

Practice Current: How do you address smoking cessation after stroke and TIA?

Introduction

Practice Current and Practice Buzz Surveys are intended to assess neurologic practice around the world. There are no right answers in this survey. We include topics that are controversial or limited evidence is available. Additionally, many external factors may affect practice (insurance, access to medication, etc.). We are interested in capturing the variability of real-life practice. While recognizing each case is different, please choose the answer that best reflects your TYPICAL practice and limit free text to strategies that are not included.

This survey pertains to your practices, knowledge, and beliefs regarding smoking cessation after stroke and transient ischemic attack. The survey is intended for neurologists (physicians and advanced practice providers) who care for adult patients with stroke and transient ischemic attack in the inpatient or ambulatory settings.

Estimated Time: 6 Minutes

1) What is your current role?*

- Resident/Fellow
- Attending/Consultant/Faculty Board-certified Physician
- Advanced Care Provider (Nurse Practitioner or Physician Assistant)
- None of the Above

Page exit logic: Skip / Disqualify LogicIF: (#2 Question "How much of your clinical time is spent in the care of patients with neurologic conditions?" is one of the following answers ("Less than 20%") OR #1 Question "What is your current role?" is one of the following answers ("None of the Above")) **THEN:** Disqualify and display: "Thank you for your interest. Unfortunately, you do not qualify to participate in this survey."

2) How much of your clinical time is spent in the care of patients with neurologic conditions?*

- Less than 20%
- 20% to less than 50%
- More than 50%

Case-based Questions

Please choose the answer that best reflects your TYPICAL practice.

Logic: Show/hide trigger exists.

3) What is your most likely course of action, acknowledging that multiple options may be part of your practice? (Choose one.)*

- I never or rarely provide care in the inpatient setting
- Advise the patient to quit smoking
- Advise the patient to quit smoking and prescribe nicotine replacement monotherapy (e.g., transdermal patch or oral products)
- Advise the patient to quit smoking and prescribe nicotine replacement combination therapy (e.g., transdermal patch and oral products)
- Advise the patient to quit smoking and prescribe varenicline therapy
- Advise the patient to quit smoking and prescribe bupropion therapy
- Advise the patient to quit smoking and recommend switching to e-cigarettes.
- Advise the patient to quit smoking and recommend follow-up with another provider for further smoking-cessation treatment.
- Advise the patient to quit smoking and refer the patient to a formal or dedicated tobacco cessation program.
- Defer preventive counseling to the discharge nurse.
- Defer preventive counseling to the patient's other doctors (including family doctors or other primary care providers/networks)

Logic: Hidden unless: #3 Question "What is your most likely course of action, acknowledging that multiple options may be part of your practice? (Choose one.)" is one of the following answers ("Advise the patient to quit smoking", "Advise the patient to quit smoking and prescribe nicotine replacement monotherapy (e.g., transdermal patch or oral products)", "Advise the patient to quit smoking and prescribe nicotine replacement combination therapy (e.g., transdermal patch and oral products)", "Advise the patient to quit smoking and prescribe varenicline therapy", "Advise the patient to quit smoking and prescribe bupropion therapy", "Advise the patient to quit smoking and recommend switching to e-cigarettes.", "Advise the patient to quit smoking and recommend follow-up with another provider for further smoking-cessation treatment.", "Advise the patient to quit smoking and refer the patient to a formal or dedicated tobacco cessation program.", "Defer preventive counseling to the discharge nurse.", "Defer preventive counseling to the patient's other doctors (including family doctors or other primary care providers/networks)")

4) Indicate how often you do each of the following for admitted patients with stroke or transient ischemic attack who are active smokers:*

	Never	Rarely	Sometimes	Often	Always
Assess patient readiness to quit smoking	()	()	()	()	()
Personally advise the patient to quit smoking	()	()	()	()	()
Recommend counseling (individual or group)	()	()	()	()	()
Recommend nicotine replacement monotherapy (e.g., transdermal patch or oral products)	()	()	()	()	()
Recommend nicotine replacement combination therapy (e.g., transdermal patch and oral products)	()	()	()	()	()
Recommend bupropion	()	()	()	()	()
Recommend varenicline	()	()	()	()	()
Recommend e-cigarettes	()	()	()	()	()
Refer the patient to another provider or program for smoking cessation	()	()	()	()	()
Defer discussions about smoking cessation to outpatient setting	()	()	()	()	()

Logic: Show/hide trigger exists.

5) What is your most likely course of action, acknowledging that multiple options may be part of your practice? (Choose one.)*

- I never or rarely provide care in the outpatient setting
- Advise the patient to quit smoking
- Advise the patient to quit smoking and prescribe nicotine replacement monotherapy (e.g., transdermal patch or oral products)
- Advise the patient to quit smoking and prescribe nicotine replacement combination therapy (e.g., transdermal patch and oral products)
- Advise the patient to quit smoking and prescribe varenicline therapy
- Advise the patient to quit smoking and prescribe bupropion therapy
- Advise the patient to quit smoking and recommend switching to e-cigarettes.
- Advise the patient to quit smoking and recommend follow-up with another provider for further smoking-cessation treatment.
- Advise the patient to quit smoking and refer the patient to a formal or dedicated tobacco cessation program.
- Defer preventive counseling to the patient's other doctors (including family doctors or other primary care providers/networks)

