

NHS Smoking Cessation Service Statistics (Scotland)

1st January to 31st December 2008

1. Introduction

This report provides an analysis of **NHS smoking cessation services uptake and outcomes during the calendar year 1st January to 31st December 2008**. The information presented is taken from the agreed national minimum dataset for smoking cessation services (developed by PATH, part of ASH Scotland) and is **based on 'quit attempts' made** during the year (data recorded as at 1st April 2009). This is **the third annual release of statistics from the minimum dataset monitoring in Scotland**. Please note: the next annual monitoring report, for the 2009 calendar year, will be based on the revised national minimum dataset.

The primary source of the data is the National Smoking Cessation Database. The database was established by ISD Scotland in July 2005 to capture the minimum dataset information plus additional local data items and to provide local functionality such as statistical reports. It is a web-based database, accessible at present only over the NHSNet and has over 300 registered users across Scotland. **The second data source, in the case of Greater Glasgow & Clyde NHS board, is local information systems**. Data for Tayside pharmacies is also provided from a local information system.

A copy of the national minimum dataset is included at Appendix 1. and at Appendix 2. a definition of the services to be included in the national monitoring. Further background to the national monitoring and national database is available at http://www.ashscotland.org.uk/ash/ash_display.jsp?pContentID=4240&p_applic=CCC&p_service=Content.show&

2. Statistics included in the report

Presented in this report are statistics, for NHS board areas in Scotland, on **quit attempts made/quit dates set** during the 2008 calendar year. Included also are **quit outcomes based on client follow-up at one month and three months after the quit date**. The three month follow-up findings are for quit dates set during the first nine months of the year as data for the last quarter are incomplete.

The statistics are based on the 2008 calendar, rather than financial, year in line with previous national monitoring reports. Wherever possible, 2007 comparisons are included. These are based on revised 2007 figures (figures have been revised since the March 2008 publication to take account of late receipt or entry of data). The publication of this year's annual report has been moved to the end of May, from the end of March in the first two years, to improve data completeness. Even with the change of date, **2008 figures are expected to rise in future due to late receipt and entry of data**, particularly for pharmacy services in some boards.

This third national report replicates the analyses produced last year. It also includes for the first time: **estimates of the number of cases for pharmacy cessation services and non-pharmacy services in each NHS board**; quit attempts made by pharmacotherapy use; client profile analyses by NHS board and **quit outcomes based on client follow-up at 12**

months after the quit date. The latter uses data for the 2007 calendar year (12 month outcomes for the full 2008 calendar year are not yet available).

December 2007 saw the publication of a series of new HEAT targets for the NHS. One of these relates to the proportion of the smoking population in each board area supported, via cessation services, to achieve a successful one month quit - <http://www.scotland.gov.uk/Publications/2007/12/11103453/0>
The target (which covers the period 2008 to 2010) will be measured through a separate target monitoring process, using data from the national cessation services monitoring and national database.

3. Warnings on comparing data across NHS board areas

Care should be taken in comparing data across NHS board areas. The figures presented here show wide variation in uptake rates and quit rates across boards. There may be a number of explanations for this including: under-recording of data (for example, as a result of late submission, particularly in the case of pharmacy services), or reduced services being in place during the time period, e.g. due to staff absence.

There are also variations in the types of services provided in different boards. In some board areas clients of specialist smoking cessation services account for the majority of records, whilst in others most of the data comes from pharmacy services. Areas who have a large pharmacy scheme (which will tend to see large numbers of people), such as Greater Glasgow & Clyde, may have amongst the highest annual service uptake rates. Meanwhile, those where most of the data are coming from specialist cessation services (relatively fewer clients seen, but more intensive support provided), may have amongst the highest percentage quit rates.

Quit rates are calculated as the number of records where the client self-reported as 'not smoked, even a puff, in the last two weeks' (one month follow-up) or 'smoked up to five cigarettes since one month follow-up' (three and 12 month follow-up) as a percentage of total quit attempts made/quit dates set. As the denominator (as it is in the English quit rate calculations) is total quit dates set, this means that **where there are large numbers of cases 'lost to follow-up'/smoking status unknown this will greatly lower the percentage quit rate.** In Scotland, the proportion of cases 'lost to follow-up'/unknown at one month (note: the English monitoring does not include three or 12 month follow-up) is higher than the English findings. There are also NHS boards in Scotland with particularly high percentages of cases 'lost to follow-up'/unknown (see table footnotes for further explanation on this). **Care should be taken though in making direct comparisons between the Scotland and England one month quit rates.** There may be differences, for example, in the types of services included in the English monitoring, or the profile of clients seen in services.

Included in the report are statistics on CO validated quits¹, as well as self-reported quits, although care should be taken in interpreting these as there remain variations across the country in the proportion of cases where CO validation has been attempted.

¹ Carbon monoxide (CO) validation measures the level of carbon monoxide in the bloodstream and provides an indication of the level of use of tobacco.

4. Additional data warnings/data limitations

As noted above, the **data presented in this report are based on 'quit attempts' made/quit dates set during the year.** This will not include referrals or initial contacts where the client did not go on to set a quit date, or 'relapse prevention' support. The information in the report represents, therefore, only a proportion of the work of NHS smoking cessation services.

Figures are based on total quit attempts, rather than total number of clients with a quit attempt, so could include repeat quit attempts for the same client.

5. Analysis Findings

Quit attempts made

- **There were a total of 50,121 quit attempts made/quit dates set in the 12 months from 1st January to 31st December 2008** (data recorded on the national database, as at 1st April 2009, combined with data supplied from local information systems). **This compares with 44,019 quit attempts during the previous calendar year (revised 2007 figures), representing an increase of 6,102 (or 14%), see Table 1.** In 11 out of 14 NHS boards numbers were up on 2007.
- The **revised 2007 figure for the total number of quit attempts made (44,019) represents an increase of 2,595 (6%) on the previously published figure of 41,424.** Grampian, Ayrshire & Arran, Greater Glasgow & Clyde and Borders NHS boards have seen the greatest increases on their previously published 2007 figures. All have large pharmacy schemes and, as noted above, there are recognised difficulties with the late submission of data from pharmacies.
- With regard to monthly quit attempts made, **numbers were highest in January (note: the start of the year is the most popular time for people to attempt to quit, e.g. New Year's resolution), followed by February, then March, see Figure 1.** Note: figures for the latter months of the year may increase in future due to delays in receipt of data and data recording.
- **An estimated 4.8% of the smoking population made a quit attempt with an NHS smoking cessation service between 1st January and 31st December 2008 (4.2% in 2007).** This is calculated as - total quit attempts made/quit dates set as a percentage of total smokers (Scottish Household Survey estimate, 2007). Note: the 2007 figures have been recalculated using the 2007 Scottish Household Survey (previously published figures were based on the 2006 survey).
- **Service uptake rates varied considerably across NHS board areas (ranging from 1.7% in Orkney to 6.3% in Borders).** There are differences in the types of services provided in different areas. For some areas the majority of records are from specialist smoking cessation services. For others the majority of records are from pharmacies (larger numbers of people seen, but less intensive support provided).

