Health By Tech X

Outpatient Smoking Cessation

Preliminary findings of a non-inferiority RCT comparing blended with face-to-face delivery mode

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Background & Objective

- Background
- Blended web-based and face-to-face treatment ...
 the best of both worlds?
- Objective
- Compare quit rates blended vs. face-to-face treatment



- Blended Smoking Cessation Treatment



Design & Intervention

- Design: unblinded two-arm, parallel group, randomized controlled non-inferiority trial with 1:1 allocation (N=344)
- Setting: MST Stoppen Met Roken Poli (outpatient smoking cessation clinic, Dutch hospital)
- Intervention: 6 months high intensity smoking cessation treatment
 - 230min Cognitive Behavioural Counselling
 - Pharmacotherapy & Nicotine Replacement Therapy
 - Face-to-face treatment: 10 face-to-face sessions
 - Blended treatment: 5 face-to-face sessions & 5 web-based sessions



Order, timing, main features, duration and mode of delivery of the F2F and BSCT sessions

Session	Week	Main features	Duration	Mode of delivery	
				BSCT	F2F
1	1	Goal setting Prompt smoking diary Measure CO	50 min	F2F-mode	F2F-mode
2	3	Measures for self-control	20 min	Web-mode	F2F-mode
3	5	Dealing with withdrawal	20 min	F2F-mode	F2F-mode
4	7	Breaking habits	20 min	Web-mode	F2F-mode
5	9	Dealing with triggers	20 min	F2F-mode	F2F-mode
6	11	Food for thought	20 min	Web-mode	F2F-mode
7	14	Think differently Measure CO	20 min	F2F-mode	F2F-mode
8	18	Do differently	20 min	Web-mode	F2F-mode
9	22	Action plan Measure CO	20 min	F2F-mode	F2F-mode
10	26	Closure	20 min	Web-mode	F2F-mode
Total treatment	duration		230 min	130 min F2F-mode 100 min Web-mode	230 min F2F-mode

CO: Carbon monoxide measurement; F2F-mode: face-to-face treatment session of the blended smoking cessation treatment; Web-mode: web-based sessions of the blended smoking cessation treatment



Outcome measures

- Measurements:
 - Cotinine
 - CO
 - Self-reported point & continuous abstinence
 - 3 & 6 months after start



Analysis

- Intermediate analysis
 - Intention-to-treat (->missing data=smoker)
 - Quit rates & Bayes factors
 - Risk differences (5%)



Main results: Bayes factors (biochemically validated outcomes)

Point prevalence abstinence	Quit ra		
outcome	BSCT	F2F	BF
Cotinine-validated (3 months)	4.8	17.5	0.02
CO-validated (3 months)	25.7	28.2	2.61
CO-validated (6 months)	13.8	17.5	1.97



Main results: Risk differences

3 months

Cotinine-validated point prevalence abstinence

CO-validated point prevalence abstinence

Self-reported point prevalence abstinence

Self-reported continuous abstinence

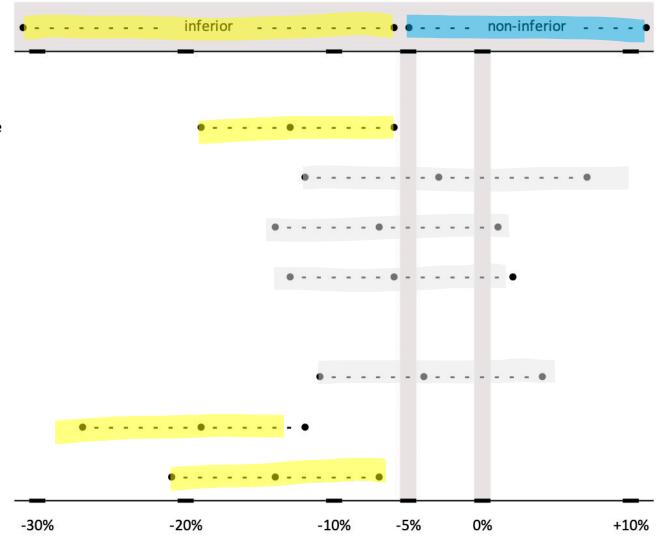
5/6 months

CO-validated point prevalence abstinence

Self-reported point prevalence abstinence

Self-reported continuous abstinence





Conclusions

- Limitation: small number of cotinine measurements
- Blended treatment seems inferior
- Why? ... Patients do not benefit from web-based mode?
 - User Experience F2F vs Web
 - Adherence F2F vs. Web



Blended treatment 🕾



Discussion

- Questions?
- Comments?
- ...?



