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Smoking cessation research: valuable lessons for GP trainees

Almost a 100 years to the day after the birth of the eminent epidemiologist Richard Doll on 28 January 1912, the results of the smoking analyses of the million women study were published.¹ The report, fittingly dedicated to Doll by the authors, demonstrates the hazards of prolonged smoking and benefits of smoking cessation in women. This adds another important chapter to the health literature on smoking that Doll famously contributed enormously to, particularly through his landmark 50-year study of smoking among British doctors. Epidemiologists will naturally have followed this story with interest, but I feel that there are also valuable lessons for trainees in general practice.

Many GPs may question the relevance of smoking cessation research to their practice as nurses and pharmacists carry out most clinical work in this area. I would put to them the same argument that my Latin teacher would use on those students that insolently questioned the value of learning a 'dead' language; that abstract principles and learning skills are transferable, regardless of whether the educational content is practically used.

The need for opportunistic health promotion is clear and of course, this is reason enough for smoking to be on the agenda of all clinicians. The growing evidence supporting techniques such as motivational interviewing is particularly clinically relevant. The RCGP curriculum mentions smoking cessation a number of times, under various clinical headings. However, the domain of smoking cessation research could additionally provide trainees with an introduction to primary care evidence-based medicine.

Smoking increases the risk of many diseases and has therefore been investigated by researchers from various clinical specialties. The widespread impact of smoking has in fact made it one of the first areas where transdisciplinary research has evolved. Most GPs will have encountered the quintessential lifelong smoker who has COPD, peripheral vascular disease, coronary disease, and a tracheostomy following throat cancer surgery! The smoking cessation literature highlights the importance of

researchers collaborating and overcoming boundaries between disciplines.

Smoking cessation research also reveals much about health behaviours. The role of identity in smokers is well recognised. The complex interplay of friends and family as well as work and home life that lead to these changes are important to explore in many general practice scenarios. This may be the first time that many trainees will engage with disciplines such as health psychology and anthropology, which provide valuable insights into patients' experiences. In particular, the mind maps and social network trees often reported in this type of research reveal much about health behaviours generally.

Finally, research into smoking asks important questions about the ethics of resource allocation. Does the tax levied on smokers balance the costs arising from smoking-related diseases? What about less obvious expenditure such as the neonatal care costs of premature babies born to smoking mothers? As we move into the world of clinical commissioning, GPs will need to be well versed in health economics and analysing a complex and costly lifestyle habit could provide a useful way to consider important financial principles.

Smoking is an example of a wide-ranging and well-investigated health issue. This is reflected in the variety of disciplines involved in smoking cessation research, from oncology to cardiology and from psychology to public health. GPs have a unique insight into patient's lives and therefore have the potential to provide truly holistic care.

Smoking cessation is an example of where this care can be invaluable and examining the associated literature could additionally provide trainees with a valuable introduction to unfamiliar research disciplines. Along the way, they may even be inspired by the brilliant work of iconic individuals like Richard Doll.

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