

# 7 tips for helping smokers with mental health problems QUIT



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This [Mental Health & Smoking Partnership](#) resource sets out **7 tips for helping smokers with mental health problems quit for good**. These tips were developed by Rethink *expert by experience*, Hannah Moore, based on her personal experience of quitting smoking as a mental health service user. Hannah's tips are accompanied by advice from mental health professionals and experts. These tips are based primarily on the inpatient experience but are also relevant to community mental health services.

## 1. Talk to your patients about smoking

**What Hannah says:** Be the one to initiate the conversation regarding smoking when the patient is first admitted. I can remember one time, when I was in hospital, it wasn't until I saw another patient with one of the little inhalators that I knew we could have them on the ward!

**What the expert says:** Talking to people with mental health conditions about their smoking status and offering them support to quit is vital for helping them to stop. Mental health services should ask all patients about their smoking status, record the result in the patient's notes, and provide them with NRT or a vape straight away. This should be done during the first face-to-face contact if possible, but if a patient is unable or unwilling to discuss smoking this should be recorded, and they should be asked about smoking at the first available opportunity.

Very brief advice (VBA) on smoking is proven to be effective and can be delivered in 30 seconds:

- ASK about smoking status and identify patients who smoke.
- ADVISE that mental health services are smokefree and provide information on the support available to quit or temporarily abstain from smoking.
- ACT by referring to further stop smoking support or prescribing medication.

**Louise Ross, Clinical Consultant, National Centre for Smoking Cessation and Training**

## 2. Remind your patients about the benefits of quitting

**What Hannah says:** Remind them of the benefits as this will make them much more likely to stay quit. For me, knowing how much I'm saving every day is what keeps me going!

**What the expert says:** All smokers should be informed about the benefits of quitting smoking for their physical and mental health. Stopping smoking increases your chances of living a longer and healthier life and reduces the risk of heart disease, cardiovascular disease and respiratory disease.

Quitting smoking also benefits mental health, with evidence showing that quitting smoking may lead to [reductions in anxiety and depression](#) at least as great as from taking antidepressants.

As an added bonus, smokers who quit will save around £2,500 a year – that's nearly £50 a week!

**Professor Ann McNeill, Professor of Tobacco Addiction at King's College London and Co-Chair of the Mental Health and Smoking Partnership**

## 3. Don't assume having a mental health condition makes it harder to talk about smoking

**What Hannah says:** Don't think that "*Oh no, they have mental health conditions so we can't use shock tactics!*" Of course you can! The dangers of smoking don't stop just because you have a mental illness. All patients should be taught about the risks.

**What the expert says:** There are still widespread myths about the negative impact of quitting smoking on mental health and perceptions that people with mental health conditions aren't interested in quitting smoking. This couldn't be further from the truth.

Smokers with mental illnesses are just as [motivated to stop](#) as those without but they are likely to be more addicted and need extra support.

Smoking is the leading preventable cause of early death and health disparities among people with mental illnesses who die [10-20 years](#) earlier than the general population. Around [a third](#) of all cigarettes smoked in England are smoked by people with mental health conditions.

Smoking [increases the risk](#) of developing schizophrenia and depression and evidence shows that quitting smoking can lead to [reductions in anxiety and depression](#) at least as great as from taking antidepressants.

This is important information that smokers *expect* to be informed about and should be informed about. If you don't ask about their smoking, some patients will see this as a green light to continue.

**Dr Peter Byrne, Consultant Liaison Psychiatrist at the Royal London Hospital and Associate Registrar in Public Mental Health, Royal College of Psychiatrists**

#### 4. Give people choice about their alternative to smoking

**What Hannah says:** Give the patient options as to what kind of nicotine replacement therapy they would like and allow them to choose if they already have one in mind. If they aren't sure, then recommend one.

**What the expert says:** Licensed Nicotine Replacement Therapy (NRT) products including nicotine patches, gum, lozenges, inhalators and sprays are safe and effective for people with mental health problems who smoke. NRT products are available to buy over the counter from a shop or on prescription and are safe to use for people who are taking medications for their physical and mental health.

Combining two NRT products (usually a nicotine patch plus one of the faster-acting products like a spray) increases their effectiveness. NRT can also be safely combined with an e-cigarette.

E-cigarettes or vapes are currently [the most popular aid used in an attempt to quit smoking](#) in England. E-cigarettes contain nicotine, but **they do not contain or burn tobacco**, meaning they do not produce carbon monoxide, tar or many of the other harmful chemicals found in tobacco smoke. Nicotine-free e-cigarettes are also an available option.

