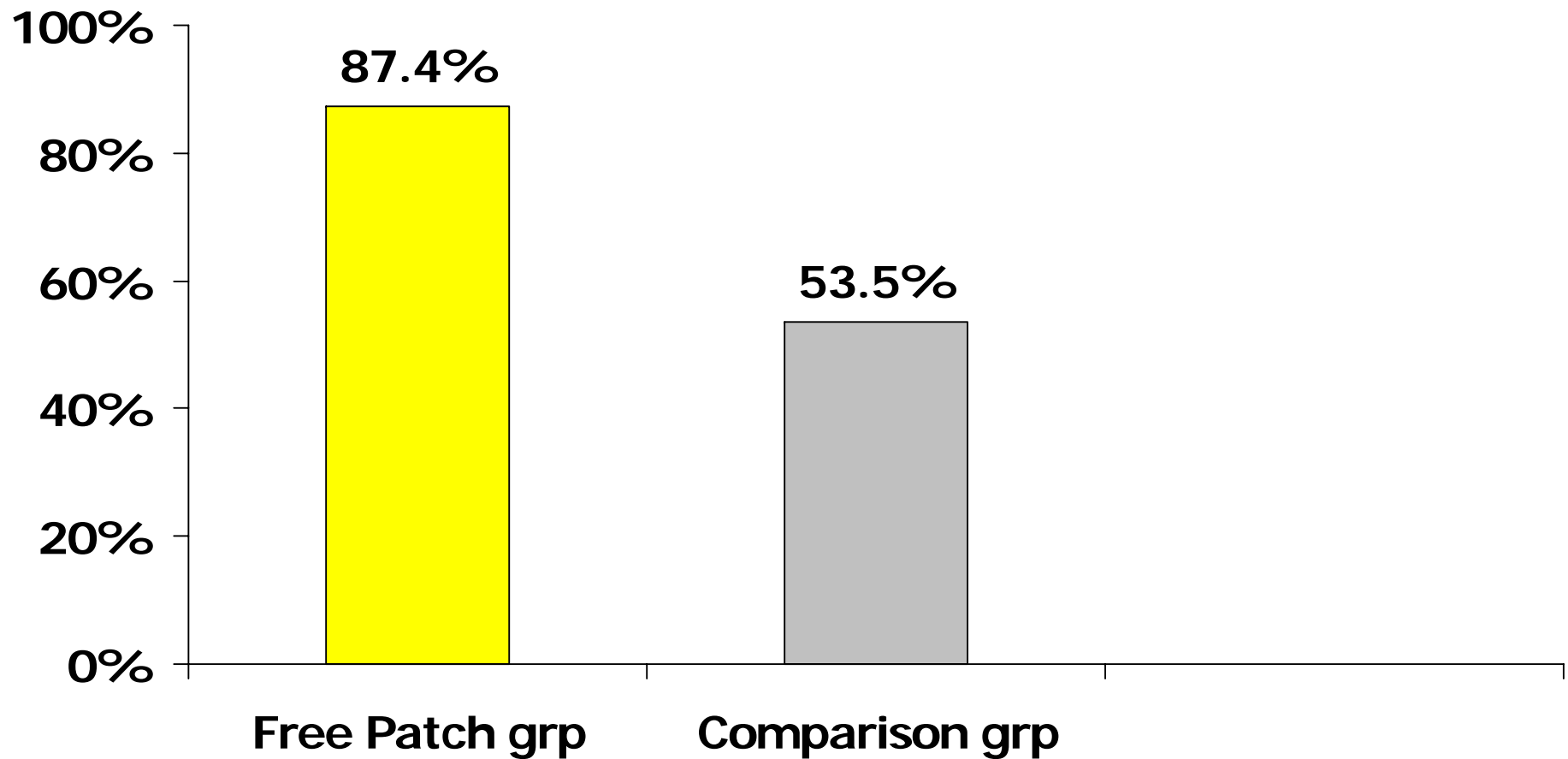
## 7 day quit rate

**33%** (95% CI 31% - 36%)

**No difference between mail vs.  
phone**

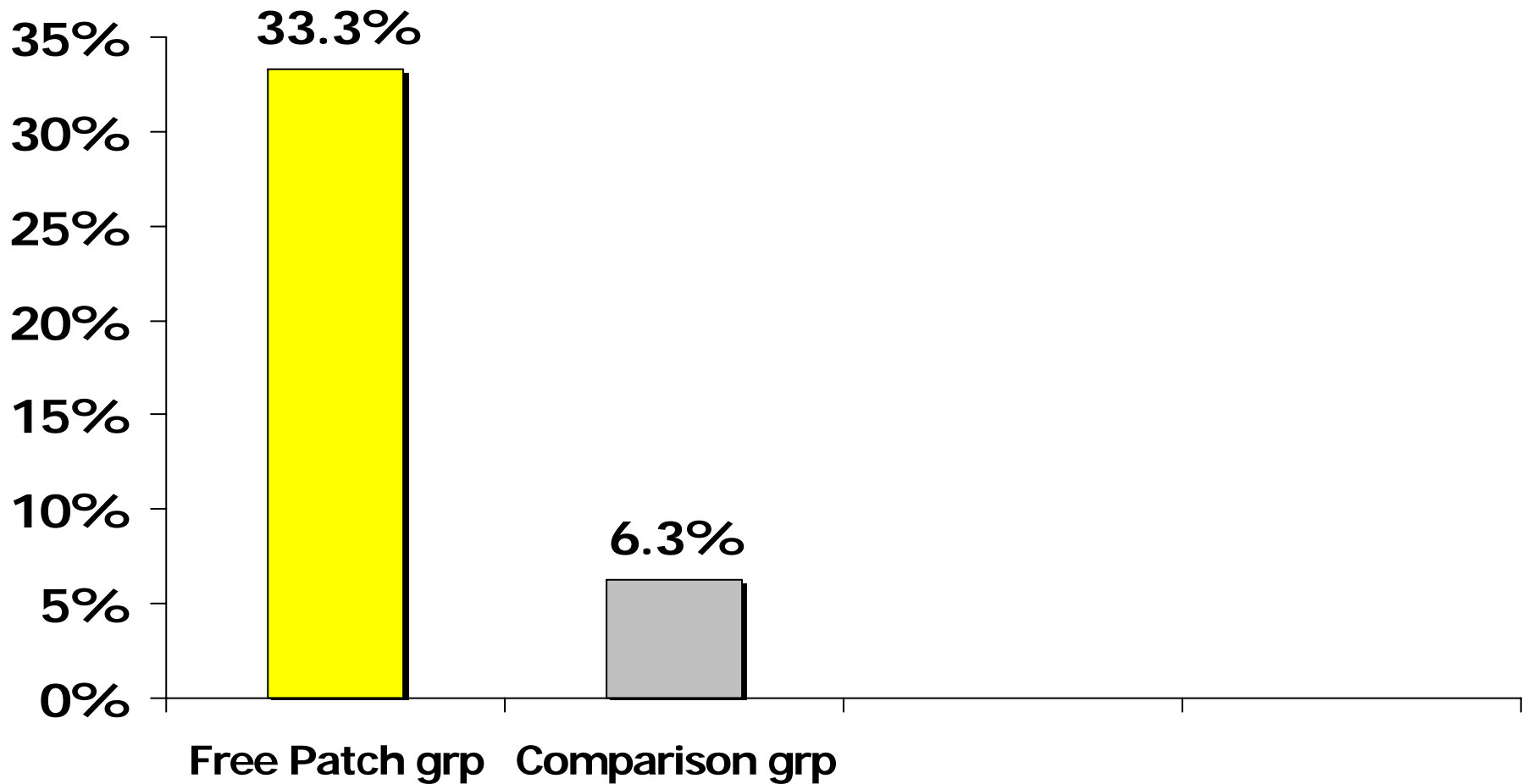
# Preliminary Results

## % of respondents who made a quit attempt



# Preliminary Results

## % respondents who quit



# # Cigarettes smoked/day before vs. after enrollment (among those still smoking)

Average number  
(range)

