# Local Stop Smoking Services

- **Smoking kills 80,000 people a year in England and harms our poorest communities most.**
- **Local Stop Smoking Services provide one of the most cost-effective health care interventions available.**
- **In their best years support from Stop Smoking Services lead to over 20,000 people who would otherwise have continued to smoke quitting for at least 12 months.**

The Problem: Smoking is highly addictive and smokers find it very hard to quit for good.

Plasma cotinine by deprivation in cigarette smokers: HSE 2006-2012
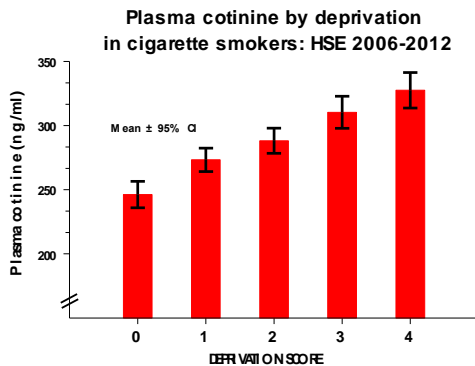
Graph 1: Nicotine dependence levels by levels of deprivation

- The nicotine in cigarette smoke makes them highly addictive.

- Around two-thirds of smokers want to stop but the successful quit rate remains very low (General Lifestyles Survey, 2010).

- Poorer smokers are often more heavily addicted to nicotine and therefore find it more difficult to quit long term (NCSCT, 2013).

- Many smokers take several attempts to quit before they finally succeed.

- Most people try to quit cold turkey. This is the least effective method of quitting smoking (NCSCT, 2015).

The Solution: Stop Smoking Services are the most effective intervention to help smokers quit.

Smokers are four times more likely to quit smoking with a combination of behavioural support and medication. Free local Stop Smoking Services, staffed by experienced, friendly and trained stop smoking practitioners, provide this support in local authorities in England.

Stop Smoking Services help more people quit
In their best years support from Stop Smoking Services lead to over 20,000 people who would otherwise have continued to smoke quitting for at least 12 months. (West *et al,* 2013).

Stop Smoking Services help more people stay quit
Stop Smoking Services more than triple abstinence rates in the long-term compared with smokers who attempt to quit without support (NCSCT, 2015).

Stop Smoking Services are highly valued by smokers
Nine out of ten smokers who've used a local Stop Smoking Service say they would recommend the service to a friend who smokes (NCSCT, 2015).

Stop Smoking Services help reduce inequalities
Poorer smokers are more highly dependent; Stop Smoking Services greatly improve their chances of success and so help reduce the gap (NCSCT, 2013).

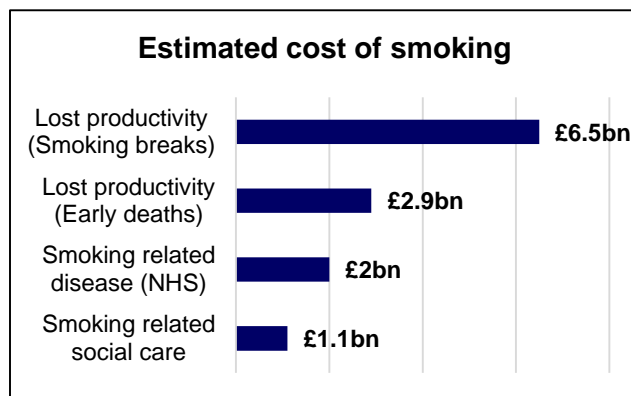### *Stop Smoking Services reduce the burden on the health care system*
Smoking Services in GP surgeries can reduce appointments for long term conditions, the number of home visits for smokers with long term conditions and the total unplanned admissions for patients with smoking related illness (Croghan, 2015).

The Problem: Smoking is a financial drain on local authorities and local communities.

Recent research by ASH shows that £1.1bn is spent annually on social care as a result of long term conditions caused by smoking (£608m to local authorities and £451m to individuals to self-fund their care).

Local employers also suffer financially as a result of smokers taking more sick days than non-smokers and lost productivity as a result of smoking breaks.

Estimated cost of smoking

Lost productivity (Smoking breaks)	£6.5bn
Lost productivity (Early deaths)	£2.9bn
Smoking related disease (NHS)	£2bn
Smoking related social care	£1.1bn

The Solution: Helping smokers quit is highly cost effective

As well as reducing health inequalities and saving lives, helping smokers quit can help local authorities reduce the economic burden of smoking on individuals, their own organisation and society as a whole.

- **Stop Smoking Services are both highly effective *and* cost effective**

The combination of medication and intensive behavioural support offered by local Stop Smoking Services is among the most cost-effective interventions available in the health care sector (NCSCT, 2015). Services cost under £1,000 per quality adjusted life year – for comparison, statins to prevent heart disease cost £57,000 per quality adjusted life year (NICE, 2007).

- **Quitting puts money in pockets of families in need**

Currently approximately 1.2 million children in the UK are living in poverty in households where adults smoke. If these adults quit and the costs of smoking were returned to household budgets, 365,000 of these children would be lifted out of poverty (ASH, 2015).

- **Helping smokers' quit now reduces the cost of care in the future**

The Care Act 2014 requires Councils with social care responsibilities to put in place preventive measures designed to reduce the need for care and support in the future. Helping smokers quit now means that they are less likely to require paid for care in the future.

Maximising the benefit of Stop Smoking Services

- Local services must to reach out to groups with high smoking rates.
- Local authorities must commission high quality evidence based services.
- Local authorities and the NHS should seek to support smokers who want to quit using electronic cigarettes.
- Public Health England should better promote local stop smoking services through their mass media campaigns.

This briefing is supported by the following resources:

NCSCT, *Effectiveness and cost-effectiveness of programmes to help smokers quit*, 2015 (http://bit.ly/1hj49fx)

NCSCT, *Stop Smoking Services and Health Inequalities*, 2013 (http://bit.ly/1JLE3Nb)

ASH, *Local Toolkit and Local Costs Calculator*, 2015 (http://ash.org.uk/localtoolkit/)

ASH, *Cost of Smoking to Social Care*, 2015 (http://ash.org.uk/localtoolkit/)

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