

Smoking cessation and e-cigarettes



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Foundation dentist and reader panel member **Noor Al-Helou** provides a guide on how to answer common questions that dental patients present with.

Smoking cessation is an essential element of the care that is delivered to patients and involves many members of the dental team including dental nurses, hygienists, therapists and dentists. In recent years there has been an increase in the popularity of e-cigarettes as they have become more widely available so it's important to understand what they are and how to answer common questions patients present with.

E-cigarettes, originally introduced to the market in 2003, are devices that are battery operated and aim to deliver nicotine by

vaporising it. This also results in smoking behaviours being replicated as the user inhales and exhales the vapour just as they would when smoking a cigarette.¹ E-cigarettes can contain a variety of other substances including citric acid, flavouring, water, glycerol and nicotine in varying concentrations. They don't contain tobacco and also don't produce tar or carbon monoxide which are the more damaging elements of tobacco smoking.² E-cigarettes come in a variety of forms including vape pens, cigalikes, pod systems and Mods and the one that is used tends to be depend on the patient's preferences. More information on e-cigarettes can be found on

the NHS Smokefree website which is a good reference point for both the clinician and patient.²

With their increased use and popularity, it may be advisable to update medical history forms to include a question on e-cigarettes, in addition to the standard smoking habit questions, as this would open up the conversation between the dental professional and the patient. Below are some of the questions that patients commonly ask.

How does smoking affect my oral and general health?

Smoking has been identified as one of the

leading causes of cancer and is considered to be responsible for up to seven out of ten cancer cases in the UK.³ It also has a role to play in coronary heart disease, atherosclerosis and many other systemic diseases. From an oral health perspective, it has been identified as a key risk factor in periodontal disease and oral cancer as well as many other oral diseases.⁴ It even has an effect post operatively with any surgical procedure as smoking results in poorer wound healing.

methods such as text message or phone support services.⁵

Is using an e-cigarette safe and is it better than smoking?

In the UK, there are strict regulations with regards to e-cigarettes and these include labelling requirements that ensure the consumer can make an informed decision before buying. Ingredients within the e-liquid must also be listed, and the Medicine and

Arguably one of the most important elements of our role as dental professionals is to support patients in achieving oral health. Smoking cessation is one element of this support and being able to answer patients' questions and alleviate some of their concerns is key. Many patients are unaware of the support dental professionals can provide and don't know that there are many services within healthcare that can help them along their journey to quit smoking so it's essential that all dental professionals signpost patients to these services where appropriate.

'According to guidance published by Public Health England, only three to four out of every 100 people who attempt to quit smoking alone remain non-smokers and this is considered the least effective way to stop.'⁵

I've tried to stop smoking in the past and haven't been able to. What stop smoking services are available?

Attempting to quit smoking without any support can be difficult and often results in the patient returning to their smoking habits. According to guidance published by Public Health England, only three to four out of every 100 people who attempt to quit smoking alone remain non-smokers and this is considered the least effective way to stop.⁵

There are lots of services patients can access and dental professionals have a key role in signposting patients to these services. With the Stoptober campaign taking place again this month, it is a great conversation starter with patients who may have never tried to stop smoking or tried but weren't successful.

With a great variety of services available, the choice is down to the patient's preference. These services include:

1. Accessing nicotine replacement therapy including skin patches, chewing gum, oral strips and e-cigarettes⁵
2. Stop smoking medicines that can be prescribed by the patient's general practitioner or pharmacist⁵
3. Accessing stop smoking services in the local area. These services can be in a one-to-one format, as part of a group and increasingly include digital support

Healthcare products Regulatory Agency must be informed of this.

However, many public health organisations such as Cancer Research UK (cancerresearchuk.org) have stated that e-cigarette use is not without risk but has a far lower risk when compared to cigarette smoking.⁶ Patients should be made aware of this if they are choosing to use e-cigarettes to help them quit smoking.

I am only a social smoker, surely this wouldn't cause me any harm?

There is sometimes an assumption that social smoking doesn't do much harm, if any. This is incorrect as every cigarette does harm. Any amount of smoking puts an individual at a higher risk of cancer and lung disease.⁷

Hukkah or shisha is another form of social smoking that is popular, and many assume it is less harmful than cigarette smoking. Although it is in a different form, shisha contains many of the same harmful substances as cigarettes including carbon monoxide and chemicals known to be carcinogens.⁷ The amount of toxins inhaled by a shisha smoker in an hour long session is the same as a cigarette smoker consuming over 100 cigarettes.⁸ Therefore, shisha smokers may be at great risk of developing cancers, heart and circulatory diseases.

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