Disclosure: No financial interests to disclose relevant to this talk
IMPORTANCE OF DIET ON HEART DISEASE
IMPORTANCE OF DIET ON HEART DISEASE

Late Breaking Study 23 Jan 2019
Association of Fried Food Consumption with All-cause, Cardiovascular, and Cancer Mortality: prospective cohort study

Yangbo Sun, Buyun Liu, Linda G Snetselaar, Jennifer G Robinson, Robert B Wallace, Lindsay L Peterson, Wei Bao

- Among postmenopausal women, fried food consumption, especially fried chicken and fish/shellfish, is associated with an increased risk for all-cause and cardiovascular mortality.

- No correlation was seen for fried food consumption with cancer mortality.
Heart disease is the #1 cause of death in the U.S. for both men and women. It claims approximately one million lives annually.

In the U.S., every 34 seconds someone has a heart attack.

Every 60 seconds someone dies from a heart disease-related event.

About 700,000 people in the U.S. suffer heart attacks each year. Of these, 515,000 are a first heart attack and 205,000 happen in people who have already had a heart attack.

Cardiovascular heart diseases claim more lives than all forms of cancer combined.

-Theheartfoundation.org
JOIN TENNESSEE SMOKERS CALLING IT QUILTS IN 2019!

Let's Call It Quits!

TENNESSEE QUIT WEEK 2019

February 4-8th, 2019
• The risk of CVD increases with the number of cigarettes smoked per day,

• Smoking cigarettes with lower levels of tar or nicotine does not reduce the risk for cardiovascular disease

• Exposure to secondhand smoke causes heart disease in nonsmokers. 33,000 nonsmokers deaths per year caused by exposure to secondhand smoke.

• Smokers lose at least one decade of life expectancy, as compared with those who have never smoked.

• Cessation before the age of 40 years reduces the risk of death associated with continued smoking by about 90%.

Smoking Demographics – TN vs USA

- TN: 22.6%
- USA: 17.1%
Smoking Demographics – TN vs USA

**Gender**
- Smoking - Female: TN: 21.1%, U.S.: 14.3%
- Smoking - Male: TN: 24.3%, U.S.: 18.6%

**Age**
- Smoking - Aged 18-44: TN: 24.8%, U.S.: 18.5%
- Smoking - Aged 45-64: TN: 26.4%, U.S.: 18.2%
- Smoking - Aged 65+: TN: 12.1%, U.S.: 8.9%

**Race/Ethnicity**
- Smoking - American Indian/Alaskan Native: TN: 45.2%, U.S.: 29.7%
- Smoking - Black: TN: 23.3%, U.S.: 18.5%
- Smoking - Hispanic: TN: 18.7%, U.S.: 13.5%
- Smoking - Multiracial: TN: 41.3%, U.S.: 23.2%
- Smoking - White: TN: 21.9%, U.S.: 17.1%

**Urbanicity**
- Smoking - Rural: TN: 28.7%, U.S.: 18.2%
- Smoking - Suburban: TN: 18.0%, U.S.: 12.5%
- Smoking - Urban: TN: 13.5%, U.S.: 12.4%

**Income**
- Smoking - Less Than $25,000: TN: 38.2%, U.S.: 26.2%
- Smoking - $25-$49,999: TN: 24.5%, U.S.: 19.7%
- Smoking - $50-$74,999: TN: 20.7%, U.S.: 18.3%
- Smoking - $75,000 or More: TN: 7.8%, U.S.: 9.4%

**Education**
- Smoking - Less than High School: TN: 42.7%, U.S.: 27.3%
- Smoking - High School Grad: TN: 28.3%, U.S.: 22.3%
- Smoking - Some College: TN: 21.3%, U.S.: 17.9%
- Smoking - College Grad: TN: 6.9%, U.S.: 6.8%

*CDC, Behavioral Risk Factor Surveillance System, 2017*
Smoking Demographics - Tristate

**TN** - population 6.85 million
1.5 million smokers
22.6%

**GA** - population 10.66 million
1.8 million smokers
17.1%

**AL** - population 4.9 million
1 million smokers
20.9%

- CDC, Behavioral Risk Factor Surveillance System, 2017
- US Census Projections 2019
## SMOKING CESSATION

