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Development of a smoking cessation intervention for rural veterans seeking elective orthopaedic surgery

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Abstract

Background

To reduce surgical complications related to smoking, some Veteran Affairs (VA) medical centers have implemented requirements that patients quit smoking prior to elective surgery. Rural-residing Veterans are more likely to be affected by this requirement as they are more likely to smoke, less likely to quit, and experience challenges accessing specialty care. The incentive of a desired surgery could be an opportune time (“teachable moment”) to assist patients in quitting smoking. Our study examined experiences and perceptions related to this cessation requirement to inform development of a peri-operative smoking cessation intervention.

Methods

We conducted semi-structured interviews with rural-residing Veterans, non-VA and VA PCPS, pharmacists, and surgical staff from two Veteran Integrated Service Networks who all serve rural-residing Veterans. We aimed to understand protocols and workflow related to smoking cessation requirements and the barriers and facilitators of provision and receipt of cessation assistance.

Findings

Interview findings identified 1) need for increased coordination between specialties to improve understanding of the policy; 2) rural VA patients’ lack of knowledge regarding harms of peri-operative smoking; 3) need for standard workflows to ensure rural-residing VA patients seeking elective orthopaedic surgery are receiving cessation assistance; and 4) barriers to provision of cessation assistance. Based on these findings, we developed and are piloting the following intervention in one Community Based Outpatient Clinic (CBOC): Among patients who smoke and have an orthopaedic surgery consult ordered, PCPs provide brief advice to quit, an educational handout on the benefits of quitting smoking

peri-operatively, and a referral to the VA pharmacist who will contact the patient to provide cessation assistance.

Conclusion

Incorporating provider and patient feedback is important in developing cessation interventions designed to assist rural-residing Veterans in achieving smoking cessation peri-operatively. Future directions include implementing our pilot to a larger network of Oregon VA CBOCs serving rural patients.