Effects of e-cigarettes vs usual care for smoking cessation when offered at homeless centres: Protocol for a cluster randomised controlled trial

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Background

Smoking is incredibly common amongst people experiencing homelessness, up to four times the average UK smoking prevalence rate₁. Homeless smokers make fewer quit attempts, are less likely to stop smoking but show desire to quit. The harms of tobacco smoking are exacerbated in this population and therefore there is an urgent need to explore the efficacy of novel approaches for smoking cessation in one of the most vulnerable and hard to treat groups in society.

E-cigarettes (EC) are the most popular method of quitting smoking in the UK₂, with some studies suggesting they are more helpful than nicotine gum or patches and are less harmful than smoking₃. For people on low or no income however, the price of a starter kit is high (~£25). Supplying free EC starter kits at for people experiencing homelessness may overcome this problem.

Feasibility Study

We conducted a study to explore the feasibility of providing free EC starter kits to people accessing homeless services in 4 services located in Edinburgh, Northampton and London.



- Two centres received EC starter kit and 2 offered usual care (UC)
- > Participants were assessed at baseline, 4, 12 & 32 weeks





58% in hostel/supported accommodation

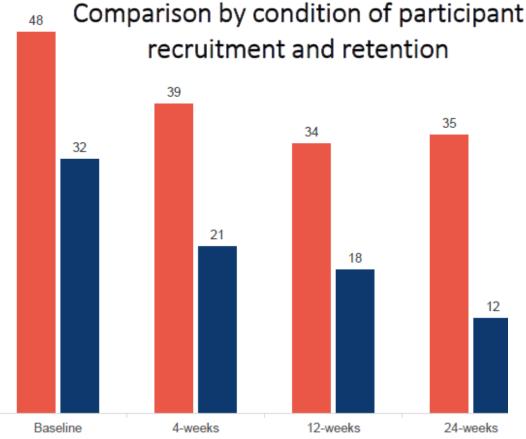
Conclusions

- > Smokers were willing to participate and demonstrated good retention rates
- The study was perceived as valuable especially after training staff
- EC were acceptable and there were very few reports of unintended consequence
- Demonstrated we could go to a full trial

I didn't pay anything, there's your vape, there's your oil, there's your coil, give it a go. And I've given them a go and yes, it's helped.. You're giving people a chance.. That's a good thing. People, like myself, that would have never thought of buying one, just wouldn't have come into my head. (Participant, E-Cig, Feasibility Study)

I thought this was insane... they are just going to take the device and you are never going to see them again because they are not going to want to engage.. My preconceptions were rocked. (Staff, E-Cig, Feasibility Study)

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Recruitment	Invited	Participated	r of r
E-Cig	106	48 (45%)	mbe
Usual Care	71	32 (45%)	Ž



SCeTCH Full Trial (Smoking Cessation Trial in Centres for the Homeless)₅

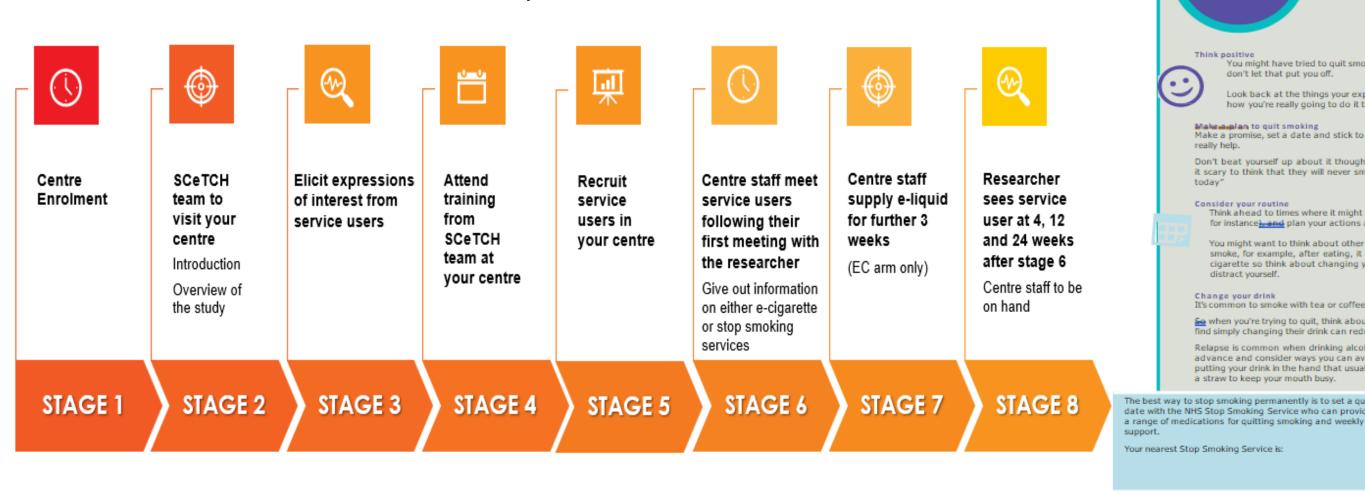
The full trial aims to determine the efficacy and cost-effectiveness of providing free EC starter kits to smokers accessing homeless centres compared with UC. This will be the first study in the world to look at this.

