

KEYWORDS PSYCHOLOGICAL INTERVIEWS | MOTIVATIONAL INTERVIEWING | SMOKING CESSATION

Evaluating motivational interviewing as a strategy to support smoking cessation

Nurses are well placed to support smoking cessation. This summary outlines the nursing implications of a recent Cochrane review on motivational interviewing

REVIEW QUESTION

What is the best available evidence for motivational interviewing as a strategy for smoking cessation compared with “usual care” or “brief advice”?

NURSING IMPLICATIONS

Smoking is associated with lung cancer, chronic obstructive pulmonary disease, ischaemic heart disease and cardiovascular disease. As a result, government policies and healthcare strategies encourage smoking cessation initiatives to reduce the health and economic burden associated with smoking.

Restrictions on where people are permitted to smoke, the sale and advertising of tobacco, combined with smoking cessation strategies, have been introduced to help people to quit. However, barriers to implementing cessation strategies include nurses’ lack of knowledge about tobacco control guidelines and lack of skills to undertake interventions.

Motivational interviewing has been used successfully to facilitate behavioural change with people who want to give up smoking, and could be implemented by nurses. The technique avoids a confrontational approach when providing advice or discussing strategies for smoking cessation.

BEST PRACTICE RECOMMENDATIONS

- Motivational interviewing may assist smokers to quit, but differences in interpretation mean the results need to be treated cautiously.
- People need to be assessed for their motivation, interest and commitment to undertaking a smoking cessation intervention.
- Motivational interviewing avoids a confrontational approach to encouraging people to quit smoking and may be more likely to support long term adherence to a cessation programme.
- Motivational interviewing may be an effective strategy for nurses to use in supporting smoking cessation if sessions last longer than 20 minutes.
- Monitor the impact of motivational interviewing on smoking cessation rates through careful attention to defining the techniques used.

STUDY CHARACTERISTICS

A systematic review completed in 2009 of 14 trials (n=10,538) was performed to evaluate smoking cessation programme benefits using motivational interviewing as an intervention compared with “usual care” or “brief advice”. The studies were randomised controlled trials and cluster-randomised control led trials. Two noted inadequate sequence generation or allocation concealment, while five did not confirm blinding of the outcome assessment. The lack of blinding was attributed to the nature of the behavioural intervention which

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meant that blinding of participants and the intervention was not always possible.

Participants were tobacco users of either gender. Pregnant women and adolescents were excluded.

The intention of motivational interviewing to support smoking cessation was to provide feedback to the smoker where they were encouraged to explore the difference between their personal goals and smoking. The motivational interviewing criteria had to include all or some of the following principles: expressing empathy, developing discrepancy, rolling with resistance and supporting self efficacy. The intervention was compared with “usual care” or “brief advice”. Usual care was defined as brief advice with a stop smoking message, for example information about the harmful effects of smoking or routine care.

Each study interpreted and used the principles of motivational interviewing differently. This made the comparison between studies difficult. Interviews were delivered by nurses, GPs, hospital doctors, counsellors or psychologists. Training for the provider was delivered through workshops in 11 studies. Three studies delivered the

intervention by telephone while the remainder provided face to face sessions.

The main outcome of interest in the review was abstinence from smoking at six months or more. Participants lost to follow-up were classed as continuing smokers. Abstinence was confirmed chemically by nine trials.

SUMMARY OF MAIN EVIDENCE

The main result of motivational interviewing versus “usual care” or “brief advice” demonstrated a small significant increase in abstinence at six months or more (relative risk (RR) 1.27, 95% confidence interval (CI) 1.14-1.42). However, additional components used alongside the technique may have enhanced its effectiveness, for example pharmacotherapy including nicotine replacement therapy.

Most studies that implemented motivational interviewing sessions of more than 20 minutes showed significantly more benefit than shorter sessions (RR 1.31, 95% CI 1.16-1.49). Motivational interviewing delivered by GPs appeared to yield better success rates (RR 3.39, 95% CI 1.53-7.94). This was attributed to the often long term doctor-patient relationship. It was unclear what the optimal number of sessions may be or how follow-up sessions might support smoking cessation decisions and adherence.

For details on motivational interviewing see motivationalinterviewing.org

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REFERENCE

Lai DT et al (2010) Motivational interviewing for smoking cessation. Cochrane Database of Systematic Reviews; Issue 1. Art. No.: CD006936. DOI: 10.1002/14651858.CD006936.pub2. tinyurl.com/smoking-motivation

See page 22 for a roundtable debate on using evidence to improve productivity and efficiency