- **Included also are statistics on quit attempts made by CHP/CHCP area².** These are based on the client's area of residence. Using Scottish Household Survey estimates (2005/2006) of smoking population in these areas estimates have been made of service uptake rates for CHPs/CHCPs. **The highest rates were found in areas in Greater Glasgow & Clyde: East Glasgow 7.0% of estimated total smokers, South East Glasgow 7.5%, and East Dunbartonshire 7.7%, Table 2.** Note: the CHP/CHCP area of the client may differ from the area in which they receive cessation support (e.g. a client attending a service in Lothian, but resident in Borders). Note: Grampian figures (Aberdeen City, Aberdeenshire and Moray CHPs) exclude pharmacy data not input to the national database (only one in five records input in the period January to March 2008 due to limited staff resources). These records are included in Table 1. only. Excluded also are 273 Greater Glasgow & Clyde records (see footnote to Table 1.).

Quit attempts made – client profile

- **Sixty per cent of quit attempts were by females and 40% males, Figure 2.** Given that adult smoking rates for males and females are similar (26% for males and 24% for females, from the 2007 Scottish Household Survey) this demonstrates a higher service uptake rate for women. Comparable figures for England (April to December 2008 quit dates) were 53% females and 47% males.
- **The under 25s age group accounted for almost 9% of quit attempts made; 25-34s 17%; 35-44 24%; 45-59 31% and 60 years plus 19%, see Figure 3.** Meanwhile, smoking prevalence estimates reveal the highest rates to be in the younger age groups, with males in the 16-24s age group having the highest prevalence of all.
- **For 90% of quit attempts the client's ethnic group was 'White-British'; 'White-Other' almost 2% ; 'Other Ethnic Group' 1% and 'unknown' almost 7%, Figure 4.** Note: according to the 2001 Census minority ethnic groups formed 2.0% of the Scottish population.
- **Eighty-eight per cent of quit attempts were for people living in urban areas and 12% rural areas³, Figure 5.** 2001 Census estimates show 81% of Scotland's population living in urban areas and 19% in rural areas. Scottish Household Survey smoking prevalence estimates also reveal relatively higher smoking prevalence in urban areas.
- **There were a total of 1,733 quit attempts made by pregnant women during 2008. This compares with 1,322 in 2007 (revised 2007 figure), an increase of 411 or 31%. An estimated 15% of all women smoking during pregnancy⁴ attempted to quit using NHS cessation services, in 2008, see Table 3.** Note: the figure of 15% is based on an estimate of 11,385 women smoking in pregnancy in 2007, the most recent year for which data are available. Please see also Appendix 3. 'Supplementary Tables' for NHS board breakdowns.

² Community Health Partnership/Community Health and Care Partnership Area.

³ Based on The Scottish Executive Urban Rural Classification (version 2005-2006).

⁴ Based on SMR02 (Scottish Morbidity Record) estimates of the number of pregnant women smoking at antenatal booking (2007).

- **An analysis of quit attempts made by SIMD deprivation category shows the largest numbers to be in the most deprived categories and the smallest in the least deprived, Figure 6⁵.** Note: Scottish Household Survey estimates (2005/2006) of smoking prevalence by deprivation quintiles give a smoking prevalence of 41% in the most deprived areas (equivalent to SIMD categories 9-10, Figure 6) and 13% in the least deprived areas (equivalent to SIMD 1-2, Figure 6). Those living in the most deprived communities (categories 9-10) account for an estimated 33% of total smokers and they account for a similar 34% of quit attempts made. Note: excludes 'unknowns'.

Quit attempts made – pharmacy smoking cessation services and other NHS cessation services

- Included this year are estimates of the percentage of quit attempts made in pharmacy settings and non-pharmacy settings. Pharmacy smoking cessation services account for the largest share of quit attempts made in some NHS boards. Pharmacies tend to see a larger number of clients, but have relatively lower percentage quit rates than, for example, specialist cessation services which provide more intensive support. **Nationally, in 2008, the estimated split was 44% of quit attempts made in pharmacies and 56% in non-pharmacy services, however, for Tayside, Greater Glasgow & Clyde, Grampian and Ayrshire & Arran between 61% and 81% of all quit attempts were in pharmacies.** Meanwhile in Orkney, Shetland, Western Isles, Dumfries & Galloway and Highland it was between 0% and 6%, see Table 4.

Quit attempts made – pharmacotherapy used

- **The largest share of quit attempts, 34,537 or 70%, involved the use of NRT (nicotine replacement therapy) only; Varenicline (Champix) 8,579 or 17%; NRT and Varenicline (i.e. change in product) 292 or almost 1.0%; Bupropion 187 cases and NRT and Bupropion (change in product) 28 cases.** A further 1,561 quit attempts (3%) were recorded as pharmacotherapy 'none' **and 4,396 or 9% pharmacotherapy details unknown, Figure 7.** Please see also Appendix 3. 'Supplementary Tables' for NHS board breakdowns.

Outcomes – at one and three months after the 'quit date'

- **Of the 50,121 quit attempts made between 1st January and 31st December 2008, there were 49,580 for which one month follow-up data were available** (excludes: 268 Grampian pharmacy records – only one in five records entered onto the national database between January and March 2008 due to limited admin. resources; and 273 Greater Glasgow & Clyde records for the period January to April 2008 for which only limited aggregate statistics were available, see footnotes to Table 1). **Of these, 18,679 were recorded as successful quits.** This figure is based on client self-reported 'not smoked, even a puff, in the last two weeks'. Follow-up may have been undertaken 'face to face', by telephone or by letter/written questionnaire. **Of the remaining 30,901 cases 16,588 had smoked in the last two weeks and 14,313 were 'lost to**

⁵ The SIMD (Scottish Index of Multiple Deprivation) 2006 10 deciles classification has been calculated using datazone information (converted from the client's full postcode, which is part of the national minimum dataset).

follow-up'/unknown, see Table 5. The latter will include a small proportion of cases (around 1% of the total) where client did not consent to follow-up or client had died. More commonly 'lost to follow-up'/unknown will be due to failure to make contact with the client/non-return of follow-up questionnaire; or more administrative factors such as late receipt of initial quit information (i.e. not received in time to conduct one month follow-up); or follow-ups not undertaken or not recorded/not yet recorded, for example as a result of resource shortages. **The total of 18,679 one month quits (self-reported) in 2008 represents an increase from 15,309 in 2007 (a rise of 3,370 or 22.0%).**

