

# Optimizing Tobacco Dependence Treatment Among Veterans Participating in Lung Cancer Screening: A Pilot

VA



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Quality Enhancement Research Initiative

While lung cancer screening (LCS) with low-dose CT saves lives, a much greater mortality benefit and cost savings are expected when LCS is combined with tobacco dependence treatment (TDT). Integrating tobacco systematic tobacco treatment into LCS will prevent lung cancer deaths, while also providing many additional health benefits for Veterans

## Tobacco Dependence Treatment (TDT)

Up to 60% of participants in lung cancer screening smoke, over 4 times the national average.

Despite strong evidence of effectiveness and recommendations from policy stakeholders and experts, tobacco dependence treatment remains poorly integrated into lung cancer screening programs.

There is an urgent need to increase uptake of systematic tobacco treatment processes for lung cancer screening participants to ensure they are treated with the intensive therapies they need to quit smoking.

Pairing lung cancer screening with an evidence-based process to address motivation to quit and connect patients to resources, "Ask-Advise-Connect," has great potential to increase smoking cessation on a population level.

As in many healthcare systems, within VISN-23, the use of pharmacotherapy for tobacco treatment at the time of LCS referral is low and varies between sites, confirming a gap in care. Rural Veterans are almost half as likely to be treated with medications. VISN-23 has invested in LCS program quality by funding a VISN strategic initiative, which will include hiring the first VISN-level tobacco treatment specialist for LCS program.

### Anticipated Impact:

Applying Ask-Advise-Connect to lung cancer screening participants will boost supported quit attempts and increase smoking cessation.

This proposed work will address key VA priorities of improving population health and health care value, generating results that will support a future QUERI initiative to integrate TDT into LCS across VHA. In collaboration with key VA stakeholders, including the newly established National Center for Lung Cancer Screening and the National Tobacco and Health Program Office, it will generate data to directly inform both broad scale implementation efforts and a future QUERI proposal.



# Startup Project Implementation

## Project Aims

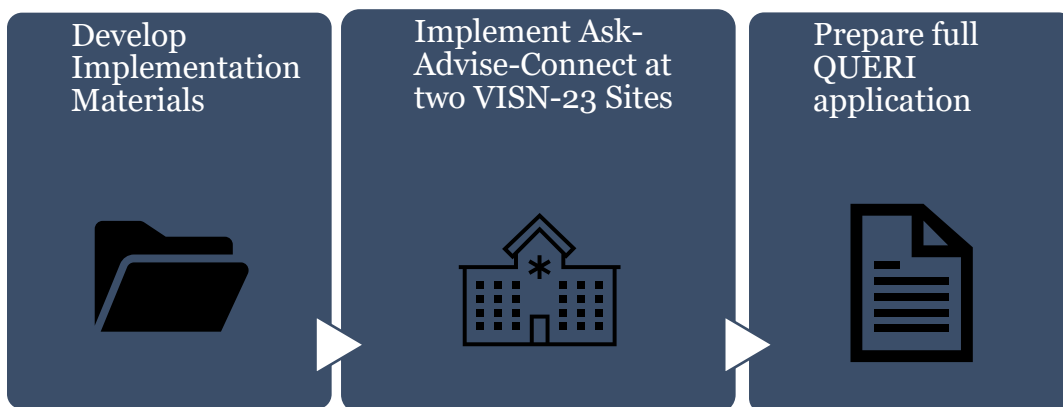
- We will perform a mixed methods evaluation of current tobacco dependence treatment (TDT) processes in lung cancer screening programs.
  - We will sample diverse staff who participate in all portions of the LCS process paired with a survey of local TDT processes.
  - This will allow us to identify key barriers and areas for improvement.
- We will employ a multicomponent external facilitation program to implement A-A-C with connection to combination TDT within LCS programs.
  - We will adapt existing implementation tools to tailor them to the updated process through meetings with key stakeholders in lung cancer screening and tobacco treatment.
- We will perform a two-site pilot of implementing systematic TDT in two lung cancer screening programs within VISN-23 using a process of external facilitation.
  - Informed by the RE-AIM framework, outcomes will measure reach (patients referred) and effectiveness (participation in treatment) of TDT over time analyzed using an interrupted time series.

## Process Goals



The proposal will provide the groundwork for a program suitable for scale across the enterprise that can be implemented in tandem with the rapid spread of lung cancer screening programs.

**By the end of the startup year, we will accomplish the following:**



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