Are Obstetricians Following Best-Practice Guidelines for Addressing Pregnancy Smoking? Results from Northeast Tennessee

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**BACKGROUND**
- The rate of pregnancy smoking in Northeast Tennessee is three times the national average, and more than twice the rate for the rest of Tennessee
- The American College of Obstetricians and Gynecologists established the well-proven 5 A's method of smoking cessation counseling (ask, advise, assess, assist, and arrange) as a standard component of prenatal care in 2000

**OBJECTIVES**
1. Describe the use of the 5 A's in prenatal care in Northeast Tennessee
2. Evaluate provider attitudes toward and willingness to address pregnancy smoking

**METHODS**
- Surveys were personally distributed to and collected from all obstetric practices in a 6-county area in Northeast Tennessee
- Physicians who completed the surveys and the office managers who coordinated survey distribution and return received small monetary incentives

**RESULTS**
- Of the 46 surveys distributed at 12 practice sites, 30 physicians at 9 sites completed the questionnaires (response rate of 65%)
- The majority of physician respondents were Caucasian (93%), male (57%), and had never themselves smoked (80%)
- The average number of years in practice of respondents was 10 (4 still in residency).
- Respondents averaged 96 total patients and 33 pregnant patients seen per week, and attended an average of 11 deliveries per month

**CONCLUSIONS**
- Obstetric providers in Northeast Tennessee fall well short of universal use of the 5 A's to address pregnancy smoking with their patients. Reasons for not using the 5 A's regularly included lack of time, not knowing where to send patients for further treatment, and a belief that intervention would not be effective.
- Efforts to address high rates of pregnancy smoking in the region should include additional provider education and facilitation of the effective use of smoking cessation interventions in prenatal care.

**RESULTS**
- **ASK**
  - How often do you identify and document cigarette smoking status at each prenatal visit?
  - Always: 27%
  - Usually: 63%
  - Seldom: 17%

- **ADVISE**
  - How often do you give clear, strong advice to quit to pregnant smokers?
  - Always: 63%
  - Usually: 20%
  - Seldom: 7%

- **ASSESS**
  - How often do you assess whether a pregnant smoker is willing to make a quit attempt?
  - Always: 3%
  - Usually: 3%
  - Seldom: 94%

- **ASSIST**
  - How often do you provide self-help smoking cessation materials to pregnant smokers?
  - Always: 7%
  - Usually: 24%
  - Seldom: 69%

- **ARRANGE**
  - How often do you schedule follow-up contact with a pregnant patient who has committed to a quit attempt?
  - Always: 3%
  - Usually: 3%
  - Seldom: 94%

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