Evaluation of Patient Opinions and Experiences with Electronic Cigarettes at a Family Medicine Residency Clinic

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BACKGROUND
- Since 2003, electronic cigarettes (e-cigs) have grown in popularity.
  - They are battery operated devices that can look like a traditional cigarette or appear as a USB flash drive.
  - Aerosolized a nicotine-containing solution, to which glycol and flavoring agents are added.
- E-cigs have risen as they are often marketed as a safer, healthier alternative to smoking traditional cigarettes or as an aid for smoking cessation.
- WHO has suggested that there is a negative health impact of nicotine contained in e-cigarettes.
- Additionally, regulation was lacking in terms of manufacturing, sale to minors, advertising, and health promotion.
- Ultimately, the risks and benefits of e-cig use, as well as the beliefs that influence use or avoidance, are poorly understood.

METHODS
- A thirteen question survey regarding nicotine and e-cig use was distributed to English-speaking adult patients at Aurora St. Luke’s Family Practice Clinic, during August 2015-January 2016.
- Questions assessed (See E-Cigarette Survey):
  - Patient demographics
  - Smoking history
  - Knowledge and opinions of e-cigs
- Descriptive statistics were used to describe patient characteristics.
- Associations between patient characteristics and beliefs were analyzed using chi-squared tests and Fisher’s exact test, as appropriate. Significance was associated with p <0.05.

RESULTS
- Across respondents (N=100), patients were more likely to be female (60%) and aged 45-54 years.
- Most patients heard about e-cigs through advertisements (48.9%) or by word of mouth (36.9%).
- Many believed that e-cigs could help others quit smoking (47.6%) and were a healthier smoking option over regular tobacco (47.5%).
- Only 21.7% of patients had ever tried e-cigs.
- Age, sex, and race/ethnicity were not associated with trying e-cigs.
- Those who identified as ever-smokers were more likely to have tried e-cigs than never-smokers (p=0.044).
- Additionally, current smokers were even more likely to have tried e-cigs than former or never smokers (p=0.017).
- Smoking status was not associated with education and race/ethnicity.
- Views regarding cost and whether e-cigs were a good choice for cessation were also not associated with smoking status.

CONCLUSIONS
Smoking status significantly affects whether a patient has tried e-cigs, with current smokers being most likely to have ever tried them.

Demographic characteristics were not associated with use or opinions of e-cigs. Future studies should be done to assess use and attitudes in other clinic settings, as well as use within our adolescent patient populations.

REFERENCES

OBJECTIVE
To assess our patient populations’ perception or beliefs as they relate to e-cig use.