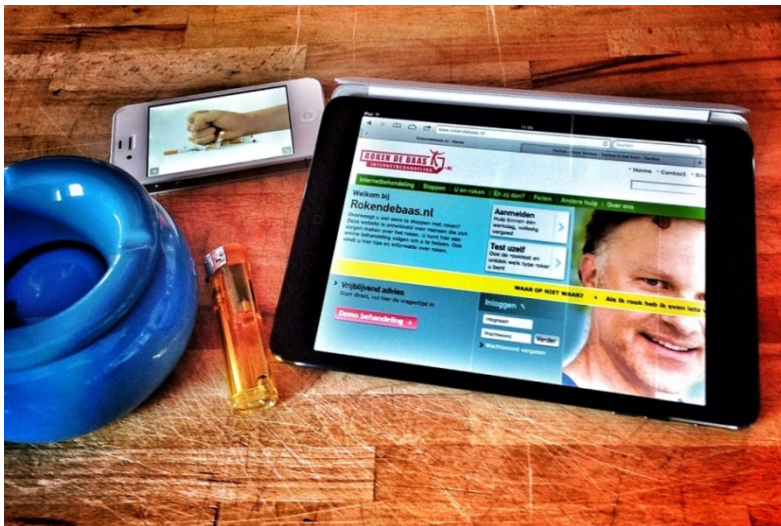


Blended Smoking Cessation Treatment (RookvrijLeven–Studie)



Evaluation of effectiveness,
costs, and adherence of a
blended smoking cessation
treatment versus treatment as
usual

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Problem

- Smoking cessation
- Face-to-face treatment
- Internet-based treatment
- Tailoring and interactivity
- **Blending – best of both worlds?**
- First research exploring the differences between a face-to-face smoking cessation treatment and a blended version



<http://exquision.deviantart.com/art/Shaken-not-stirred-007-335899263>

RookvrijLeven–Regulier

Gewone 1–op–1 Stoppen met Roken
behandeling

Tien 1–op–1 gesprekken (20 minuten
(contact) die gaan over de volgende
onderdelen :

1. Doel stellen
2. Zelfcontrolemaatregelen
3. Omgaan met trek
4. Risicomomenten
5. Omgaan met uitlokkers
6. Stof tot nadenken
7. Anders denken
8. Anders doen
9. Actieplan malen
10. Afsluiting

RookvrijLeven–Combi

Gemengde Stoppen met Roken
behandeling

Vijf 1–op–1 gesprekken (20 minuten
(contact) en vijf online sessies die gaan
over de volgende onderdelen :

1. Doel stellen (1–op–1)
2. Zelfcontrolemaatregelen (online)
3. Omgaan met trek (1–op–1)
4. Risicomomenten (online)
5. Omgaan met uitlokkers (1–op–1)
6. Stof tot nadenken (online)
7. Anders denken (1–op–1)
8. Anders doen (online)
9. Actieplan malen (1–op–1)
10. Afsluiting (online)

Compare treatment outcomes

Main outcomes:

- continued abstinence
- treatment costs
- adherence to RookvrijLeven-Combi
- mechanisms underlying smoking cessation
- further improvement of smoking cessation treatment

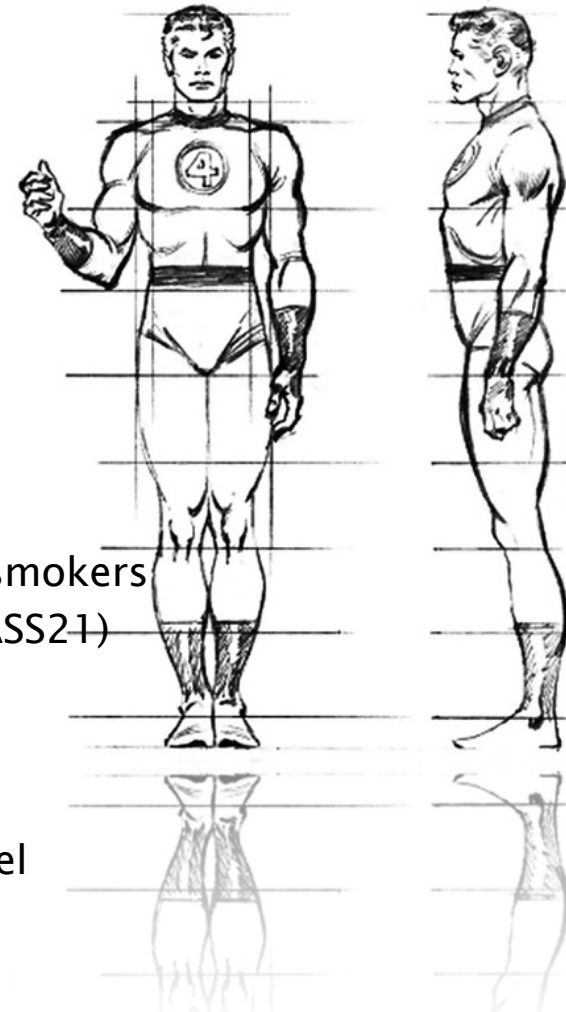
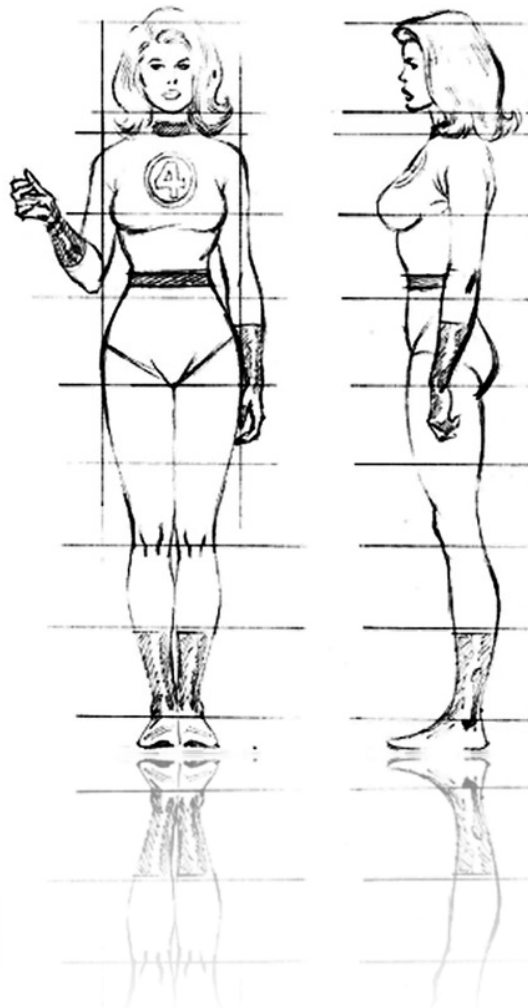
Design