- **The Scotland percentage quit rate at one month (self-reported) was 38%, with 33% still smoking and 29% 'lost to follow-up'/smoking status unknown. This compares with 38%, 34% and 28% respectively in 2007 (revised 2007 figures).** The most recent English monitoring figures show a one month percentage quit rate of 50%, with 27% still smoking and 23% 'lost to follow-up'/unknown. As noted earlier, care should be taken in making direct comparisons between the Scotland and England one month quit rates. It is important to note too, in relation to the lost to follow-ups/unknowns, that **in Greater Glasgow & Clyde clients no longer in service/not contactable are assumed to have relapsed. The 'true' percentage of cases, in Scotland, lost to follow-up/smoking status unknown is estimated at 46%** (see Greater Glasgow & Clyde footnote to Table 5. for estimates of the number of cases lost to follow-up/unknown).
- **As with service uptake, there was wide variation across the country in one month quit rates. The highest quit rates (self-reported) were 50% in Shetland, 52% in Forth Valley and 58% in Western Isles**, see Table 5. Differences in the types of services provided is likely to influence this (e.g. support provided by pharmacies is less intensive than that offered by specialist services, so for boards with large pharmacy schemes overall percentage quit rates may be lower). **It is especially important to be aware of the influence of cases 'lost to follow-up'/unknown on quit rates.** For pharmacy services in particular, continuing difficulties with late receipt of quit attempt records has at times resulted in it being too late to undertake one month follow-up in some board areas. **The four NHS boards with the lowest self-reported one month quit rates (Grampian, Tayside, Greater Glasgow & Clyde and Ayrshire & Arran) all have large pharmacy schemes.** Note: only a small number of 'lost to follow-ups' recorded for Greater Glasgow & Clyde (if client has withdrawn from service or cannot be contacted it is assumed they have relapsed/are still smoking).
- **Calculating the one month success rate as a percentage of total estimated smokers in the population, the best performing boards were Highland, Lanarkshire and Borders** achieving one month quits for an estimated 2.4%, 2.6% and 2.9% of their respective smoking populations (Scotland 1.8%), see Table 5.
- Of the **total 18,679 'self-reported' one months quits in Scotland in 2008, 5,484 (29%) were in pharmacy services and 13,195 (71%) in non-pharmacy NHS cessation services.** The percentage quit rate at one month was 25% for pharmacy services and 48% for non-pharmacy services, see Tables 6 and 7.

- Based on 'self-reported' quits, 38% of quit attempts were successful at one month. **Using the CO validated quit findings this reduces to 23% (most recent English figure – 33% and Scotland 2007 figure 26%), but there remain a relatively high proportion of cases where a reading was not taken, Table 8.**
- **The highest percentage CO validated one month quit rates for NHS board areas were: 33% in Shetland and 38% in Lanarkshire.**
- **From a total of 38,744 quit attempts made/quit dates set between 1st January and 30th September 2008, 14,593 were recorded as successful quits at one month follow-up and 6,970 still quit at three months (comprises: 6,543 not smoked since one month follow-up and 427 'smoked up to 5 cigarettes'). Of the remaining 7,623 cases, 2,054 had relapsed (over 5 cigarettes smoked since one month follow-up) and 5,569 were 'lost to follow-up'/unknown (see Table 9.). Note: the time period is January to September 2008 as three month follow-up data for the whole year is not yet complete. As with one month follow-up, figures are based on client self-reported smoking status, but **the definition of a quit at three months is 'smoked up to 5 cigarettes since one month follow-up'**. The clients eligible for follow-up at three months (according to the PATH minimum dataset guidelines) are those recorded as a successful quit at one month.**
- **The Scotland percentage quit rate at three months was 18% (19% in 2007, for the same nine month period). This is based on a denominator of all quit dates set during the time period, i.e. Jan. to Sep. 2008 (but excluding the Grampian pharmacy data not input to the national database and the Greater Glasgow & Clyde data supplied as aggregate statistics, see Table 1.).** Reasons for a drop-off in quit rates between one and three months would be: clients resuming smoking again, unable to contact client/non-response and for a small number of clients 'no consent to follow-up' or 'client died'. As at one month follow-up, however, **follow-ups not undertaken/information not recorded, or not yet recorded (e.g. due to limited admin. resources or late receipt of data) is also a factor.**
- **The highest three month percentage quit rates for NHS boards were: 28% in Dumfries & Galloway, Forth Valley and Highland; and 38% in Western Isles.**

12 month outcomes

- Included for the first time in this year's annual report **are quit outcomes based on client follow-up at 12 months after the quit date.** These use **data for the 2007 calendar year** (12 month outcomes for the full 2008 calendar year are not yet available). There were a total of 44,019 quit attempts made in 2007 (revised 2007 figures). **For 39,999 of these cases follow-up information was available** (excludes 4,020 Grampian pharmacy records – only one in five records entered onto the national database due to limited admin. resources). **Of these, 15,309 were recorded as a successful quit at one month (self-reported), 7,680 were recorded as quit at 3 months and 3,381 quit at 12 months. This represents a quit rate of 38% at one month, reducing to 19% at three months and 8% at 12 months.** As noted above, the reduction in quit rates between one and three months will be due to a combination of: clients relapsing and cases 'lost to follow-up'/smoking status unknown.

Similarly, the drop-off in quit rates between three and 12 months (from 19% down to 8% in 2007) will reflect a mix of client relapse and 'lost to follow-up'/unknown. **The cumulative percentages of cases 'lost to follow-up'/smoking status unknown at one, three and 12 months were 28%, 41% and 44% respectively, see Figure 8.**

Table 1. Number of quit attempts made/quit dates set (1st January to 31st December 2008) by NHS board*

NHS Board	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total ¹	Estimated total	Estimated annual	2007 figures (revised)	
														smokers (Scottish Household Survey, SHS, 2007)	service uptake rate (% of total smokers - SHS, 2007)	Total Quit attempts & % of total smokers – SHS, 2007	
Ayrshire & Arran	358	301	360	256	258	235	274	223	183	240	209	120	3017	70402	4.3%	2888	4.1%
Borders	163	136	100	100	112	87	61	65	90	92	87	60	1153	18283	6.3%	1106	6.0%
Dumfries & Galloway	150	146	148	165	155	124	107	85	101	122	154	92	1549	35378	4.4%	1243	3.5%
Fife	321	327	257	262	228	247	193	213	203	190	191	153	2785	73831	3.8%	2495	3.4%
Forth Valley	163	133	209	168	150	138	104	128	182	239	252	122	1988	64021	3.1%	1215	1.9%
Grampian ²	542	492	487	485	451	412	403	317	379	318	329	127	4742	93092	5.1%	5641	6.1%
Greater Glasgow & Clyde ³	1838	1651	1538	1547	1221	1257	1284	1200	1463	1331	1250	323	15903	263042	6.0%	14467	5.5%
Highland	246	277	225	180	208	180	208	214	232	257	288	136	2651	54923	4.8%	1855	3.4%
Lanarkshire	828	729	573	674	446	465	611	617	549	810	884	375	7561	136232	5.6%	6162	4.5%
Lothian	502	468	486	457	423	442	396	368	471	539	528	375	5455	144832	3.8%	3785	2.6%
Orkney	2	10	6	7	2	4	0	4	1	4	3	1	44	2663	1.7%	54	2.0%
Shetland ⁴	15	8	7	17	9	8	6	2	3	7	2	2	86	2559	3.4%	123	4.8%
Tayside ⁵	391	280	332	273	236	235	231	220	266	224	201	152	3041	79847	3.8%	2967	3.7%
Western Isles ⁶	9	9	8	8	9	17	15	12	12	24	13	10	146	4653	3.1%	18	0.4%
Scotland	5528	4967	4736	4599	3908	3851	3893	3668	4135	4397	4391	2048	50121	1043755	4.8%	44019	4.2%

Notes

¹ Figures for latter part of the year and 2008 total are expected to increase in future due to reported delays in some areas in receipt of data/data recording, particularly in relation to pharmacy records.