### Table 2. Healthcare Provider Advice and Support on Tobacco Cessation to Georgia Tobacco Users

<table>
<thead>
<tr>
<th>US Public Health Service (PHS) Recommended Interventions to Improve the Successful Rate of Tobacco Cessation&lt;sup&gt;1,5&lt;/sup&gt;</th>
<th>Percent (%)</th>
<th>Estimated Number of Adult Smokers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visited a doctor, dentist, nurse, or other health professional in the past year</td>
<td>70%</td>
<td>900,000</td>
</tr>
<tr>
<td>Healthcare professional advised tobacco users to quit smoking or using tobacco products&lt;sup&gt;a&lt;/sup&gt;</td>
<td>47%</td>
<td>738,000</td>
</tr>
<tr>
<td>Last time a health care professional advised tobacco users to quit using tobacco, they put them into contact with or told the tobacco users how to contact a telephone tobacco cessation quit line, class or program, or one-on-one counseling&lt;sup&gt;a&lt;/sup&gt;</td>
<td>40%</td>
<td>133,000</td>
</tr>
<tr>
<td>Last time a health care professional advised tobacco users to quit using tobacco, they recommended or prescribed FDA-approved medication&lt;sup&gt;a,b&lt;/sup&gt;</td>
<td>56%</td>
<td>188,000</td>
</tr>
</tbody>
</table>

- 2012-2013 National Adult Tobacco Survey (ATS).
OFFICE INTERVENTION— THE 5 A’S

1. **ASK:**
   About tobacco use every time

2. **ADVISE:**
   Urge tobacco users to quit
   Advising the patient to quit should be done in a clear, strong, and personalized manner.

3. **ASSESS:**
   Determine willingness to make a quit attempt
   “On a scale of 1 to 10, where 10 is very ready, how ready are you to quit smoking?”

4. **ASSIST:**
   Provide help to move the individual toward a successful quit attempt.
   offer medication and referral for counseling

5. **ARRANGE:**
   Schedule short term office or phone followup most helpful to do it within the first weeks of a quit date
ASSIST:

Provide help

offer medication and referral for counseling

- National tobacco cessation collaborative 2017
Quitlines

- Every state and the District of Columbia operates a tobacco cessation quitline.

- Usage rates for quitlines vary greatly from state to state. On average, state quitlines are used by 1-3% of the smoking population in that state.

- Funding for quitlines comes predominantly from state governments (89.5%). Almost 70% of funding comes from Master Settlement Agreement funds.

- National tobacco cessation collaborative 2017
The North American Quitline Consortium is a network of toll-free hotlines and websites.

US Residents

- English: 1-800-QUIT-NOW (1-800-784-8669) or www.smokefree.gov
- Spanish: 1-855-DEJELO-YA (1-855-335-3569) or espanol.smokefree.gov
- Chinese: 1-800-838-8917 or www.asiansmokersquitline.org
- Korean: 1-800-556-5564 or www.asiansmokersquitline.org
- Vietnamese: 1-800-778-8440 or www.asiansmokersquitline.org
- Veterans: 1-855-QUIT VET (1-855-784-8838) or www.publichealth.va.gov/smoking
- TTY: 1-800-332-8615
Contact: Paula Collier, M.S., Tobacco Prevention Coordinator

Website: www.tobaccofreechattanooga.org

**Get Ready**

- Talk to your healthcare provider
- Visit Smokefree.gov and other sites
- Call the Tennessee Quit Line and make a Quit Plan
- Get support from family, friends, and co-workers
- Get support from a group class
- Get and use medication
- Learn new skills and behaviors
- Prepare for cravings and mistakes

**Most Effective: Medication + Support**

- Nicotine Replacement Therapy (NRT) reduces cravings: patches, gum, lozenges, spray
- Consider Chantix, Wellbutrin, or Zyban (ask your doctor)
- Behavioral therapy is action-oriented and can help you learn new coping skills
- Cessation Classes can connect you to others with similar challenges

