

# SMOKING CESSATION: A REPORT OF THE SURGEON GENERAL – Key Findings

## The 2020 Surgeon General’s Report Overview

*Smoking Cessation: A Report of the Surgeon General* is the 34th tobacco-related Surgeon General’s Report published since 1964. In 1990, the Surgeon General issued the report, *The Health Benefits of Smoking Cessation*. The 2020 report summarizes the latest evidence on the health benefits of cessation. The scientific evidence in this report supports the following key findings.

## 2020 Surgeon General’s Report Findings

- 1. Smoking cessation is beneficial at any age. Smoking cessation improves health status and enhances quality of life.**
- 2. Smoking cessation reduces the risk of premature death and can add as much as a decade to life expectancy.**
- 3. Smoking places a substantial financial burden on smokers, healthcare systems, and society. Smoking cessation reduces this burden, including smoking-attributable healthcare expenditures.**
- 4. Smoking cessation reduces risk for many adverse health effects, including reproductive health outcomes, cardiovascular diseases, chronic obstructive pulmonary disease (COPD), and cancer. Quitting smoking is also beneficial to those who have been diagnosed with heart disease and COPD.**
  - ▶ Smoking cessation reduces the risk of twelve cancers, including cancers of the lung; larynx; oral cavity and pharynx; esophagus; pancreas; bladder; stomach; colon and rectum; liver; cervix; kidney; and acute myeloid leukemia (AML).
  - ▶ Smoking cessation reduces the risk of cardiovascular morbidity and mortality and the burden of disease from cardiovascular disease.
  - ▶ Smoking cessation reduces the risk of stroke morbidity and mortality.
  - ▶ Smoking cessation reduces the risk of developing COPD in cigarette smokers.
  - ▶ Smoking cessation by pregnant women benefits their health and that of their fetuses and newborns.
- 5. More than three out of five U.S. adults who have ever smoked cigarettes have quit. Although a majority of cigarette smokers make a quit attempt each year, less than one-third use cessation medications approved by the U.S. Food and Drug Administration (FDA) or behavioral counseling to support quit attempts.**
  - ▶ Past-year quit attempts and recent and longer term cessation have increased over the past two decades among adult cigarette smokers.
  - ▶ Advice from health professionals to quit smoking has increased since 2000; however, four out of every nine adult cigarette smokers who saw a health professional during the past year did not receive advice to quit.
  - ▶ Use of evidence-based cessation counseling and/or medications has increased among adult cigarette smokers since 2000; however, more than two-thirds of adult cigarette smokers who tried to quit during the past year did not use evidence-based treatment.



- 6. Considerable disparities exist in the prevalence of smoking across the U.S. population, with higher prevalence in some subgroups. Similarly, the prevalence of key indicators of smoking cessation — quit attempts, receiving advice to quit from a health professional, and using cessation therapies — also varies across the population, with lower prevalence in some subgroups.**
  - ▶ Marked disparities in cessation behaviors, such as making a past-year quit attempt and achieving recent successful cessation, persist across certain population subgroups defined by educational attainment, poverty status, age, health insurance status, race/ethnicity, and geography.
- 7. Smoking cessation medications approved by the U.S. Food and Drug Administration (FDA) and behavioral counseling are cost-effective cessation strategies. Cessation medications approved by the FDA and behavioral counseling increase the likelihood of successfully quitting smoking, particularly when used in combination. Using combinations of nicotine replacement therapies can further increase the likelihood of quitting.**
  - ▶ Proactive quitline counseling, when provided alone or in combination with cessation medications, increases smoking cessation.
  - ▶ Short text message services about cessation are independently effective in increasing smoking cessation rates, particularly if they are interactive or tailored to individual text responses.
  - ▶ Web or Internet-based interventions increase smoking cessation and can be more effective when they contain behavior change techniques and interactive components.
  - ▶ Certain life events — including hospitalization, surgery, and lung cancer screening — can trigger attempts to quit smoking, uptake of smoking cessation treatment, and successful smoking cessation.
  - ▶ Combining short- and long-acting forms of nicotine replacement therapy increases smoking cessation compared with using single forms of nicotine replacement therapy.
- 8. Insurance coverage for smoking cessation treatment that is comprehensive, barrier-free, and widely promoted increases the use of these treatment services, leads to higher rates of successful quitting, and is cost-effective.**
  - ▶ The development and dissemination of evidence-based clinical practice guidelines increases the delivery of clinical interventions for smoking cessation.
  - ▶ Strategies that link smoking cessation-related quality measures with payments to clinicians, clinics, or health systems increase the rate of delivery of clinical treatments for smoking cessation.
  - ▶ Tobacco quitlines are an effective population-based approach to motivate quit attempts and increase smoking cessation.
- 9. E-cigarettes, a continually changing and heterogeneous group of products, are used in a variety of ways. Consequently, it is difficult to make generalizations about efficacy for cessation based on clinical trials involving a particular e-cigarette, and there is presently inadequate evidence to conclude that e-cigarettes, in general, increase smoking cessation.**
- 10. Smoking cessation can be increased by raising the price of cigarettes, adopting comprehensive smokefree policies, implementing mass media campaigns, requiring pictorial health warnings, and maintaining comprehensive statewide tobacco control programs.**