² Grampian – one in five pharmacy records (pharmacies accounting for majority of Grampian records) input to national database between Jan. and Mar. 2008, due to limited staff resources. For Table 1. only, pharmacy cases for that period have been multiplied by five to ensure all 2008 quit attempts are counted.

³ Greater Glasgow & Clyde - data provided from local information systems. Pharmacy service accounts for majority of records. For Table 1. only, figures include 273 cases for the period Jan. to Apr. for Inverclyde and Renfrewshire supplied as aggregate statistics (not recorded in detail on local or national info. systems).

⁴ Shetland – lowest % smoking prevalence of any NHS board (SHS) and services working now with those who are 'harder to reach' or less interested in quitting.

⁵ Tayside - Includes data from the national database, plus pharmacy service data which are provided from a local information system.

⁶ Western Isles – under-recording of data in 2007.

* Number of quit attempts rather than number of clients with a quit attempt, so could include repeat quit attempts for the same client

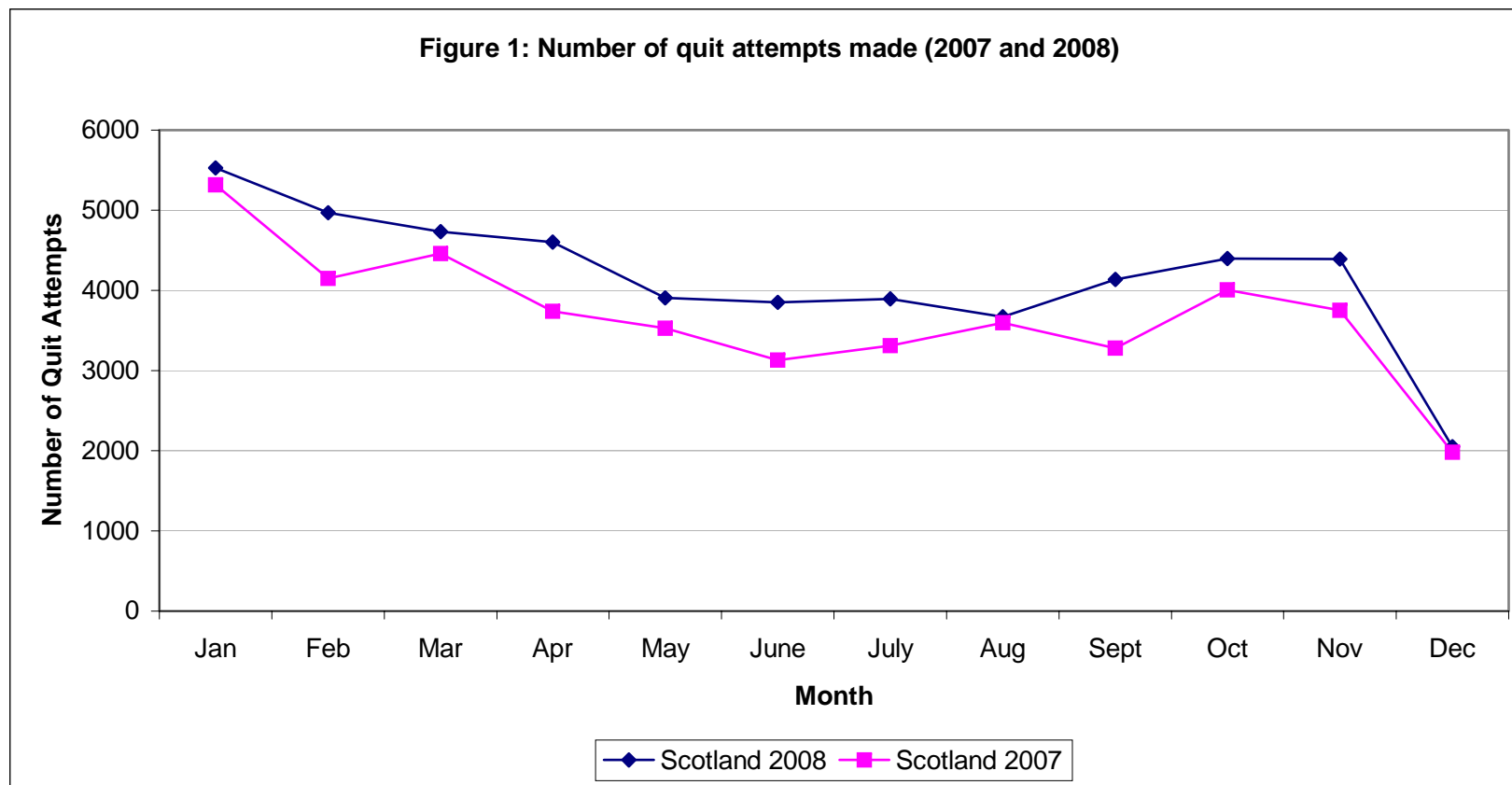


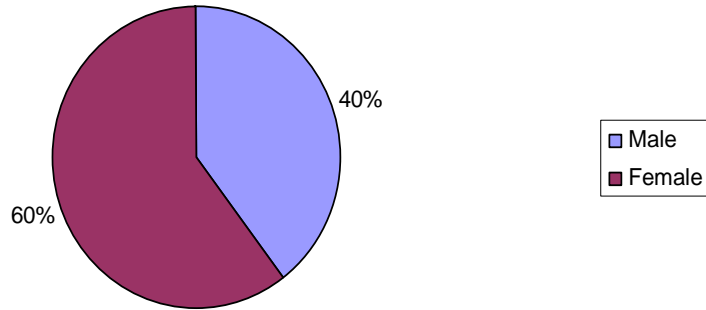
Table 2. Number of quit attempts made/quit dates set (1st January to 31st December 2008) by CHP/CHCP Area