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<b>Before enrollment</b>	24 (10, 80)
<b>After enrollment</b>	12 (0, 60)

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## Characteristics associated with successful quit

**OR (95% CI)**

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<b>Age 65+</b>	1.68 (0.98, 2.88) p=0.06
Asian	1.99 (1.11, 3.58)
Non-US born	1.93 (1.40, 2.66)

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<b>Less than 1 pack</b>	1.60 (1.17, 2.18)
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# Discussion

**Study examined NRT use in a large population.**

**Outcomes**

**Comparison Studies**

**New Zealand --- 80% used Patch in 3 days**

**(Grigg and Glasgow, 2003)**

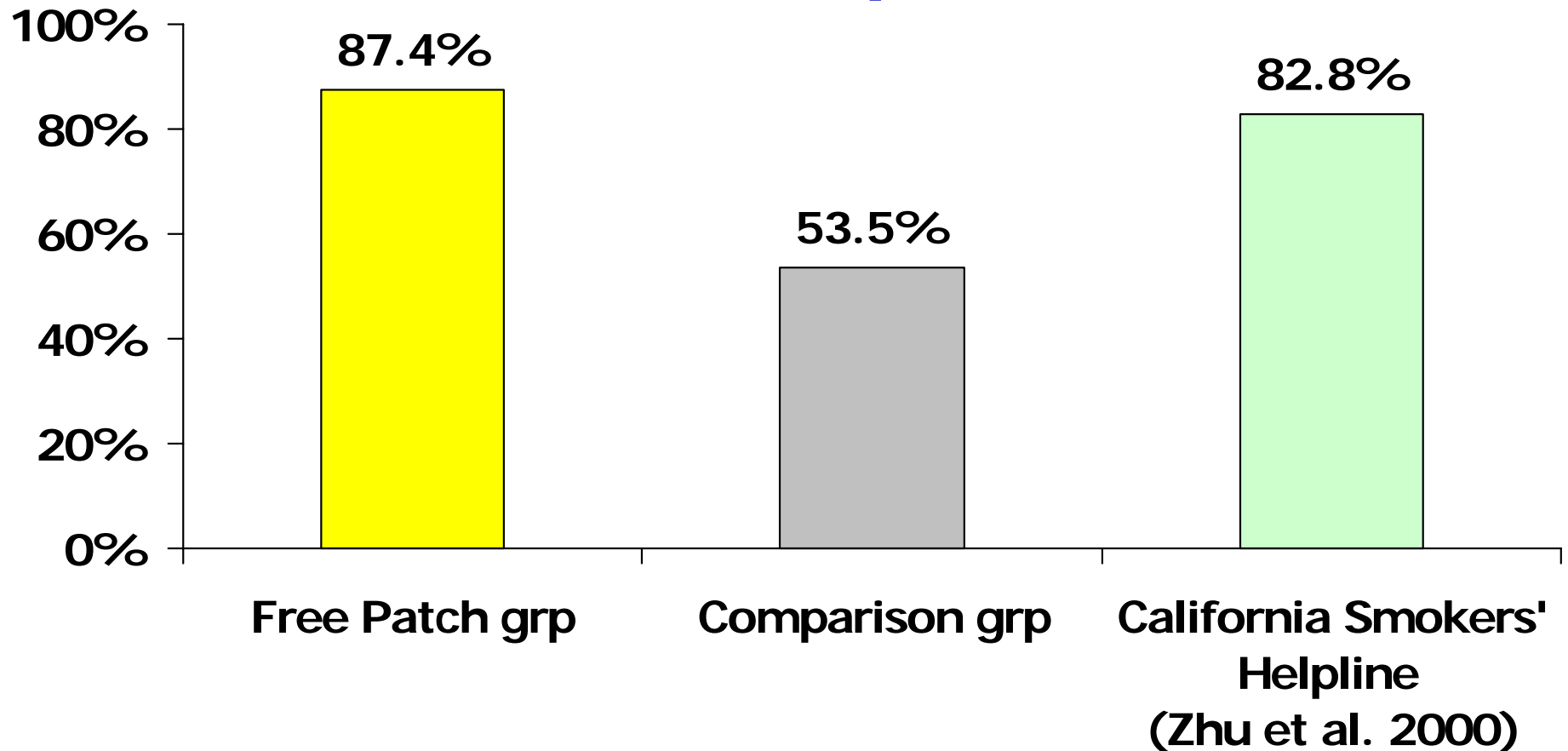
**Wisconsin—19,000 women**

**22% quit smoking, 77% reduced smoking**

**(Fiore, 2000)**

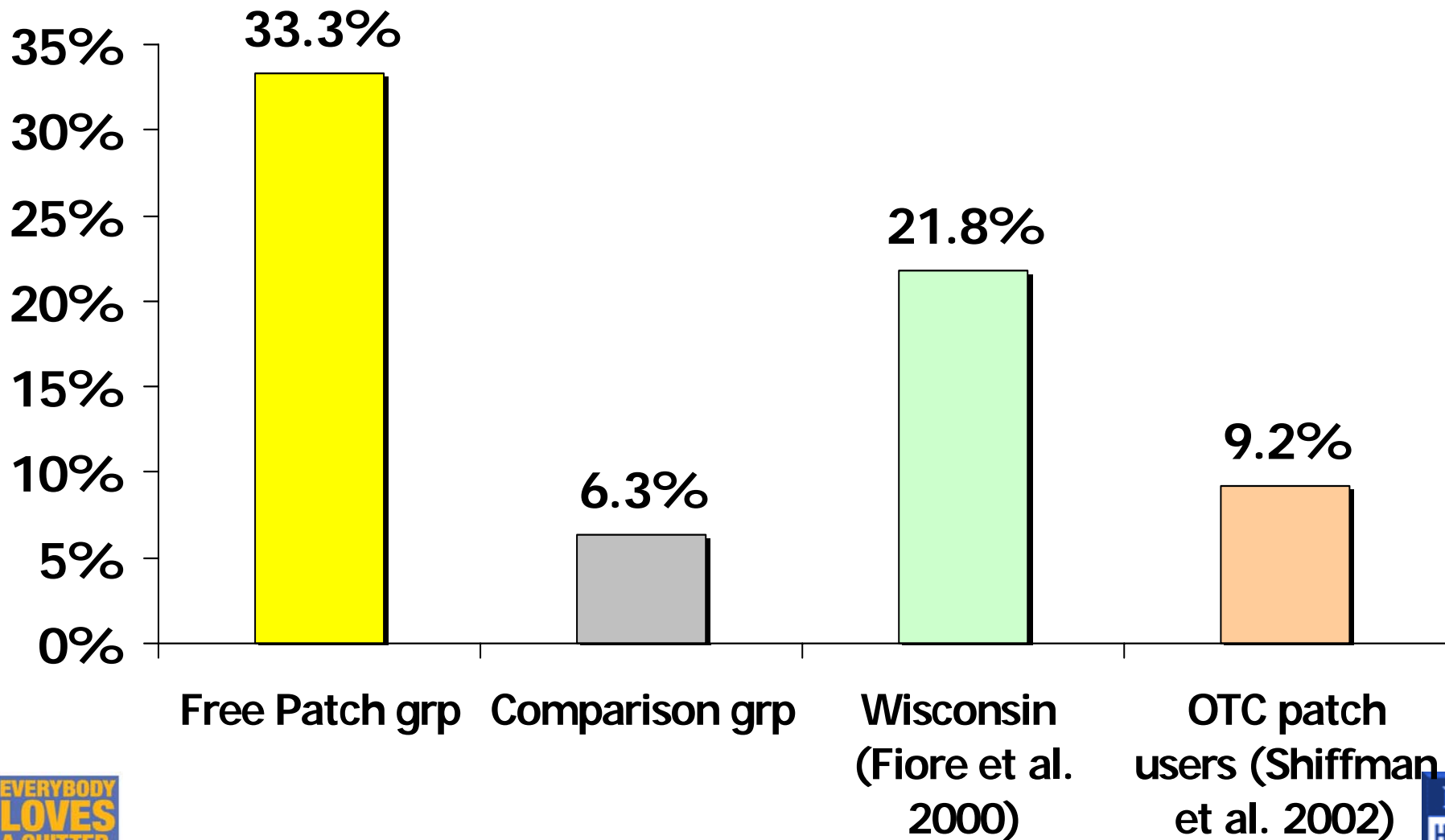
# Comparison to other programs

## % of respondents who made a quit attempt



# Comparison to other programs

## % respondents who quit



# Limitations

**Study lacks biochemical verification.**

**Results may not be generalizable – 39% did not respond (n=845).**

**Estimates assume similar quit rates among non-respondents**

- **Quit Rate assuming all non-participants were still smoking=20%**

