



Smokeless Tobacco Users

Like cigarette smoking, the use of smokeless or spit tobacco produces nicotine addiction and is associated with serious health consequences. Compared to other states, Oklahoma has a high rate of smokeless tobacco use, more than 20% among high school males and nearly 8% among adult men in Oklahoma. Quitting smokeless tobacco is not easy. Smokeless tobacco delivers a high dose of nicotine, about twice that of a cigarette. In many ways, quitting smokeless tobacco is a lot like quitting smoking. Both involve the physical and psychological parts of addiction. But there are two parts of quitting that are unique for smokeless tobacco users: a stronger need for oral substitutes (having something in the mouth) to take the place of the chew, snuff, or pouch, and a more readily visible benefit of quitting through the disappearance of mouth sores and gum problems caused by the smokeless tobacco.

Since the launch of the Oklahoma Tobacco Helpline in August 2003 through September 2007, 1451 smokeless tobacco (SLT) users registered for cessation services with the Helpline. About half of them (55%) were also smokers. This report focuses on exclusive smokeless tobacco (SLT) users (n=657) and describes their demographic and tobacco use characteristics, satisfaction with the Helpline and success quitting.

Most of the SLT registrants to the Helpline were male (94%), white (81%), and non-Hispanic (96%). The characteristics of SLT users registering with the Helpline are somewhat different than those of smokers registering for services. The age distribution of SLT users was younger than smokers who registered with the Helpline, with 35% less than 35 years

and another 38% in the 35-44 year category. On average, only 50% of smokers registering with the Helpline are less than 45 years of age. Almost two-thirds of SLT users were married (63%) which is also dramatically higher than what is observed among cigarette smokers (about 38%). SLT users were also more likely to be college graduates (22%) compared to smokers (10%). While the proportion reporting income less than \$20,000 per year was similar among SLT users and smokers (about 37%), a higher proportion of SLT users reported incomes greater than \$35,000 as compared to smokers (30% versus 12%).

SLT users who register with the Helpline are asked a limited number of questions about their tobacco use. Nearly all of the SLT users reported using SLT daily (97%), and about 42% reported using three or more tins of tobacco per week.

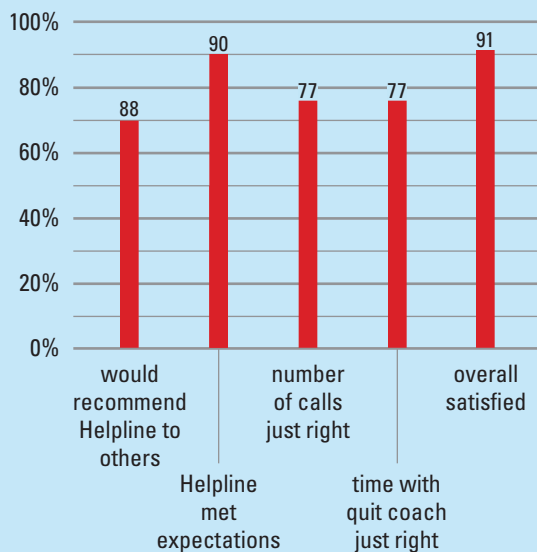
About a third of SLT users enrolled in the single call intervention (34%), while the other 66% received the multiple call program. Nicotine replacement therapy (NRT) is available from the Helpline to multiple call intervention participants who are uninsured or Medicare recipients. Since September 2004, when this Helpline service became available, 307 SLT users (71% of SLT multiple call participants) have received the multiple call program plus NRT from the Helpline.

To determine satisfaction with services and success with quit attempts, a sample of callers to the Helpline is selected monthly to participate in follow-up telephone surveys conducted by the University of Oklahoma College of Public Health. An over-sample of Helpline registrants who report smokeless tobacco use

only is selected to increase the sample size for the follow-up. The 4-month follow-up call includes an assessment of both satisfaction with services and abstinence from tobacco use. Abstinence from tobacco use is measured again at 7 and 13 months post-registration.

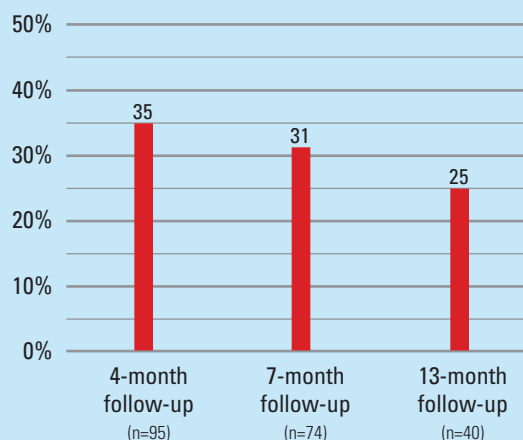
Satisfaction with services among SLT users from July 2005 through June 2007 was high, with 91% reporting being satisfied with the Helpline. This satisfaction rate is somewhat lower than what is reported by all Helpline participants (95%). Given the greater proportion of SLT users who receive the single call intervention, it is not surprising that their satisfaction rates are somewhat lower. Prior studies have demonstrated lower satisfaction rates among single call participants.

Figure 1 · Satisfaction with Helpline Services Among SLT Users at Four-Month Follow-Up



One measure of the effectiveness of the Oklahoma Tobacco Helpline is 30-day abstinence rates. At the 4-month follow-up survey, 35% of SLT users receiving Helpline intervention report not using tobacco for 30 days or longer (Figure 2). This proportion drops slightly at the 7-month follow-up (31%), and again at the 13-month follow-up (25%). It is important to note that sample size is relatively small at the 13-month follow-up (n=40).

Figure 2 · SLT Users Abstinent 30 or More Days at Follow-Up



The quit rates observed for SLT participants in the Oklahoma Tobacco Helpline are similar to what is observed for cigarette smokers in the follow-up sample. In addition, the quit rates reported here far exceed the quit rates for “cold turkey” (approximately 5%).

Smokeless tobacco users (SLT) represent a population of tobacco users with somewhat unique characteristics—predominantly white, younger, males. Despite the fact that the Helpline has not specifically marketed its services to SLT users, nearly 1500 have registered for cessation services through the Helpline, which includes specific coaching and materials to address their form of tobacco addiction. As a result, SLT users report similar satisfaction and quit rates as those reported for cigarette smokers. The Oklahoma Tobacco Helpline continues to demonstrate that it provides a robust set of services, with consistent satisfaction and quit success across multiple types of tobacco users in the state.



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