Community Health Partnership/Community Health and Care Partnership	Quit attempts made/quit dates set (2008)	Estimated total smokers (Scottish Household Survey, SHS, 2005-2006) ¹	Estimated annual service uptake rate (% of total smokers - SHS)
Aberdeen City Community Health Partnership	1777	40694	4.4%
Aberdeenshire Community Health Partnership	2091	37032	5.6%
Angus Community Health Partnership	1030	19386	5.3%
Argyll & Bute Community Health Partnership	496	20862	2.4%
Clackmannanshire Community Health Partnership	454	11492	4.0%
Dumfries & Galloway Community Health Partnership	1542	30004	5.1%
Dundee Community Health Partnership	1163	33517	3.5%
Dunfermline & West Fife Community Health Partnership	1743	32498	5.4%
East Ayrshire Community Health Partnership	993	25587	3.9%
East Dunbartonshire Community Health Partnership	1043	13595	7.7%
East Glasgow Community Health & Care Partnership	2519	35732	7.0%
East Lothian Community Health Partnership	299	15321	2.0%
East Renfrewshire Community Health & Care Partnership	560	10094	5.5%
Edinburgh Community Health Partnership	2826	83047	3.4%
Falkirk Community Health Partnership	864	31775	2.7%
Glenrothes & North East Fife Community Health Partnership	442	25161	1.8%
Inverclyde Community Health Partnership	801	18977	4.2%
Kirkcaldy & Levenmouth Community Health Partnership	640	24310	2.6%
Mid Highland Community Health Partnership	623	15821	3.9%
Midlothian Community Health Partnership	562	16463	3.4%
Moray Community Health & Social Care Partnership	556	16505	3.4%
North Ayrshire Community Health Partnership	1518	29323	5.2%
North Glasgow Community Health & Care Partnership	1441	29491	4.9%
North Highland Community Health Partnership	302	6399	4.7%
North Lanarkshire Community Health Partnership	4711	84610	5.6%
Orkney Community Health Partnership	43	3115	1.4%
Perth & Kinross Community Health Partnership	787	28733	2.7%
Renfrewshire Community Health Partnership	1179	34074	3.5%
Scottish Borders Community Health & Care Partnership	1116	20817	5.4%
Shetland Community Health Partnership	67	3306	2.0%
South Ayrshire Community Health Partnership	539	23875	2.3%
South East Glasgow Community Health & Care Partnership	1689	22454	7.5%
South East Highland Community Health Partnership	1080	15992	6.8%
South Lanarkshire Community Health Partnership	4031	62138	6.5%
South West Glasgow Community Health & Care Partnership	2092	32630	6.4%
Stirling Community Health Partnership	581	17059	3.4%
West Dunbartonshire Community Health Partnership	986	22412	4.4%
West Glasgow Community Health & Care Partnership	1827	30265	6.0%
West Lothian Community Health & Care Partnership	1584	37096	4.3%
Western Isles Community Health & Social Care Partnership	149	4858	3.1%
Unknown	834	-	-
Scotland	49580	1069764	4.6%

Notes

¹ Care should be taken with interpretation for the smaller areas as sample sizes will be small.

Figure 2: Quit attempts made, by gender (Scotland, 2008)



Note: excludes 0.3% of cases 'unknown'.

Figure 3: Quit attempts made by age group (Scotland, 2008)

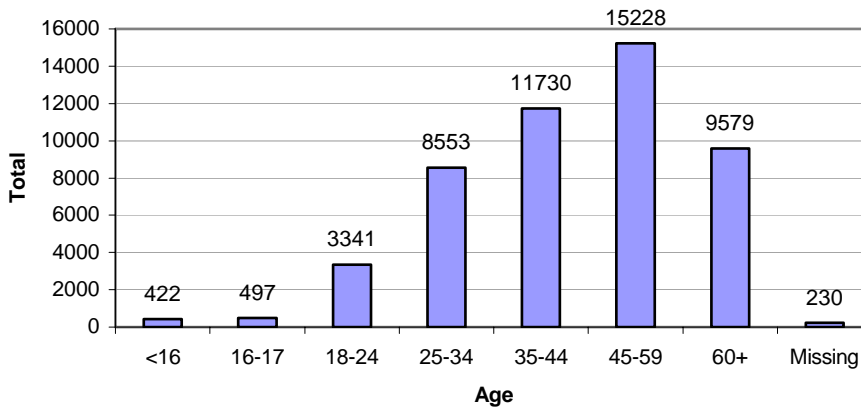
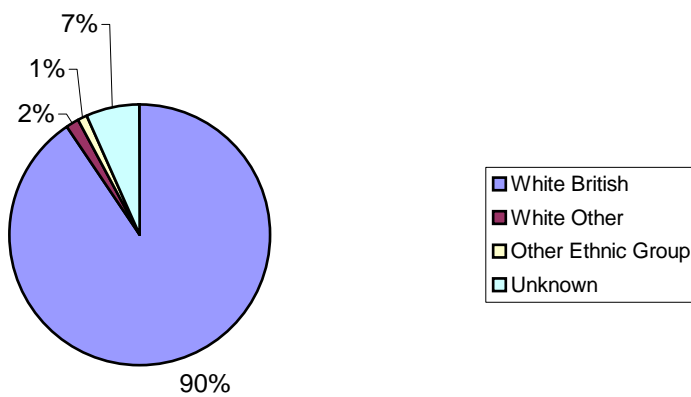
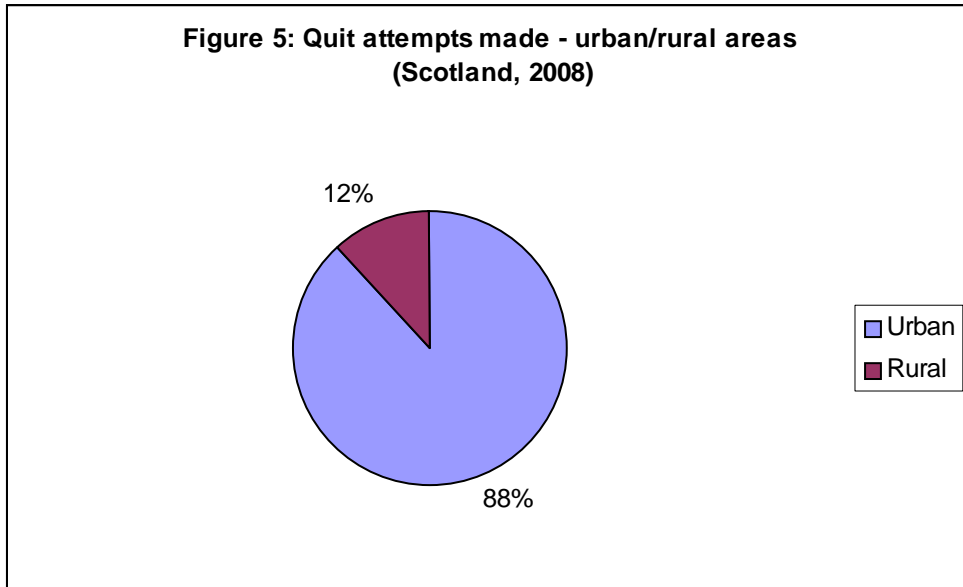


Figure 4: Quit attempts made by ethnic group (Scotland, 2008)