Key Objectives

Primary: To determine the 6-month sustained, biochemically validated abstinence rates in smokers using EC compared to smokers offered UC.

Secondary:

- 1.To compare the number reporting at least 50% smoking reduction at 24 weeks in the EC vs UC arm.
- 2.To compare the number achieving 7-day point prevalence quit rates at 4-, 12- and 24-week follow-ups in the EC vs UC arm.
- 3.To document changes in risky smoking practices (e.g., sharing cigarettes, smoking discarded cigarettes).
- 4. To determine the cost-effectiveness of the intervention
- 5.To document fidelity of intervention implementation; mechanisms of change; contextual influences and sustainability.



Method



Cluster Randomised Controlled design with mixed methods embedded process and economic evaluation in 32 homeless services across Scotland, Wales, Southwest, London, East England, and the Southeast.



> Services randomised to either the EC (EC starter kit and 4 weeks supply of e-liquid) or UC arm (leaflet & referral to SSS). 480 participants; 15 known smokers from each service assessed at



baseline and 4, 12 and 24 week follow ups. > Baseline Carbon monoxide (CO) reading, Nicotine dependence score

(FTCD) smoking & vaping history, service utilisation and general health (EQ5DL) survey

adults experiencing homelessness: a systematic review of tips to help you prevalence rates, interventions and the barriers and facilitators to quitting and staying quit. J Smok Cessat 15(2):94–108. Great Britain. Available from: https://ash.org.uk/wpdon't let that put you off. Look back at the things your experience has taught you and think about how you're really going to do it this time. 2019.pdf Make a promise, set a date and stick to it. Sticking to the "not a puff" rule can Don't beat yourself up about it though - take a day at a time - many people find it scary to think that they will never smoke again so just tell yourself "I won't smoke Consider your routine Think ahead to times where it might be difficult (with friends or after eating for instance), and plan your actions and escape routes in advance. You might want to think about other things you can do when you usually smoke, for example, after eating, it is common for people to want a cigarette so think about changing your routine and find other ways to distract yourself.

So when you're trying to quit, think about drinking more water and juice. Some people

d simply changing their drink can reduce their need to reach for a cigarette.

Hartmann-Boyce J, McRobbie H, Lindson N, Bullen C, Begh R, Theodoulou A, et al. (2020) Electronic cigarettes for smoking cessation. Cochrane Tobacco Addiction Group, editor. Cochrane Database Syst Rev.

content/uploads/2019/09/Use-of-e-cigarettes-among-adults-

Soar K, Dawkins L, Robson D, Cox S. (2020) Smoking amongst

ASH (2019) Use of e-cigarettes (vaporisers) among adults in

Dawkins L, Bauld L, Ford A, Robson D, Hajek P, Parrott S et al (2020) A cluster feasibility trial to explore the uptake and use of ecigarettes versus usual care offered to smokers attending homeless centres in Great Britain. PLoS One 23;15e0240968

Cox S, Bauld L, Brown R, Carlisle M, Ford A, Hajek P, et al (2021) Evaluating the effectiveness of e-cigarettes compared with usual care for smoking cessation when offered to smokers at homeless centres: protocol for a multi-centre cluster-randomized controlled trial in Great Britain. Addiction DOI:10.1111/add.15851











Change your drink It's common to smoke with tea or coffee or an alcoholic drink.

a straw to keep your mouth busy.

Relapse is common when drinking alcohol so try to think about this in

advance and consider ways you can avoid lighting up. For example, try putting your drink in the hand that usually holds a cigarette, or drink from











This study/project is funded by the National Institute for Health Research, Public Health Research Programme (NIHR132158). The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.