**Chattanooga-Hamilton County Health Dept.**

921 E. 3rd Street
Chattanooga, TN 37403
423-209-6285

www.health.hamiltontn.org

**Tennessee Tobacco QUITLINE**

1-800-QUIT-NOW
1-800-784-8669

**Resources**

- Smokefree.gov
  www.smokefree.gov
- American Lung Association
  www.lung.org/stop-smoking
- American Heart Association
  http://www.heart.org/HEARTORG/GettingHealthy/QuitSmoking/QuitSmoking_UCM_001085_SubHomePage.jsp
- American Cancer Society
  http://www.cancer.org/healthy/stayawayfromtobacco/guidetoquittingsmoking/index
- Centers for Disease Control
  www.cdc.gov/Features/SmokingCessation

**Contact Information**

The Chattanooga Heart Institute
Memorial
Smoking Cessation

Tennessee Tobacco Quitline

1-800-QUIT-NOW
1-800-784-8669
www.tnquitline.org
What else could you buy if you quit smoking?

Quitting is not only good for your health, it's good for your wallet too! Use the calculator below to figure out how much you're saving by going tobacco-free.

- **Groceries for a week** for a family of 4: $197
- **Gasoline for a year**: $1,962
- **Tennessee Titans Season Ticket**: $1,020

Calculate your savings:

- 20 cigarettes per day (1 pack)
- $5.10 per pack

- After 1 month, you will have saved **$153.00** and have added **5** days to your life
- After 6 months, you will have saved **$918.00** and have added **30** days to your life
- After 1 year, you will have saved **$1836.00** and have added **60** days to your life
- After 5 years, you will have saved **$9180.00** and have added **300** days to your life
Benefits of Tobacco Cessation

Tobacco use is a major cause of various forms of cancer, chronic obstructive pulmonary disease (COPD) and heart disease.

Health improves within minutes of quitting:

2 Weeks to 3 Months After Quitting
Heart attack risk begins to drop.
Lung function begins to improve.

1 to 9 Months After Quitting
Coughing and shortness of breath decreases.

1 Year After Quitting
Added risk of coronary heart disease is half that of a smoker's.

Within 5 Years of Quitting
Risk of cancer of the mouth, throat and bladder is cut in half.

10 Years After Quitting
Risk of dying from lung cancer drops by half.

When you are ready, we’re here.

Call the Georgia Tobacco Quit Line today.
A free and effective service that helps Georgians quit smoking and using tobacco.
1-877-270-STOP (1-877-270-7867)
www.dph.georgia.gov/ready-quit
Funding provided by the
Centers for Disease Control and Prevention
Office of Smoking and Health

Your Reason for Quitting Today

When you are ready, we’re here.

Call the Georgia Tobacco Quit Line today.
A free and effective service that helps Georgians quit smoking and using tobacco.
1-877-270-STOP (1-877-270-7867)
www.dph.georgia.gov/ready-quit
Funding provided by the
Centers for Disease Control and Prevention
Office of Smoking and Health

A Free and Effective Service

The Georgia Tobacco Quit Line is a public health service funded by the Georgia Department of Public Health through the Georgia Tobacco Use Prevention Program (GTUPP). Counseling services are available at no-cost to Georgia adults, pregnant women and teens (ages 13 and older).

Georgia Tobacco Quit Line coaches are highly trained tobacco cessation specialists.

To learn more about the Georgia Tobacco Quit Line, please call our toll-free number:
- 1-877-270-STOP (English)
- 1-877-270-7867
- 1-877-2NO-FUME (Spanish)
- 1-877-266-3863

For Hearing Impaired:
TTY Services: 1-877-777-6534
www.dph.georgia.gov/readytell

Georgia Department of Public Health Georgia Tobacco Use Prevention Program (GTUPP)
Two Peachtree Street, N.W., 16th Floor, Atlanta, Georgia 30303-3142. (404) 657-6637


The Best Time to Quit is Now

Sometimes success requires a little help. One important step to improving your health is to quit smoking.

Whether you want to quit today, or if you tried to quit in the past and have questions, the Georgia Tobacco Quit Line is available 7 days a week to help you quit for life.

A FEW GOOD REASONS TO CALL IT QuITS TODAY.

