Substance use populations & safer nicotine products

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Declarations

I’m funded by

- The National Institute of Health Research (NIHR)
- Cancer Research UK &
- Maudsley Charity

- No financial links with the tobacco industry
Overview

• 1] Smoking rates in people who use Addiction services in England

• 2] Survey findings about smoking and vaping prevalence in a local Mental Health & Addictions NHS organisation, South London, England

• 3] Use of nicotine products by clients in an Addictions NHS organisation, South London, England
Number of people in contact* with secondary Mental Health & Addiction services in England [2017-2018]

Mental Health services¹
1,984,254

Drug & Alcohol services²
268,390

Numbers in treatment by main substance used²

*‘In contact’ refers to total number of open referrals in secondary MH services

Non-opiate drugs e.g. cannabis, crack cocaine and ecstasy
<table>
<thead>
<tr>
<th>Primary drug</th>
<th>Also use</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opiates</td>
<td>Crack cocaine</td>
<td>45</td>
</tr>
<tr>
<td></td>
<td>Alcohol</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>Cannabis</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>Benzos</td>
<td>10</td>
</tr>
</tbody>
</table>

PHE (2019) Adult substance misuse statistics, NTDMS
Smoking prevalence at the start of treatment

3% received smoking (tobacco) cessation support during their treatment for their primary drug use

PHE (2019) Adult substance misuse statistics, NTDMS
Adult smoking & vaping prevalence in England

No population level data exits about e-cigarette use among people who are in contact with mental health services or drug & alcohol services in England

<table>
<thead>
<tr>
<th></th>
<th>OPN 2017</th>
<th>HSE 2017</th>
<th>ASH-A 2018</th>
<th>STS 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current smoker %</td>
<td>16.4</td>
<td>17.3</td>
<td>13.7</td>
<td>17.3</td>
</tr>
<tr>
<td>Current vaper %</td>
<td>5.5</td>
<td>5.7</td>
<td>6.2</td>
<td>5.4</td>
</tr>
</tbody>
</table>

Preliminary findings from a survey of staff and clients in mental health & addiction services in South London, England

Data collected: June-Sept 2018
Respondents: n=360

<table>
<thead>
<tr>
<th>Clients (n=185)</th>
<th>Staff (n=175)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Mental health services (inpatient &amp; community) n=102</td>
<td>• Mental health services (inpatient &amp; community) n=138</td>
</tr>
<tr>
<td>• Addiction services (community) n=83</td>
<td>• Addiction services (community) n=42</td>
</tr>
</tbody>
</table>

Robson et al (in preparation)
Ever smoked or ever vaped

How does this compare with the general population in England*?

Adults who have ever tried vaping

<table>
<thead>
<tr>
<th>OPN 2017</th>
<th>ASH-A 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>18.9%</td>
<td>17.5%</td>
</tr>
</tbody>
</table>

Current smoking and vaping

- **Current exclusive smokers**
  - Clients (n=185): 47%
  - Staff (n=175): 8%

- **Current exclusive vapers**
  - Clients (n=185): 10%
  - Staff (n=175): 10%

- **Concurrent users**
  - Clients (n=185): 21%
  - Staff (n=175): 5%
Higher smoking rates among clients in Addiction Services vs Mental Health services
Higher vaping rates among clients in Mental Health Services vs Addiction services
Higher smoking & vaping rates among Addictions staff vs Mental Health staff
Main device used (among clients who had ever tried)

<table>
<thead>
<tr>
<th>Device Type</th>
<th>Mental Health Services (n=53)</th>
<th>Addiction Services (n=42)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disposable</td>
<td>33%</td>
<td>6%</td>
</tr>
<tr>
<td>Replaceable, prefilled rechargeable</td>
<td>23%</td>
<td>12%</td>
</tr>
<tr>
<td>Tank</td>
<td>21%</td>
<td>41%</td>
</tr>
<tr>
<td>Mod</td>
<td>10%</td>
<td>21%</td>
</tr>
<tr>
<td>More than 1 device</td>
<td>13%</td>
<td>12%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>9%</td>
<td></td>
</tr>
</tbody>
</table>
Relative harm perceptions

E-cigarettes are less harmful than tobacco to a smoker’s health*

- CLIENTS – 53%
- STAFF – 87%

E-cigarette vapour is less harmful than tobacco smoke to a bystander’s health*

- CLIENTS – 53%
- STAFF – 82%

Staff who had completed smoking cessation training vs no training were more likely to believe that ECs are less harmful than tobacco cigarettes to a smoker’s health and to a bystander’s health.

