

Research Week 2022

Smoking Cessation and Elective Surgery among Rural Veterans

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Keywords

Smoking cessation, elective surgery, rural population

Abstract

Background

Smoking cigarettes during the perioperative period is associated with many adverse surgical outcomes. Many hospitals, including some Veterans Affairs Medical Centers (VAMCs), have implemented policies requiring smoking cessation prior to elective surgeries. Rural Veterans are more likely to smoke and have less access to care than their urban counterparts, and thus may be impacted to a greater extent by these policies.

Methods

We contacted orthopedic surgeons at VAMCs across the country by email to inquire about surgeons' knowledge of such policies, whether any policies were implemented at their VAMC, and the specific guidelines in place, if any.

Additionally, we contacted the Veterans Health Administration (VHA) National Surgery Office and the Tobacco & Health, VHA Office of Mental Health and Suicide Prevention to ask about any national guidelines in existence for VAMCs and any interventions designed specifically for Veterans attempting to quit smoking before surgery.

Findings

We received 17 responses back from orthopedic surgeons, representing 14 of the 18 VISNs. Over half of respondents indicated that their VAMC required smoking cessation prior to at least some elective surgeries. Among hospitals requiring smoking cessation during the perioperative period, guidelines varied widely.

According to VHA National Surgery Office representatives, there is no nationwide guideline requiring smoking cessation prior to elective surgery and no national VA intervention designed specifically for Veteran's attempting to quit smoking in preparation for surgery.

Conclusions

Smoking cessation is often required for Veterans seeking elective orthopedic surgeries, however policy characteristics vary widely. We are currently conducting qualitative interviews with rural primary care team members, surgeons and surgical staff, and rural Veterans who were identified as currently smoking prior to an orthopedic surgery consult. Informed by our qualitative interviews, we plan to design and test an intervention to increase smoking cessation assistance among rural Veterans seeking elective surgery.