- **Your Family and Friends**— Live a healthier, longer life and watch your family grow. Live to celebrate more priceless moments with your family and friends. They all need you.
- **Your Health and Quality of Life**— Tobacco use is a major cause of lung cancer and other types of cancer, heart disease and chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema. It contributes to asthma, diabetes and pregnancy complications.
- **Your Finances**— The average smoker spends $500 to $3000 each year.
- **Your Future**— Live a longer life to enjoy retirement.

Does the Tobacco Quit Line Work?

Evidence shows that callers who enroll in Tobacco Quit Line services are 2-4 times more likely to succeed than those who try to quit on their own.

Who Can Call? All Georgians

The Georgia Tobacco Quit Line is available to all Georgia adults, pregnant women and teens age 13 and older who want to quit using tobacco.

Anyone can call the Georgia Tobacco Quit Line.
- Family members and friends – to learn more about supporting a loved one.
- Healthcare providers – to support their patients.
- Employers – to support their valued employees.
- School staff – to support their students and co-workers.

What Happens When You Call?

Callers are greeted by a Quit Line Coach trained in evidence-based cessation counseling. Callers receive FREE:
- Helpful quitting tips/techniques and support for all tobacco products including Electronic Nicotine Delivery Systems (e-cigarettes and vapes).
- A personalized Quit Plan, self-help materials and “Quit”k.it.
- Current information about local tobacco cessation support groups and resources for adults and youth.
- Current information about Food and Drug Administration (FDA) approved medications that can help with cessation for individuals 18 years and older.

Quitting Takes Practice

When Can I Call?

The Georgia Tobacco Quit Line is available 24 hours a day, 7 days a week (including holidays).

Healthcare professionals:

Please visit the Ready to Quit webpage at www.dph.georgia.gov/ready-quit to access the Georgia Tobacco Quit Line Referral Form and information.

For free training on Asking, Advising and Referring, register for the Engaging Tobacco Users: Tips for Health Care Providers in Georgia online provider training at www.GAtobaccointervention.org.
THE 5 Rs MOTIVATIONAL TECHNIQUES

Relevance
- Health of the smoker
- Health of others (secondhand smoke affects adults and children)
- Costs of smoking
- Social/environmental factors
- Personal commitment and control

Risks
- 2x greater risk of stroke
- 6x greater risk of oral cancer
- 10x greater risk of larynx cancer
- 12x greater risk of lung cancer and CAD

Rewards
- IMMEDIATE = within minutes to several weeks, BP decreases, CO levels decrease, O2 levels increase
- IMMEDIATE = within months to 1 year, respiratory congestion and infections decrease, after 1 year, excess risk of CAD reduced to half of a smoker
- LONG-TERM = after 5 years, lung cancer death rate

FAGERS TROM TEST FOR NICOTINE DEPENDENCE (ADULTS)

1) How soon after you wake up do you smoke your first cigarette?
- Within 5 minutes = 3
- 5–30 minutes = 2
- 31–60 minutes = 1
- After 60 minutes = 0

2) Do you find it difficult to refrain from smoking in the places where it is forbidden (e.g., in church, at the library, in cinema)?
- Yes = 1
- No = 0

3) Which cigarette would you like most to give up?
- The first one in the morning = 1
- Any other = 0

4) How many cigarettes/day do you smoke?
- <10 = 0
- 11–20 = 1
- 21–30 = 2
- >31 = 3

5) Do you smoke more frequently during the first hours after waking than during the rest of the day?
- Yes = 1
- No = 0

Total: (higher scores indicate higher levels of dependence, e.g., >5)

A HEALTH CARE PROVIDER'S GUIDE TO SUCCESSFUL TOBACCO CESSION INTERVENTIONS

TENNESSEE TOBACCO QUITLINE

HELP YOUR PATIENTS TAKE CONTROL
REFER TO 1-800-QUIT NOW
IT'S FAST, IT'S EASY, IT WORKS, IT'S FREE
1-800-784-8669

http://health.state.tn.us/tobaccoquitline.htm

*Adapted from Transtheoretical Model of Change (precontemplation, contemplation, preparation, action & maintenance) by J. Prochaska and C. DiClemente, 1982

ASK about tobacco use
- “Do you ever smoke or use any type of tobacco?”
- “I have a question for you because it is so important.”

