



Exceptional University of Ottawa Heart Institute Quit-Smoking Program Offers New Hope for Canadians

Proven Smoking Cessation Program to Help Hospitals in British Columbia and New Brunswick

Establishes Framework for a National Quit-Smoking Model

OTTAWA – January 22, 2007 – An exceptionally effective smoking cessation program that results in more than 44% of participants remaining smoke-free for 6 months or more is being hailed as a new national model for use across the country. Developed by the University of Ottawa Heart Institute (UOHI) and supported in part by the Government of Canada, the so-called Ottawa Model will be implemented in two major health districts in the country.

The Ottawa Model is a hospital-based program involving a unique combination of consult and intervention, information, follow-up and feedback. At UOHI, about 1,500 in-patient smokers are identified annually and more than 98% participate in the Heart Institute's program. Between 30% and 50% each year remain smoke-free for six months or longer. The program is now being replicated in 12 hospitals in the Champlain region of Ontario and is being used to assist all smoking patients, not just those with heart disease.

"The Ottawa Model leads to a significant increase in long term cessation rates," said Dr. Andrew Pipe, director, Prevention & Rehabilitation, UOHI. "Health is improved, more lives are saved, and demands on the health care system are reduced. By assisting other regions to use this proven approach, we hope to help more smokers quit and enhance both their health and the quality of their lives."

With federal government funding, two regions – River Valley Health (RVH) in New Brunswick and the Vancouver Coastal Health (VCH) in British Columbia – will be the first to adopt and implement the Ottawa Model. In the RVH region, some 23% of the population smoke. In the VCH service area about 16% of the people are smokers. For comparison, about 20% or 24,000 patients admitted to the 12 regional hospitals currently served by the Ottawa Model are smokers.

"As one of the largest health authorities in New Brunswick, this project will provide us with an ability to institutionalize smoking cessation as part of our standard of care," said Anne Marie Atkinson, Health Promotion and Wellness Consultant, River Valley Health. "The Ottawa Model will contribute to our targets of further reducing our regional smoking rate, reducing hospitalizations and deaths from chronic diseases associated with tobacco use, and promoting a more healthy lifestyle."

Christina Tonella, Leader, Tobacco Reduction Strategy, Vancouver Coastal Health, said: "In British Columbia, the results of this kind of program will benefit patients and the health care centres in our region. Many patients want to quit smoking when they are hospitalized and welcome specific assistance to help them quit."

Among its many advantages, the Ottawa Model provides a means of establishing comparable standards and practices across the country, encouraging medical units to collaborate more closely to further cut smoking among Canadians. As well, smoke-free facilities and grounds have made it more important for hospitals to have sensitive, responsive and successful programs to assist smokers.

“The Heart Institute has more than 10 years experience in developing and implementing smoking cessation programs for patients,” said Dr. Pipe. “As the leading cardiovascular care centre in the country, we’re willing to contribute our experience and share our knowledge with anyone, anywhere especially when addressing this important preventive health practice.”

About River Valley Health (RVH)

RVH is the largest geographic health region in New Brunswick, delivering bilingual care and services to close to 170,000 people, including five First Nation communities, in over 20 locations in a geographic area exceeding 23,000 square kilometers. Services are provided through acute care facilities, community health centres, a collaborative health clinic, specialty units, and a wide range of community and home care services. For more information, visit www.rivervalleyhealth.nb.ca.

About Vancouver Coastal Health (VCH)

VCH provides a full range of health care services ranging from hospital treatment to community-based residential, home health, mental health and public health services. VCH provides services to 25% of British Columbia’s population, with 17 regional districts and 15 First Nation communities. VCH delivers care through 14 acute care facilities, 24,500 qualified staff and two diagnostic and treatment centres, over a geographic span of 54,000 square kilometers. For more information, visit www.vch.ca.

About UOHI

The University of Ottawa Heart Institute is Canada’s largest and foremost cardiovascular health centre dedicated to understanding, treating and preventing heart disease. We deliver high-tech care with a personal touch, shape the way cardiovascular medicine is practiced, and revolutionize cardiac treatment and understanding. We build knowledge through research and translate discoveries into advanced care. We serve the local, national and international community, and are pioneering a new era in heart health. For more information, visit www.ottawaheart.ca.

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For further information please contact:

Marlene Orton
Senior Manager, Public Affairs
University of Ottawa Heart Institute
613 761-4850

Shelley Fletcher
Director of Communications
River Valley Health
506 452-5668

Viviana Zanocco
Senior Media Relations Officer
Vancouver Coastal Health
604 612-8053

The Ottawa Model

The success of the Ottawa Model is based on the systematic identification of smokers and an offer of assistance in helping them to quit. To accomplish this:

- All new medical residents and nurses are provided with one-on-one training in how to manage tobacco dependency.
- All smokers admitted to a hospital are identified and treated with support from a designated nurse counselor and stop-smoking aids. Smoking status is documented in the patient's record.
- The attending physician or nurse advises all smokers to quit. An order for nicotine replacement therapy is provided by the attending physician.
- A quit plan is developed with smoking patients ready to quit. Nurse counsellors are trained in all aspects of nicotine dependence and smoking cessation.
- At discharge, patients are provided with guidance on a smoking withdrawal program with assorted materials including nicotine replacement, if necessary.
- Recommendations to support smoking cessation are written into the patient's discharge letter and sent to the family physician.
- Patients are contacted at home three, 14 and 30 day intervals every month for six months after discharge by a unique call system. This is a sophisticated integrated voice response technology that tracks the patient's progress using a detailed series of questions. If any response suggests the patient is having trouble remaining smoke-free or if they've started smoking again, a nurse counsellor will call to talk about options and help get the patient back on track. This includes a reference to the Heart Institute's outpatient smoking cessation clinic.
- Patients are assessed six months after discharge.

Example Cases:

- Mr. 'X' was a 2-pack a day smoker for 45 years, admitted with pneumonia and chronic obstructive pulmonary disease, required home oxygen. Six months after quitting, he was not using oxygen and able to take his wife out for dinner.
- Mr 'Y' was smoking a cigarette when he suffered a heart attack. Three years later, he is smoke-free and still alive.