*The proportion who perceived that EC are less harmful or much less harmful than tobacco
Higher smoking rates among clients in Addiction Services vs Mental Health services

How can Addiction Services support these people? When to offer support?
Development & evaluation of a bespoke tobacco dependence treatment clinic, for clients who are co-dependent on illicit substances and/or alcohol

Setting: One Drug & Alcohol Service in South London & Maudsley NHS Foundation Trust, England

Design: Mixed methods
Target: 120 clients, single group, pre-post test
15-30 qualitative study

Support offered to quit or reduce tobacco smoking, provided concurrently with treatment for other substances

Funder: Cancer Research UK
## Existing service

<table>
<thead>
<tr>
<th>Opening hours</th>
<th>Drop in half a day a week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delivered by</td>
<td>Substance use worker trained in smoking cessation</td>
</tr>
<tr>
<td>Content</td>
<td>6 sessions</td>
</tr>
<tr>
<td></td>
<td>Behavioural support</td>
</tr>
<tr>
<td></td>
<td>NRT</td>
</tr>
<tr>
<td></td>
<td>Free disposable e-cigarettes</td>
</tr>
<tr>
<td>Evaluation</td>
<td>4 week quit status</td>
</tr>
<tr>
<td></td>
<td>Between August 2014- July 2017</td>
</tr>
<tr>
<td></td>
<td>74 clients used the service</td>
</tr>
<tr>
<td></td>
<td>(quit rate at 4 weeks = 31%)</td>
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Offering a free e-cig increased service uptake from an average of 1 new client a month to 4 new clients a month.

18mg/ml strength 3 flavours
<table>
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<th><strong>New service</strong></th>
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Nicotine products supplied free of charge to clients

**DISPOSABLE**
- 18mg/ml strength only
- 3 flavours

**POD**
- 20mg/ml strength only
- 4 flavours (nic salts)

**TANK**
- Choice of e-liquid flavours & strengths

Patches, gum, lozenges, inhalator, mouth & nasal spray. All strengths supplied via voucher scheme.

Purchased from:
- [e-burn](#)
- [LIBERTY FLIGHTS® ELECTRONIC CIGARETTES](#)
- [Lambeth](#)
Vape shop support

Local vape shop staff provide support to clinic staff, clients and researchers

- Trouble shooting advice about vaping products
- Co-production of instructional videos
Nicotine products chosen at 1\textsuperscript{st} appointment (70 clients)

1 person chose behavioural support only

- n=1
- n=20
- n=48
- Single NRT n=10
  Two NRT n=46
• Majority finding devices easy to use
• Concern about cost & access post treatment
• Over half of clients smoke their main problem drug
• Cannabis use is a common secondary/tertiary drug problem and undermines quitting tobacco completely
• Working with Vape shop staff – invaluable and has led to developing new ideas for research
• Working with e-cigarette manufacturers has been easy & straight forward – very hands off, accommodating of University systems
Summary

- Rates of smoking among people accessing Mental Health & Addiction services are high.
- In a local service, higher smoking rates but lower vaping rates are observed among clients in Addiction Services vs Mental Health services.
- Training has a positive impact on health professionals' relative harm perceptions about e-cigarettes.
- Offering e-cigarettes as part of an integrated tobacco dependence clinic within a Drug & Alcohol service attracts clients to engage with use of safer nicotine products.
- Collaborating with EC manufacturers and retailers has added benefits for researchers & clients.
Acknowledgements

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