ASSIST with quitting
- Obtain complete tobacco use history
- Discuss reasons/motivation for wanting to quit
- Discuss triggers for tobacco use
- Discuss concerns about weight gain, withdrawals, and relapse
- Set Quit Date
- Refer for individual or group counseling support
- Consider pharmacologic assistance

ARRANGE for follow-up
- Monitor progress with frequent follow-up and encouragement
- Follow-up contact 1 week, 1 month, 6 months, and annually post quit date
- CONGRATULATE and ENCOURAGE continued success

ADVISE strongly to quit
- If YES = Strongly encourage to stop—“Quitting is difficult but it’s important that you quit as soon as possible and I can help you.”
- If NEVER = Encourage continued abstinence
- If NOT NOW = Ask, “How long ago did you quit?”
- If less than 6 months = in ACTION* stage of change—assist during quitting process, help prevent relapse
- If more than 6 months = in MAINTENANCE* stage of change—encourage continued abstinence, help prevent relapse

ASSESS readiness to quit
- Ask, “Are you thinking about quitting within the next 6 months?”
- If YES = ask if thinking about quitting within 30 days
- If NO = in PRE-CONTEMPLATION* stage of change—continue to ask and offer assistance at every visit
- If YES = in PREPARATION* stage of change—start “The Plan”
- If NO = in CONTEMPLATION* stage of change—continue to ask and offer other assistance at every visit
## Pharmacotherapies for Smoking Cessation

<table>
<thead>
<tr>
<th>Medication</th>
<th>Availability</th>
<th>Precautions / Contraindications</th>
<th>Adverse Effects</th>
<th>Dosage / Directions</th>
<th>Duration</th>
<th>Cost / Day</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Varenicline</strong></td>
<td>Chantix® (prescription only)</td>
<td>Pregnancy (Category C), breast-feeding Not recommended in patients younger than 18 years of age. Caution in patients with renal impairment.</td>
<td>Nausea/Vomiting Constipation/Gas Insomnia Abnormal dreams Headache</td>
<td>Days 1-3, 0.5 mg once daily Days 4-7, 0.5 mg twice daily Days 8 through end of treatment, 1 mg twice daily</td>
<td>12 weeks (if successful, additional 12 weeks recommended)</td>
<td>$4.20 (based on dose-pack)</td>
</tr>
<tr>
<td><strong>Nicotine Gum</strong></td>
<td>Nicorette®, Nicorette® Mint (OTC only)</td>
<td>Pregnancy (Category C) Recent (&gt;2 weeks) MI, unstable angina, serious underlying arrhythmias, TMJ disease, difficult to use with dentures.</td>
<td>Mouth soreness Dyspepsia Increased salivation</td>
<td>1-24 cigs/day – 2 mg gum (up to 24 pcs/day) 25+ cigs/day – 4 mg gum (up to 24 pcs/day)</td>
<td>Up to 12 weeks</td>
<td>$4.27 for 10, $6.66 for 10, 4-mg pcs</td>
</tr>
<tr>
<td><strong>Nicotine Patch</strong></td>
<td>Nicoderm CQ® (OTC only)</td>
<td>Pregnancy (Category D) Recent (&gt;2 weeks) MI, unstable angina, serious underlying arrhythmias, acute and chronic skin disorders.</td>
<td>Local skin reaction Insomnia</td>
<td>21 mg/24 hours (&gt;10 cigs/day) 14 mg/24 hours (&lt;= 10 cigs/day start here for 6 weeks then 7mg for 2 weeks) 7 mg/24 hours</td>
<td>Weeks 1-6 Weeks 7-8 Weeks 9-10</td>
<td>Patches $6.29</td>
</tr>
<tr>
<td><strong>Nicotine Inhaler</strong></td>
<td>Nicotrol® Inhaler (prescription only)</td>
<td>Pregnancy (Category D) Recent (&gt;2 weeks) MI, unstable angina, serious underlying arrhythmias, underlying reactive airway disease.</td>
<td>Local irritation of mouth and throat Insomnia</td>
<td>6-16 cartridges/day</td>
<td>Up to 6 months</td>
<td>$10.10 (based on 10 cartridges per day)</td>
</tr>
<tr>
<td><strong>Nicotine Nasal Spray</strong></td>
<td>Nicotrol NS® (prescription only)</td>
<td>Pregnancy (Category D) Recent (&gt;2 weeks) MI, unstable angina, serious underlying arrhythmias, underlying chronic nasal disorders (rhinitis, nasal polyps, sinusitis), severe reactive airway disease.</td>
<td>Nasal irritation Insomnia</td>
<td>8-40 doses/day</td>
<td>3-6 months</td>
<td>$5.40 (based on 12 doses per day)</td>
</tr>
<tr>
<td><strong>Bupropion SR</strong></td>
<td>Zyban® (prescription only)</td>
<td>Pregnancy (Category B), concomitant therapy with meds known to lower the seizure threshold (e.g., antipsychotic/depresants, theophylline, lidium, etc.) MAO inhibitor in previous 14 days, abrupt discontinuation of alcohol or sedatives, Hx of seizure, Hx of eating disorder.</td>
<td>Insomnia Dry mouth</td>
<td>150 mg every morning for 3 days, then 150 mg twice daily (Begin treatment 1-2 weeks pre-quit)</td>
<td>7-12 weeks maintenance up to 6 months</td>
<td>$3.87 (twice a day dosing)</td>
</tr>
</tbody>
</table>