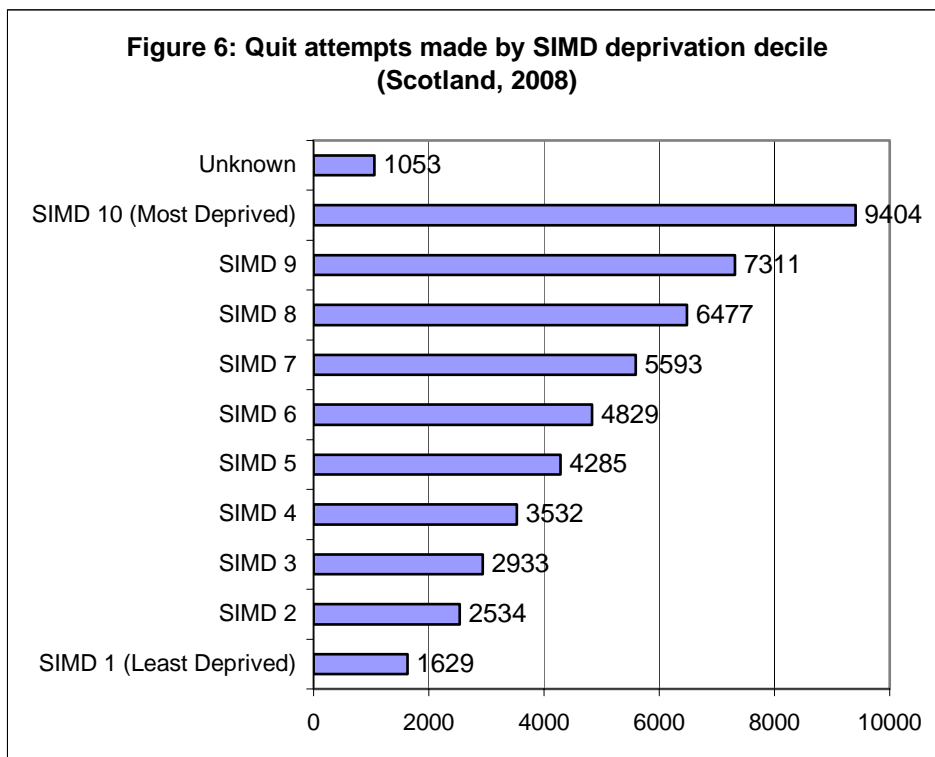




Note: excludes 2% of cases 'unknown'.

Table 3. Quit attempts made – pregnant females (Scotland, 2008)

	Quit attempts made (2008)	Women smoking in pregnancy (SMR02, 2007)	Estimated % of pregnant smokers attempting to quit using NHS cessation services	Quit attempts made (2007)
Pregnant Females	1733	11385	15%	1,322



Note: The SIMD (Scottish Index of Multiple Deprivation) 2006 10 deciles classification has been calculated using datazone information (converted from the client's full postcode, which is part of the national minimum dataset).

Table 4. Quit attempts made in pharmacy services and in non-pharmacy NHS cessation services (NHS Boards, 2008)

NHS Board	Pharmacy	Non-pharmacy	Total NHS Board
Ayrshire & Arran	81%	19%	100%
Borders	42%	58%	100%
Dumfries & Galloway	6%	94%	100%
Fife	18%	82%	100%
Forth Valley	27%	73%	100%
Grampian	79%	21%	100%
Greater Glasgow & Clyde	71%	29%	100%
Highland	6%	94%	100%
Lanarkshire	8%	92%	100%
Lothian	14%	86%	100%
Orkney	0%	100%	100%
Shetland	0%	100%	100%
Tayside	61%	39%	100%
Western Isles	3%	97%	100%
Scotland	44%	56%	100%

Note: pharmacy cases identified via 'pharmacy' clinic type for those boards that have a separate pharmacy clinic. For the others, pharmacy cases have been identified using 'intervention' and 'location' information. From January 2009 with the introduction of the revised national minimum dataset it will be easier to separate out the pharmacy and non-pharmacy cases.

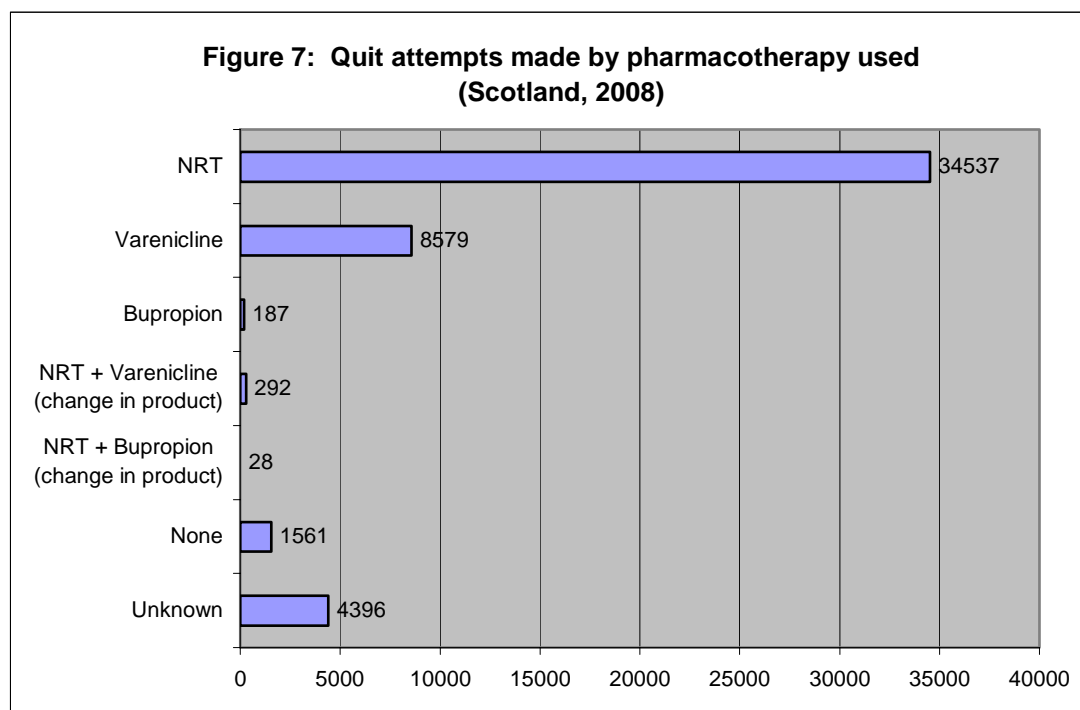


Table 5. Quit numbers and rates, self-reported, at one month, by NHS board (1st Jan. to 31st Dec. 2008 quit dates)

	Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self-reported - had smoked in last 2 weeks)		Lost to follow- up/smoking status unknown ¹		2007 figures Quit at 1 month		2008 total quit attempts	Successful quits, in 2008, as % of total estimated smoking population (SHS, 2007)
	Number	%	Number	%	Number	%	Number	%		
England ²		50%		27%		23%		50%		
NHS Board										
Ayrshire & Arran ³	1047	35%	65	2%	1905	63%	822	28%	3017	1.5%
Borders	528	46%	248	22%	377	33%	487	44%	1153	2.9%
Dumfries & Galloway	645	42%	410	26%	494	32%	504	41%	1549	1.8%
Fife	1328	48%	684	25%	773	28%	1137	46%	2785	1.8%
Forth Valley	1039	52%	287	14%	662	33%	807	66%	1988	1.6%
Grampian ⁴	836	19%	400	9%	3238	72%	305	19%	4474	0.9%
Greater Glasgow & Clyde ⁵	5082	33%	10532	67%	16	0%	4805	33%	15630	1.9%
Highland	1301	49%	563	21%	787	30%	852	46%	2651	2.4%
Lanarkshire	3599	48%	1445	19%	2517	33%	3144	51%	7561	2.6%
Lothian	2287	42%	1173	22%	1995	37%	1509	40%	5455	1.6%
Orkney	17	39%	7	16%	20	45%	21	39%	44	0.6%
Shetland	43	50%	24	28%	19	22%	59	48%	86	1.7%
Tayside ⁶	843	28%	715	24%	1483	49%	850	29%	3041	1.1%
Western Isles	84	58%	35	24%	27	18%	7	39%	146	1.8%
Scotland	18679	38%	16588	33%	14313	29%	15309	38%	49580	1.8%

Notes

¹ As well as clients not able to be contacted/client non-response (and a small % of cases 'client died' or 'no consent to follow-up'), 'lost to

follow-up'/unknown will include records for which 1 month follow-up data was not recorded or follow-up not undertaken (e.g. as a result of late receipt of initial quit attempt information, or resource shortages).