Evidence shows that vaping poses a [small fraction of the risks of smoking](#), though it is not completely risk-free, particularly for people who have never smoked. E-cigarettes that contain nicotine are estimated to be around [60% more effective](#) than NRT in supporting smokers to quit successfully. Many mental health services are using them to help their patients quit smoking or temporarily abstain from smoking during an admission to a smokefree hospital.

**Dr Debbie Robson, Senior Lecturer in Tobacco Harm Reduction, King's College London**

## 5. Have dedicated stop smoking practitioners embedded within teams

**What Hannah says:** It would help if trusts had a designated stop smoking nurse or support worker who was available for patients to talk to.

**What the expert says:** As part of implementing NHS Long Term Plan tobacco treatment services in mental health settings, all Trusts should have a dedicated stop smoking lead and staff trained in smoking cessation advice who can provide behavioural support, pharmacotherapy, advice on e-cigarettes, and referral to community support during the inpatient stay and on discharge. Evidence shows that behavioural support from a trained stop smoking practitioner combined with pharmacotherapy or e-cigarette use is the most effective way to help smokers with mental health problems quit.

**Dr Elena Ratschen, Associate Professor in Health Services Research, University of York**

## 6. Make treating a smoker's tobacco dependency a core part of their care

**What Hannah says:** Key workers should embed tobacco dependence treatment into patient care plans and make it something that is regularly talked about and reviewed.

**What the expert says:** Treating smoking and treating poor mental health should go hand in hand. Evidence shows that quitting smoking can lead to [reductions in anxiety and depression](#) at least as great as from taking antidepressants. Smokers often need higher doses of medication compared to non-smokers and might be able to reduce their medication when they quit.

Staff should work with patients to develop a plan for quitting or abstaining from smoking. This should be embedded in patient care plans to ensure that smokers are receive regular motivation and support to quit throughout their patient journey.

This will also show that mental health services see quitting smoking as a priority, which will help to motivate patients. Remember that smokers with mental health conditions are just as motivated to quit as those without, but they often need extra support to quit. If staff don't take smoking seriously, then why should patients? We all have a duty to support our patients, improve their health and wellbeing and reduce health inequalities.

**Helen Philips, Drug Alcohol and Smokefree Lead, Mental Health Inpatients, Berkshire Healthcare Foundation Trust**

## 7. Be a pro-quitting environment – focus on positive reinforcement and smokefree policies

**What Hannah says:** When someone hits a milestone this should be acknowledged and celebrated.

**What the expert says:** We know that tobacco smoking it is a very challenging addiction to overcome and that quitting smoking may be one of the most difficult challenges many smokers will undertake. When a person decides to quit, it takes time for cravings to fade, and it can take more than one attempt to successfully stop.

Being supportive is the best thing health professionals can do for someone who is attempting to quit, and celebrating each milestone will help the patient stay motivated.

For people in inpatient settings, positive reinforcement should be combined with a comprehensive smokefree policy which de-normalises smoking and promotes quitting. Smokers should be provided with sufficient NRT or e-cigarettes and given behavioural support; this can not only help them to manage cravings but can provide an invaluable opportunity to experience what it is like to be 'smoke free'. A smoke free stay can act as a springboard for a quit attempt. Ongoing support on a smoke free ward is essential; each morning, afternoon, evening, day and week without smoking is an achievement to be recognised and celebrated.

**Moira Leahy, Consultant Clinical Psychologist, Sheffield Health and Social Care NHS Foundation Trust**

## Tools and resources



### Training and e-learning

- MHSP – [Short training guide for mental health professionals](#)
- NCSCCT – [e-learning](#)
- NCSCCT – [VBA training module](#)
- NCSCCT – [Mental Health Specialty Module](#)

### Practical resources for staff and service users

- [Briefing for professionals: Supporting service users to quit](#)
- ['Quit smoking' poster for inpatient settings](#)
- [Leaflet for service users](#)
- [NHS Better Health – Quit smoking](#)

### National guidance and resources

- [NICE Guidance \[NG209\] Tobacco: preventing uptake, promoting quitting and treating dependence](#)
- [NHS Futures tobacco dependency resources](#)
- [ASH NHS tobacco dependence treatment resources](#)
- [BTS/Respiratory Futures tobacco dependency resources](#)

### Medications and vaping

- MHSP – [Use of electronic cigarettes by people with mental health problems: A guide for health professionals](#)
- NCSCCT - [Switching from varenicline \(Champix\) FAQ's](#)
- OHID – [Nicotine vaping in England: 2022 evidence update](#)

### Implementing smokefree policies

- NCSCCT – [Smoking cessation and smokefree policies - Good practice for mental health services](#)
- [Smokefree Q&A: What should you be asking your trust?](#)
- [Evidence into Practice – Smoking: Acute, maternity and mental health services NICE Guidance PH48](#)
- ASH Webinar – [Implementing smokefree mental health settings](#)