

# UW-CTRI News Release

University of Wisconsin Center for Tobacco Research and Intervention

FOR IMMEDIATE RELEASE  
January 5, 2007

Contact: Gloria Meyer, 608-265-4447  
[GKM@ctri.medicine.wisc.edu](mailto:GKM@ctri.medicine.wisc.edu)

## **New Study Finds Tobacco Quitlines Inexpensive Treatment for Smokers**

An article just published in the *American Journal of Preventive Medicine* finds that tobacco quitlines provide “tobacco cessation treatment at a remarkably modest cost,” according to the author, Paula Keller, MPH, of the University of Wisconsin School of Medicine and Public Health.

The article analyzes a survey, conducted by the North American Quitline Consortium, of the 38 quitlines in operation in 2004, to obtain baseline information about their organization, financing, promotion and cost. The survey found that quitlines had a median *per capita cost* of 14 cents and a median cost per adult smoker of 85 cents. In comparison with other medical treatments, the cost is extremely modest.

“When compared with the total economic cost of smoking of \$3931 per year per smoker estimated by the CDC,” said Keller. “Quitlines are really a bargain.”

Previous research has demonstrated the effectiveness of quitlines. Because they are convenient (no transportation, available many hours during weekdays and weekends), confidential and free, individuals who smoke or chew tobacco are four times more likely to use a quitline than to seek face-to-face counseling. Quitlines are also able to reach the elderly, rural residents, the poor and minorities.

Quitlines also have previously been shown to improve rates of quitting by 20 to 35 percent. In addition, the more the potential quitter uses the quitline, the greater his chances for success. Most state quitlines provide cessation counseling services and

--more--

some provide medication. Most are also state-supported (89 percent). Many used Master Settlement Agreement funds to support their quitlines.

Tobacco quitlines provide a variety of services, including distributing self-help materials (97 percent), proactive counseling (90 percent) and referral to other services (89 percent). The counseling provided by quitlines usually includes working with a caller to set a quit date, providing information about medications, proposing strategies for dealing with urges and tips for reducing triggers to smoke. Most quitlines will provide up to four calls initiated by the quitline at various times during the quit attempt.

Since the information for this article was collected in 2004, additional states have added quitlines, so that now all 50 states have active quitlines. This increase is primarily the result of the creation of a national quitline network under the auspices of the National Cancer Institute and the Centers for Disease Control and Prevention and the creation of a national number, 1-800-QUIT-NOW.

Paula A. Keller, MPH, Linda A. Bailey, JD, MHS, Kalsea J. Koss, BS, Timothy B. Baker, PhD., Michael C. Fiore, MD, MPH. "Organization, Financing, Promotion, and Cost of U.S. Quitlines, 2004." *American Journal of Preventive Medicine*. 2007;32 (1).

# # #