---

*The information contained within this table is not comprehensive. Please see package insert for additional information.

* Prices are based on Average Wholesale Price (AWP) July 2007.

* Instruct patient to chew gum slowly until it tingles, then park it between the cheek and gum. When tingling is gone instruct patient to chew and park it between the check and gum for 30 min. No Food or Drinking during gum use.

* Unless after 20 weeks under special circumstances may use Nicotine Replacement Therapy (NRT). APN may request MD/DO consult as needed.

* Age less than 18 years (unless ≥ 100 pounds and with parental/guardian consent may use NRT only). APN may request MD/DO consult as needed.
Tennessee Tobacco QuitLine Fax Referral/Consent Form

Health Care Provider Information – Please Print

Health Care Provider (First Last, Title):

Fax Number: ( ) - Attention:

Phone: ( ) - Email:

Have you discussed this tobacco cessation program with this patient? □ YES □ NO

Patient Information – Please Print

First Name: Last Name: Middle Initials: Mailing Address: City: State/Zip:

Phone: ( ) - Email:

May we leave a message? □ YES □ NO Language Preference: □ English □ Spanish □ Other:

The Tennessee Tobacco Quitline Staff can call me during the following times (check all that apply):
□ 7am-10am □ 10am-1pm □ 1pm-4pm □ 4pm-7pm □ 7pm-10pm

I give my consent for the Tennessee Tobacco Quitline to call me and provide follow up to my healthcare provider:

(patient signature)

Follow-up Information for Referring Provider:

Internal Use Only: Thank you for your referral to the TN Tobacco Quitline. Please note we make at least 3 attempts to reach a patient for enrollment. Below is the status of your referral:
□ Patient was contacted and has declined services □ Patient was contacted and registered for counseling
□ Patient was not contacted after multiple attempts □ Patient was contacted and opted to receive information only

Complete and send to IQHI, Tennessee Tobacco Quitline, 305 B Highland Colony Parkway, Suite 503, Ridgeland, MS 39157 or Complete and Fax this form to: 1-800-329-9074, or Email to: referrals@tnquitline.org

(for additional copies or to download go to www.tnquitline.org)

Confidentiality Notice: The information contained in this facsimile is intended only for use of the individual named. If you are not the intended recipient, you are hereby notified that the disclosure, copying, distribution, or taking of any action in regards to the contents of this fax is strictly prohibited. If you have received this fax in error, please notify the sender immediately and destroy this cover sheet along with its contents, and delete from your system, if applicable.
GEORGIA TOBACCO QUIT LINE FAX REFERRAL FORM
Fax Number: 1-800-483-3114

