

Contingency Tx Helps Pregnant Smokers Quit

BY FRAN LOWRY

BOCA RATON, FLA. — In a pilot study of pregnant women who continued to smoke cigarettes despite knowing they were pregnant, 11 (37%) of 30 women who received contingency management achieved abstinence, compared with just 2 (10%) of 23 women who did not.

This result highlights the effectiveness of contingency management as a strat-

egy to help pregnant women stop smoking, Dr. Sarah Heil said at the annual meeting of the American Academy of Addiction Psychiatry.

The women in both contingent and noncontingent groups were seen every day for the first 5 days of the study. During this time, abstinence was based on a breath carbon monoxide level of 6 parts per million or less, said Dr. Heil of the University of Vermont, Burlington.

After the first 5 days, the women were seen according to the following schedule:

- ▶ Twice a week for 7 weeks.
- ▶ Once a week for the next 11 weeks.
- ▶ Once every other week until delivery.
- ▶ Once a week for the first 4 weeks post partum.
- ▶ Every other week for the next 8 weeks.

Abstinence in this phase of the study was assessed by measuring urine cotinine

levels; levels of 80 ng/mL or less were indicative of abstinence.

The women were rewarded with vouchers, which were earned contingent on biochemically verified abstinence. The voucher value began at \$6.25 and escalated at a rate of \$1.25 per consecutive negative sample up to a maximum of \$45.

"These vouchers are like having a bank account with us. We put their money into an account, and they are allowed to spend it on things we believe are appropriate. So there were a lot of gift certificates, paying of credit card bills, and shopping at Wal-Mart and grocery stores," Dr. Heil said.

Women who were randomized to noncontingency management got vouchers independent of their smoking

SAVE THE DATE!

REGISTER TODAY FOR THIS
EXCITING SCIENTIFIC PROGRAM

THIS ACTIVITY HAS
BEEN APPROVED FOR
24 AMA PRA
Category 1 Credits™

To register or for more information,
visit www.sdefderm.com

SKIN DISEASE EDUCATION FOUNDATION presents

COSMETIC DERMATOLOGY SEMINAR 2009™

A CONTINUING MEDICAL EDUCATION CONFERENCE

May 28–31, 2009

Loews Santa Monica Beach Hotel

Learn the latest in cosmetic dermatology and get up-to-date on recent breakthroughs in therapeutic treatments and cosmetic surgery. An outstanding faculty, representing the best in the field, will cover the newest techniques, scientific therapies and research focused on improving patient care and enhancing your practice.

Featuring:

- Facial Rejuvenation: The Best Techniques and Devices
- Body Contouring: Assessing What Really Works
- Botulinum Toxins: Does it Matter Which One you Use?
- Filling the Deflated Face: With What?

MEDICAL DIRECTORS:



David J. Goldberg, MD, JD
Clinical Professor, Mount Sinai School of Medicine
Director, Skin Laser & Surgery Specialists of NY/NJ
New York, NY



Christopher B. Zachary, MBBS, FRCP
Professor and Chair, Department of Dermatology
University of California, Irvine, CA



The effects
obtained in the
study persisted
even after the
voucher program
was discontinued.

DR. HEIL

status. The vouchers were a flat \$11.50 per antepartum visit, and \$20 per each postpartum visit.

The women in the study had been smoking for about 8 years; most of them lived with other smokers. They smoked approximately one pack of cigarettes a day before pregnancy, but had reduced this amount by roughly 50% by the time they entered the study.

Most of the women had less than a high school education, and few were married.

To be considered abstinent at each time point, the women had to self-report that they had not had a cigarette—"not even a puff"—in the last 7 days, as well as the appropriate urine cotinine level.

The effects obtained in the study persisted 3 months after delivery, and for a further 3 months, even though the voucher program was discontinued at 3 months post partum. This was true for women in the contingent and noncontingent groups, Dr. Heil said.

Fetuses in the contingent group gained weight faster than those in the noncontingent group. Fetal weight was estimated by measuring fetal length and abdominal circumference by ultrasound.

Cigarette smoking is the leading preventable cause of poor pregnancy outcomes in the United States. Placental abruptions, small gestational age, preterm and still birth, low birth weight, and increased risk for sudden infant death syndrome are all associated with cigarette smoking by the mother.

The adverse effects of smoking on the neonate cost \$1,630/birth per year in 2008 dollars.

Dr. Heil said she hopes to extend her research on contingency management to include pregnant smokers who are also opioid dependent.

The opinions expressed at Skin Disease Education Foundation seminars do not necessarily reflect those of Skin Disease Education Foundation, Elsevier Inc. or the supporters of the seminars. Elsevier Inc. will not assume responsibility for damages, loss, or claims of any kind arising from or related to the information contained in presentations, including any claims related to the products, drugs or services mentioned.

Jointly sponsored by



SKIN DISEASE
EDUCATION
FOUNDATION
an Elsevier business

www.sdefderm.com