- randomized controlled trial (parallel-group design)



Measurements

- Patient characteristics and medical history
- Internet Skills
- Smoking status
- Nicotine dependence (Fagerström)
- Smoking history
- Stop Smoking History
- Readiness to change
- Attitude
- Social Influence
- Self-Efficacy
- Alcohol/substance (mis)use
- MAP-HSS + special complaints of smokers
- Depression, anxiety and stress (DASS21)
- Quality of Life (Euroqol 5D)
- Middle evaluation of treatment
- Long term evaluation of treatment
- Exhaled carbon monoxide (CO) level
- Cotinine level



Population & Sample

- Population: clients of the SRP
 - Inclusion criteria:
 - age (years) 18+,
 - Everyday smoking
 - Internet (website, Email)
 - Exclusion criteria:
 - inadequate knowledge of Dutch language
- RookvrijLeven–Regulier:
abstinence rate 10%
- RookvrijLeven–Combi:
abstinence rate $\geq 5\%$ (non-inferior)
- Power of 80% and α of 5% 172 patients per group



<http://psychtutor.weebly.com/research-methods.html>

2014

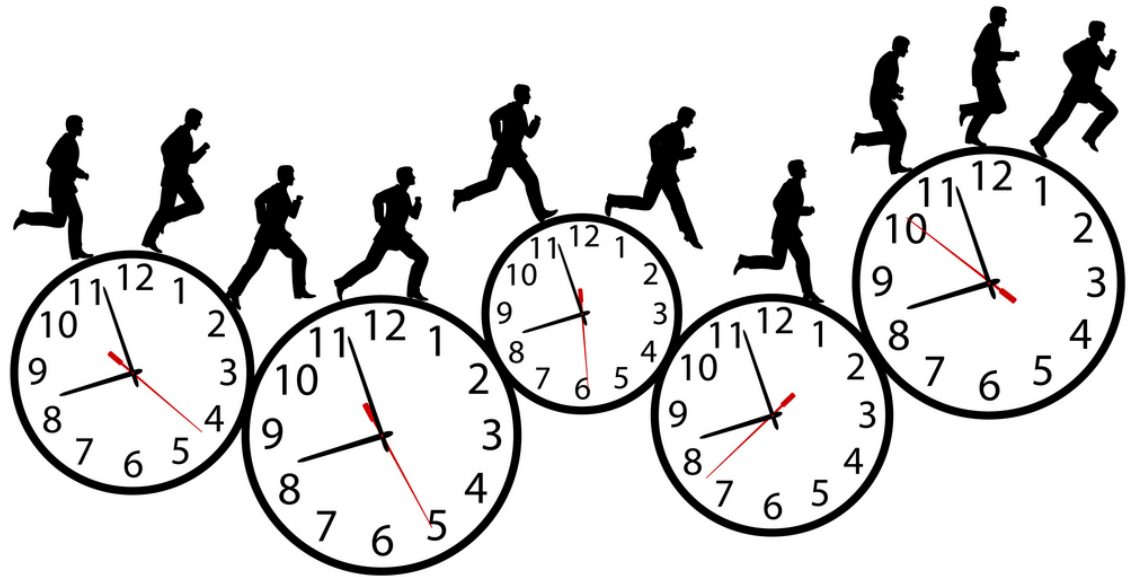
- Development/Implementation new treatments
- METC
- Usability test

2015/2016

- RCT
- Adherence

2017/2018

- Results effectiveness and costs
- further improvement



Current problem:

How to increase the inclusion rate!