Provider Information:

<table>
<thead>
<tr>
<th>CLINIC NAME</th>
<th>CLINIC ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTH CARE PROVIDER:</td>
<td></td>
</tr>
<tr>
<td>CONTACT NAME:</td>
<td></td>
</tr>
<tr>
<td>FAX NUMBER:</td>
<td>PHONE NUMBER:</td>
</tr>
<tr>
<td>I AM A HIPAA COVERED ENTITY (PLEASE CHECK ONE): YES [ ] NO [ ] DON'T KNOW [ ]</td>
<td></td>
</tr>
</tbody>
</table>

Patient Information:

<table>
<thead>
<tr>
<th>PATIENT NAME</th>
<th>DATE OF BIRTH</th>
<th>GENDER</th>
<th>MALE [ ] FEMALE [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS</td>
<td>CITY</td>
<td>ZIP CODE</td>
<td></td>
</tr>
<tr>
<td>PRIMARY PHONE NUMBER</td>
<td>M</td>
<td>W</td>
<td>C</td>
</tr>
<tr>
<td>LANGUAGE PREFERENCE (PLEASE CHECK ONE): ENGLISH [ ] SPANISH [ ] OTHER [ ]</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I am ready to quit tobacco and request the Georgia Tobacco Quitline contact me to help me with my quit plan.

I DO NOT give my permission to the Georgia Tobacco Quitline to leave a message when contacting me.

* My not withholding, you are giving your permission for the Quitline to leave a message.

PATIENT SIGNATURE: ___________________________ DATE: ____________

The Georgia Tobacco Quitline will call you. Please check the BEST 2-hour time frame for them to reach you. NOTE: The Quitline is open 7 days a week; call attempts over a weekend may be made at times other than during this 2-hour time frame.

[ ] 8AM – 9AM [ ] 9AM – 11AM [ ] 12PM – 2PM [ ] 2PM – 6PM [ ] 6PM – 8PM

WITHIN THE 2-HOUR TIME FRAME, PLEASE CONTACT ME AT (CHECK ONE): [ ] Primary [ ] Secondary

https://dph.georgia.gov/ready-quit - go to “Additional Resources” section to download document
CARDIAC IMPLICATIONS OF SMOKING AND CESSION

Late Breaking Study 30 Jan 2019
A Randomized Trial of E-Cigarettes versus Nicotine-Replacement Therapy


In a randomized trial involving 886 smokers, e-cigarettes were more effective than nicotine-replacement therapy with respect to the 1-year abstinence rate (18% vs. 10%). Throat or mouth irritation was more common in the e-cigarette group, and nausea was more common in the nicotine-replacement group.
Starting today, every doctor, nurse, health plan, purchaser, and medical school in America should make treating tobacco dependence a top priority.”

— David Satcher, MD, Ph.D.
Former U.S. Surgeon General
Director, National Center for Primary Care, Morehouse School of Medicine
THANK YOU
GET ON THE PATH TO A HEALTHIER YOU!
IF YOU QUIT SMOKING RIGHT NOW:

After 15 years
Your risk of coronary heart disease is the same as a non-smoker’s

After 10 years
You are half as likely to die from lung cancer. Your risk of larynx or pancreatic cancer decreases

After 5 years
Your risk of cancer of the mouth, throat, esophagus, and bladder are cut in half

Within 9 months
You will cough less and breathe easier

Within 12 hours
The carbon monoxide level in your blood drops to normal

Within 3 months
Your circulation and lung function improves

Within 20 minutes
Your heart rate and blood pressure drop

www.BeTobaccoFree.gov
increasing the price of cigarettes is a very effective policy tool for reducing smoking participation and consumption among youth, young adults and persons of low socioeconomic status.

CHI Memorial's non-surgical weight loss option includes appointments with a registered dietitian and licensed clinical social worker (LCSW).

The licensed clinical social worker supports your patient in managing the personal and social changes required to sustain a lifestyle change. The registered dietitian will discuss health goals and will work with your patient to develop a personalized weight loss plan.

For more information, call (423) 495-2256, (423) 495-2245 or toll free 1-866-313-2244.