Logic: Hidden unless: #5 Question "What is your most likely course of action, acknowledging that multiple options may be part of your practice? (Choose one.)" is one of the following answers ("Advise the patient to quit smoking", "Advise the patient to quit smoking and prescribe nicotine replacement monotherapy (e.g., transdermal patch or oral products)", "Advise the patient to quit smoking and prescribe nicotine replacement combination therapy (e.g., transdermal patch and oral products)", "Advise the patient to quit smoking and prescribe varenicline therapy", "Advise the patient to quit smoking and prescribe bupropion therapy", "Advise the patient to quit smoking and recommend switching to e-cigarettes.", "Advise the patient to quit smoking and recommend follow-up with another provider for further smoking-cessation treatment.", "Advise the patient to quit smoking and refer the patient to a formal or dedicated tobacco cessation program.", "Defer preventive counseling to the patient's other doctors (including family doctors or other primary care providers/networks)")

6) Indicate how often you do each of the following for clinic patients with stroke or transient ischemic attack who remain active smokers.*

	Never	Rarely	Sometimes	Often	Always
Assess patient readiness to quit smoking	()	()	()	()	()
Personally advise the patient to quit smoking	()	()	()	()	()
Recommend counseling (individual or group)	()	()	()	()	()
Recommend nicotine replacement monotherapy (e.g., transdermal patch or oral products)	()	()	()	()	()
Recommend nicotine replacement combination therapy (e.g., transdermal patch and oral products)	()	()	()	()	()
Recommend bupropion	()	()	()	()	()
Recommend varenicline	()	()	()	()	()
Recommend e-cigarettes	()	()	()	()	()
Refer the patient to another provider or program for smoking cessation	()	()	()	()	()
Schedule the patient for a follow-up visit specifically for smoking	()	()	()	()	()

7) Please rate the degree to which each of the following are barriers to providing smoking-cessation interventions for patients with stroke and transient ischemic attack.*

	Not a barrier (never a concern)	Minor barrier (sometimes a concern)	Moderate barrier (often a concern)	Major barrier (always a concern)
Demands on your time	()	()	()	()
Physician reimbursement	()	()	()	()
Costs of treatment for patients	()	()	()	()
Lack of training with available treatments	()	()	()	()
Low success rates	()	()	()	()
Patient engagement	()	()	()	()
Patients' medical comorbidities	()	()	()	()
Patients' mental health comorbidities	()	()	()	()

8) Please indicate whether and how strongly you agree or disagree with each of the following statements in general.*

	Strongly agree	Somewhat agree	Neutral	Somewhat disagree	Strongly disagree
Smoking cessation is an integral component of secondary prevention after stroke and TIA.	()	()	()	()	()
Helping patients quit smoking after stroke and TIA is my responsibility as a neurologist.	()	()	()	()	()
Helping patients quit smoking after stroke and TIA is the primary care provider or general practitioner's responsibility.	()	()	()	()	()
I have other things to focus on which are higher priority than smoking-cessation.	()	()	()	()	()
I am not appropriately trained to help patients quit smoking.	()	()	()	()	()
I am comfortable prescribing and managing nicotine replacement therapy.	()	()	()	()	()
I am comfortable prescribing and managing varenicline for smoking cessation.	()	()	()	()	()
I am comfortable prescribing and managing bupropion for smoking cessation.	()	()	()	()	()
Smoking-cessation interventions are futile after stroke/TIA.	()	()	()	()	()
Cigarette smoking after stroke and TIA is a lifestyle choice and a matter of individual willpower.	()	()	()	()	()
Addressing smoking cessation may undermine the therapeutic relationship with the patient.	()	()	()	()	()
I am comfortable discussing e-cigarettes with my patients.	()	()	()	()	()

General Questions

9) Please answer the following question about smoking-cessation interventions for the average active smoker. Compared to patients not given pharmacotherapy, patients given smoking-cessation pharmacotherapy broadly (nicotine replacement therapy, bupropion, or varenicline) are how much more likely to quit smoking, on average? If you do not know, enter a guess.*

() % more likely to quit: _____ *

10) Please feel free to provide additional comments on this topic.

Demographic Information

Page exit logic: Disqualified if do not serve in one of the provided Roles **IF:** #1 Question "What is your current role?" is one of the following answers ("None of the Above") **THEN:** Disqualify and display: "**Thank you for your interest. Unfortunately, you do not qualify to participate in this survey.**"

11) What percentage of your patients are active smokers at the time of their stroke or transient ischemic attack (TIA)?*

() Enter a number from 0 to 100%: _____ *

12) Is caring for patients with stroke your primary area of clinical responsibility?*

() Yes

() No

13) What proportion of your clinical volume consists of patients with stroke and transient ischemic attack?*

- Less than 10%
- 11-25%
- 26-50%
- More than 50%

14) What patient population do you treat?*

- Adults (18 years and older)
- Children (0 to less than 18 years)
- Both (adults and children)

15) What is your primary work setting?*

- Hospital- or inpatient-based (including free-standing, academic, and government)
- Outpatient-based (including neurology clinic, multi-specialty clinic, and private practice)

16) How many years have you been in practice?*

- In Training
- Less than 10 years
- 10 or more years

17) My neurology practice is primarily in:*

- General neurology
- Epilepsy
- Vascular Neurology
- Movement Disorders
- Neuromuscular
- Neuro-oncology
- Multiple Sclerosis/Neuro-Inflammatory diseases
- Neuro Intensive Care
- Neuropsychiatry, Behavioral Neurology, and/or Functional Neurologic Disorders
- Other - Please specify: _____ *

18) On which continent do you currently practice?*

- Asia
- Africa
- North America
- South America
- Antarctica
- Europe
- Australia

Logic: Show/hide trigger exists.

19) In what country is your practice located?*

Logic: Hidden unless: #19 Question "In what country is your practice located?" is one of the following answers ("United States")

20) In what state is your practice located?*