² England – based on data for the period April to December 2008, and April to September 2007.

³ Ayrshire & Arran – majority of records are for pharmacy services. The high percentage of cases 'lost to follow-up'/unknown is due to late receipt of pharmacy quit attempt records (i.e. too late for 1 month follow-up to be undertaken) and also limited admin. resources resulting in a backlog in data entry. Pharmacy advisors for Ayrshire & Arran are working closely with the Fresh Air-shire team and pharmacists to come to a solution for this.

⁴ Grampian – excludes pharmacy records not entered onto the national database – see footnote at Table 1. High proportion of cases 'lost to follow-up'/unknown is due to non-return of client 1 month follow-up questionnaires prior to introduction of telephone follow-ups.

⁵ Greater Glasgow & Clyde – clients no longer in service/not contactable are assumed to have relapsed. These clients account for an estimated 80% of all clients recorded as smokers at 1 month. Excluding these cases from the 'smokers' column and including in the 'lost to follow-up' /smoking status unknown would give an estimated 'lost to follow-up'/unknown smoking status figure of 60% for Greater Glasgow & Clyde pharmacy cessation services, 38% for non-pharmacy cessation services and 54% for all Greater Glasgow & Clyde services. Also, does not include 211 quits supplied as aggregate statistics from Inverclyde & Renfrewshire, due to service redesign, see Table 1. footnote.

⁶ Tayside – majority of 'lost to follow-ups'/unknowns are pharmacy clients.

Table 6. Quit numbers and rates, self-reported, at one month – Pharmacy services (1st January to 31st December 2008 quit dates)

NHS Board	Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self-reported - had smoked in last 2 weeks)		Lost to follow- up/smoking status unknown	
	Number	%	Number	%	Number	%
Ayrshire & Arran	648	26%	35	1%	1768	72%
Borders	218	45%	56	11%	213	44%
Dumfries & Galloway	24	26%	43	46%	27	29%
Fife	193	40%	147	30%	148	30%
Forth Valley	196	37%	35	7%	303	57%
Grampian	394	11%	283	8%	2853	81%
Greater Glasgow & Clyde	3025	27%	8034	73%	4	0%
Highland	38	24%	70	44%	52	33%
Lanarkshire	176	30%	79	14%	326	56%
Lothian	177	24%	98	13%	472	63%
Orkney	0	-	0	-	0	-
Shetland	0	-	0	-	0	-
Tayside	394	21%	396	21%	1063	57%
Western Isles	1	20%	1	20%	3	60%
Scotland	5484	25%	9277	42%	7232	33%

Notes

See notes at Table 4 and Table 5.

Table 7. Quit numbers and rates, self-reported, at one month – Non-pharmacy services (1st January to 31st December 2008 quit dates)

NHS Board	Quit at 1 month (self- reported - not smoked in last 2 weeks)		Smoking at 1 month (self-reported - had smoked in last 2 weeks)		Lost to follow- up/smoking status unknown	
	Number	%	Number	%	Number	%
Ayrshire & Arran	399	70%	30	5%	137	24%
Borders	310	47%	192	29%	164	25%
Dumfries & Galloway	621	43%	367	25%	467	32%
Fife	1135	49%	537	23%	625	27%
Forth Valley	843	58%	252	17%	359	25%
Grampian	442	47%	117	12%	385	41%
Greater Glasgow & Clyde	2057	45%	2498	55%	12	0%
Highland	1263	51%	493	20%	735	30%
Lanarkshire	3423	49%	1366	20%	2191	31%
Lothian	2110	45%	1075	23%	1523	32%
Orkney	17	39%	7	16%	20	45%
Shetland	43	50%	24	28%	19	22%
Tayside	449	38%	319	27%	420	35%
Western Isles	83	59%	34	24%	24	17%
Scotland	13195	48%	7311	27%	7081	26%

Notes

See notes at Table 4 and Table 5.

Table 8. Quit numbers and rates, CO validated, at one month, by NHS board area (based on 1st January to 31st December 2008 quit dates)

	Quit confirmed by CO reading? Numbers ¹			Quit confirmed by CO reading? Percentages ²		Total self-reported quit at 1 month
	Yes	No	CO Reading not taken /unknown	Yes	No	
England ³				33%		
NHS Board						
Ayrshire & Arran	907	4	136	30%	0%	1047
Borders	166	23	339	14%	2%	528
Dumfries & Galloway	461	7	177	30%	0%	645
Fife	828	6	494	30%	0%	1328
Forth Valley	534	10	495	27%	1%	1039
Grampian	304	13	519	7%	0%	836
Greater Glasgow & Clyde	3648	89	1345	23%	1%	5082
Highland	621	24	656	23%	1%	1301
Lanarkshire	2894	41	664	38%	1%	3599
Lothian	1101	70	1116	20%	1%	2287
Orkney	10	0	7	23%	0%	17
Shetland	28	1	14	33%	1%	43
Tayside ⁴	26	11	806	1%	0%	843
Western Isles	12	5	67	8%	3%	84
Scotland	11540	304	6835	23%	1%	18679

Notes

¹ Numbers in this column total self-reported quits at 1 month (final column).

² Percentages are based on total quit attempts made during the year.

³ England – based on data for the period April to December 2008.

⁴ Tayside – CO validated quit information for pharmacy clients is not available centrally. Tayside pharmacy smoking cessation services routinely monitor CO readings for quit attempts and record these on client profiles held within the pharmacies.

