
Welcome to the NAQC Information e-Bulletin ... a special communication designed to provide important, time-sensitive information that may impact quitline operations and services.

Draft Update of Public Health Service Clinical Practice Guidelines Now Available for Review and Comment *NAQC members encouraged to participate in process*

On September 28, the U.S. Department of Health and Human Services published a Federal Register notice that the draft update of the Public Health Service Clinical Practice Guideline on Treating Tobacco Use and Dependence is available for review and comment. *Comments must be postmarked by October 26, 2007.*

There are ten key recommendations in the update, and sections on specific populations and types of tobacco use. The key recommendations are paraphrased below:

1. Tobacco dependence is a chronic disease that often requires repeated intervention.
2. Clinicians/health care delivery systems should identify and document tobacco use status and treat every tobacco user seen.
3. Every patient willing to make a quit attempt should be offered the counseling and medications identified as effective in the Guideline.
4. Every patient who uses tobacco should be offered at least brief treatment, which is effective.
5. Individual, group and proactive telephone counseling are consistently effective (and effectiveness increases with intensity). The two components (1) practical counseling and (2) social support should be used with all patients making a quit attempt.
6. Except in the presence of contraindications, FDA-approved medications should be used with all patients for whom they have been proven effective.
7. The combination of counseling and medication is more effective than either alone. Both should be routinely offered to those making a quit attempt.
8. Clinicians and health care delivery systems should ensure patient access to quitlines and promote quitline use.
9. Motivational treatments should be offered to (some) smokers currently not willing to make a quit attempt to increase future quit attempts.
10. Tobacco dependence treatments are clinically effective and highly cost-effective. Insurers and purchasers should ensure that all insurance plans include the counseling and medication identified as effective in the Guideline.

NAQC encourages members to participate in the review and comment process. We plan to share draft comments with you (mid-October) and submit comments on behalf of the organization (by October 26).

[View the Federal Register notice.](#)