## Future analysis

- **Regression analysis**
- **Cost effectiveness**

# Conclusion

**Low intensity, population based program was effective, at 6 months follow up.**

- **Increased access**
- **>10,000 quits**
- **Save lives**

# FUTURE DIRECTIONS



*“¡Lo dejamos...  
y qué bien  
nos sentimos!”*

**A TODO EL MUNDO  
LE GUSTA DEJAR ALGO.**

Usted también puede dejar de fumar.  
Llame al 311 y le ayudaremos a hacerlo.

**Piénsalo. Háblalo. Déjalo.**

# NPP 2005 Press Conference

- **PR- May 5, 2005 12:30 PM**
- **45, 000 Nicotine Patches available free to NYC Residents by calling 311**
- **Limited time supply**
- **Callers must be 18 years or older and must meet other eligibility requirements**
- **NYCDOHMH additionally, will distribute nicotine patches to medical providers in neighborhoods throughout the city through the Public Health Detailing Program**
- **Courses of NRT will also be distributed through cessation clinics operated by NYC HHC, DPHOs and other CBOs**

# Overview of the 2005 Nicotine Patch Program

- **NYC DOHMH, Pfizer and 311 announce the program to the media**
- **Media publicizes the availability of patches**
- **Public calls 311**
- **311 forwards calls to King for screening**
- **King provides caller information to NYC DOHMH**
- **NYC DOHMH determines caller's eligibility and qualifications to be enrolled in the program**

# Overview of the 2005 Nicotine Patch Program

- NYC DOHMH sends enrolled participants a **Patch Kit** with:
  - 3 boxes of Nicotrol® patches
  - Health education materials
- NYC DOHMH informs unqualified callers via a letter in the mail
- NYC DOHMH contacts enrolled participants 3 weeks later (by phone or email) for follow-up counseling
- King delivers follow-up counseling
- Call Center triages calls, responds to callers' questions and makes referrals throughout the entire program (screening and follow-up counseling)



# IN NEW YORK WE HAVE MADE IT EASIER TO QUIT & HARDER TO SMOKE



*“Mi hijo lo dejó.  
Estoy tan  
orgulloso de él.”*

**A TODO EL MUNDO  
LE GUSTA DEJAR ALGO.**

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NYC Health DEPARTAMENTO de SALUD y SALUD MENTAL de la CIUDAD DE NUEVA YORK  
Michael R. Bloomberg, Alcalde - Thomas R. Frieden, M.D., M.P.H., Comisionado



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A QUITTER.**

