# Implementation of a smoking cessation protocol in dental practices.

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Interventional

# **Summary**

## ID

NL-OMON25961

Source NTR

Brief title TAPS

#### **Health condition**

tobacco addiction

## **Sponsors and support**

Primary sponsor: University Medical Center St Radboud, Center for Quality Care Research (WOK) Source(s) of monetary or material Support: Pfizer

### Intervention

## **Outcome measures**

#### **Primary outcome**

Patient-reported number of smoking cessation advice given by the dental team, patients' smoking status and quit attempts.

#### Secondary outcome

1 - Implementation of a smoking cessation protocol in dental practices. 13-05-2025

Professionals' attitudes towards smoking and smoking cessation support, their knowledge of health consequences of smoking tobacco (especially dental health), patients' perspectives of smoking cessation

support by dentists will be measured as well as self-efficacy to provide smoking cessation support.

# **Study description**

#### **Background summary**

Smoking is an important risk factor for cardiovascular and respiratory diseases, but also for periodontal diseases and orofaryngal types of cancer (mouth, tongue, throat,larynx). Smoking cessation reduces the risk on orofaryngal cancers and has a positive effect on the frequency and severity of gum infections. Dentists can play a role in primary and secondary prevention of tobacco addiction. They can often directly observe if patients smoke and can easily address the issue of smoking cessation because of the direct relationship between oral health and smoking. Patients consider the direct relation between smoking and consequences for (discolouring) teeth as a good opportunity for dentists to discuss smoking. Following several international guidelines the national Dutch guidelines for the Treatment of Tobacco Addiction recommend to involve dental professionals in smoking disencouragement campaigns, to organise trainings, to develop and/or improve patient education materials and reimburse counseling activities. It is unclear how the guidelines can best be implemented in the dental practices. The present study

investigates the effectiveness of a multifaceted implementation strategy targetted at the knowledge, attitudes and behaviour of the dental team members. In a randomised controlled trial ( $N = 2 \times 30$  practices,  $2 \times 650$  patients) the effectiveness of a combination of small scale education for the whole team, patient-mediated monitoring and feedback of the provision of cessation advice, patient education materials and a task organisation protocol for the various members of the dental team will be studied compared to the usual guideline implementation strategies.

### Study objective

The intervention increases advice giving of dental professionals, the number of patients having quit smoking and the number of quit attempts.

### Intervention

Provision of a 4 hour central course for whole practice teams, patient-mediated monitoring and feedback of the provision of cessation advice, patient education materials and a task organisation protocol for the various members of the dental team. The dental teams in the control group deliver usual care.

# Contacts

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# **Eligibility criteria**

## **Inclusion criteria**

Smoking patients visiting dental practices.

## **Exclusion criteria**

Patients under the age of 18.

# Study design

## Design

Study type: Intervention model: Masking: Control: Interventional Parallel Open (masking not used) Active

# Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-01-2006
Enrollment:	1300
Туре:	Anticipated

# **Ethics review**

Positive opinion	
Date:	23-02-2006
Application type:	First submission

# **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

# In other registers

Register	ID
NTR-new	NL558
NTR-old	NTR614
Other	CMO: 2006-058
ISRCTN	ISRCTN19783832

# **Study results**

#### **Summary results**

N/A