

MEDPAGE TODAY®

Pulmonology > Smoking & Tobacco

Smoking Cessation Key Component of Cancer Moonshot Program

— NCI initiative targets all cancer patients who smoke: "a core part of cancer care"

by [Salynn Boyles](#), Contributing Writer

January 02, 2019

Quitting smoking after a cancer diagnosis is now recognized as a highly effective strategy for improving outcomes and survival in a large percentage of patients, but smoking cessation treatment remains uncommon in cancer care.

That may soon change, thanks to an initiative of the National Cancer Institute's "[Cancer Moonshot](#)" program, designed to jump-start smoking cessation treatment at NCI-designated cancer centers.

Late in 2017, 22 such centers received funding from the program to begin or expand their smoking cessation-treatment programs, and in 2018 an additional 20 centers received the funds, amounting to \$500,000 over two years for each center.

The program, known as the Cancer Center Cessation Initiative, integrates evidence-based tobacco-dependence treatment into cancer treatment using electronic health record (EHR) technology to facilitate the integration, three experts wrote in an editorial published Jan. 2 in [New England Journal of Medicine](#).

"The initiative has the potential to transform clinical cancer care so that evidence-based smoking-cessation treatment is an integral component of care for every person with cancer who smokes," wrote Robert T. Croyle, PhD, and Glen Morgan, PhD, both of the NCI, and Michael C. Fiore, MD, of the University of Wisconsin School of Medicine and Public Health's National Center for Tobacco Research and Intervention.

In an interview with *MedPage Today*, Fiore said the initiative is particularly timely given what is now known about the impact of smoking cessation on cancer treatment and survival.

"We have some powerful new data that tell us patients who continue smoking during cancer treatment tend to have more side effects," he said. "And we also know that the likelihood of developing a second cancer is markedly increased among people who continue to smoke after being cured of a cancer. We are sharing this data with oncologists to emphasize that smoking cessation should be a core part of cancer care."

Fiore, Croyle, and Morgan wrote that while smoking causes roughly a third of all cancer deaths, "clinicians may not appreciate the harms caused by continued smoking among patients with cancer."

"Some clinicians believe that they are inadequately trained to deliver effective treatment for tobacco use and that their patients will resist such treatment or that it will not be effective," they wrote. "Some clinicians may also fear that focusing attention on smoking will exacerbate the guilt and shame that smokers often feel after the development of cancer. Such factors, along with resource limitations, have hindered the delivery of effective smoking-cessation treatments in cancer patients for too many years."

As part of the initiative, all patients who smoke receiving treatment at one of the 42 centers should be urged to quit, offered evidence-based cessation treatment, and tracked "in order to assess treatment outcomes."

Each of the centers is also required to have a plan in place to continue its program for an additional two years after NCI funding ends, Fiore said.

"In many ways this is really a manifestation of the promise of 'Moonshot,' which is designed to accelerate the ways we can help more cancer patients and prevent more cancers," he said.

Allowing individual centers some autonomy in their organizational approaches to delivering smoking cessation treatments will allow them to serve as laboratories for researching how to best incorporate such treatments into clinical practice, Fiore said.

"The idea is that the lessons learned over the next few years can be disseminated to other cancer clinics," he said. "Ideally, every patient who comes into a cancer clinic who smokes should be offered effective treatment."

Primary Source

New England Journal of Medicine

Source Reference: *Croyle RT, et al. "Addressing a core gap in cancer care - the NCI Moonshot Program to help oncology patients stop smoking" N Engl J Med 2019; DOI:10.1056/NEJMp1813913.*