Table 9. Quit numbers and rates, self-reported, at three months, by NHS board (based on 1st Jan. to 30th Sep. 2008 quit dates) *

NHS Board	Not smoked since 1 month follow-up		Smoked 5 or less cigarettes		Smoked over 5 cigarettes		Lost to follow-up/unknown ¹		Total quit dates set Jan to Sept 08	Self reported quit at 1 month (quit dates Jan to Sept 08)
	Number	%	Number	%	Number	%	Number	%		
Ayrshire & Arran ²	233	10%	20	1%	18	1%	587	24%	2448	858
Borders	150	16%	10	1%	37	4%	224	25%	914	421
Dumfries & Galloway	291	25%	41	3%	76	6%	78	7%	1181	486
Fife	484	22%	50	2%	145	6%	379	17%	2251	1058
Forth Valley	361	26%	29	2%	109	8%	283	21%	1375	782
Grampian	154	4%	11	0%	58	2%	411	11%	3700	634
Greater Glasgow & Clyde ³	2058	16%	0	0%	561	4%	1540	12%	12726	4159
Highland	488	25%	64	3%	176	9%	277	14%	1970	1005
Lanarkshire	1347	25%	71	1%	685	12%	647	12%	5492	2750
Lothian	548	14%	56	1%	106	3%	920	23%	4013	1630
Orkney	7	19%	0	0%	0	0%	6	17%	36	13
Shetland	11	15%	6	8%	7	9%	14	19%	75	38
Tayside	377	15%	65	3%	72	3%	189	8%	2464	703
Western Isles	34	34%	4	4%	4	4%	14	14%	99	56
Scotland	6543	17%	427	1%	2054	5%	5569	14%	38744	14593

Notes

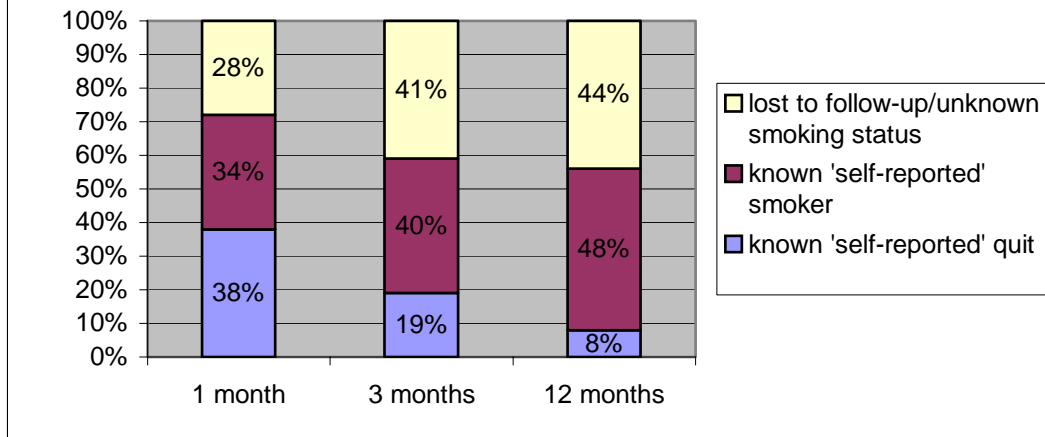
¹ As well as clients not able to be contacted/client non-response (and a small % of cases 'client died' or 'no consent to follow-up'), 'lost to follow-up'/unknown smoking status will include records for which 3 month follow-up data was not recorded or follow-up not undertaken (e.g. as a result of resource shortages).

² Ayrshire & Arran - late receipt of pharmacy quit attempt records and also limited admin. resources leading to a backlog in data entry resulted in the majority of cases being recorded as 'lost to follow-up'/unknown at one month. This also impacts on 3 month follow-up.

³ Greater Glasgow & Clyde – figures for 'not smoked at all' and 'smoked up to 5 cigarettes' are combined, in column one.

* Percentages are based on a denominator of all quit dates set in the time period. Numbers are based on only clients self-reporting as not smoking at 1 month.

Figure 8: Cumulative quit outcomes at 1, 3 and 12 months after 'quit date' (Scotland,2007)*



* Percentages, at each follow-up stage, are based on a denominator of all quit dates set in the time period.

Notes

1 Definition of a 'self-reported' quit at 1 month is 'not smoked, even a puff, in last 2 weeks' and at 3 and 12 months 'smoked up to 5 cigarettes since 1 month follow-up'.

2 Re eligibility for follow-up - all quit attempts are eligible for follow-up at 1 month after quit date, at the 3 month follow-up it is just those recorded as a successful quit at 1 month, and at 12 months it is all cases recorded as a successful quit at 3 months or 'lost to follow-up'/unknown smoking status when followed up at 3 months.

3 As noted at Table 5., in Greater Glasgow & Clyde all clients no longer in service/not contactable at 1 month are assumed to have relapsed/are recorded as a smoker.

Appendix 1.

The National Minimum Dataset for NHS Smoking Cessation Services

For office use only										
1. Client ID:										
2. Health Board area:	3. Clinic area/type									
Client Information										
4. Full postcode:	5. Date of Birth: __/__/__ and/or Age _____	6. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female								
7. If female, pregnant? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unknown		8. Does client receive free prescriptions? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unknown								
9. Employment status? (please tick one box)										
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 2px;"> <input type="checkbox"/> In paid employment <input type="checkbox"/> Homemaker/full-time parent or carer <input type="checkbox"/> Retired <input type="checkbox"/> Not known/Missing <input type="checkbox"/> Other (please specify) _____ </td> <td style="width: 50%; vertical-align: top; padding: 2px;"> <input type="checkbox"/> Full-time student <input type="checkbox"/> Unemployed <input type="checkbox"/> Permanently sick or disabled </td> </tr> </table>			<input type="checkbox"/> In paid employment <input type="checkbox"/> Homemaker/full-time parent or carer <input type="checkbox"/> Retired <input type="checkbox"/> Not known/Missing <input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> Full-time student <input type="checkbox"/> Unemployed <input type="checkbox"/> Permanently sick or disabled						
<input type="checkbox"/> In paid employment <input type="checkbox"/> Homemaker/full-time parent or carer <input type="checkbox"/> Retired <input type="checkbox"/> Not known/Missing <input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> Full-time student <input type="checkbox"/> Unemployed <input type="checkbox"/> Permanently sick or disabled									
10. Which of the following best describes the client's ethnic origin? (Ask client to choose one section from A-G, and then tick one box only within that section):										
<table style="width: 100%; border: none;"> <tr> <td style="width: 25%; vertical-align: top; padding: 2px;"> A. White <input type="checkbox"/> Scottish <input type="checkbox"/> Other British <input type="checkbox"/> Irish <input type="checkbox"/> Any other white background (Please specify) _____ </td> <td style="width: 25%; vertical-align: top; padding: 2px;"> B. Mixed Background <input type="checkbox"/> White & Black Caribbean <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Asian <input type="checkbox"/> Any other mixed background (Please specify) _____ </td> <td style="width: 25%; vertical-align: top; padding: 2px;"> C. Asian, Asian Scottish or Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Asian background (Please specify) _____ </td> <td style="width: 25%; vertical-align: top; padding: 2px;"> D. Black, Black Scottish or Black British <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any other Black background (Please specify) _____ </td> </tr> <tr> <td style="padding: 2px;"> E. Other Ethnic Background (Please specify) _____ </td> <td colspan="3" style="padding: 2px;"> F. Not Disclosed <input type="checkbox"/> G. Unknown <input type="checkbox"/> </td> </tr> </table>			A. White <input type="checkbox"/> Scottish <input type="checkbox"/> Other British <input type="checkbox"/> Irish <input type="checkbox"/> Any other white background (Please specify) _____	B. Mixed Background <input type="checkbox"/> White & Black Caribbean <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Asian <input type="checkbox"/> Any other mixed background (Please specify) _____	C. Asian, Asian Scottish or Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Asian background (Please specify) _____	D. Black, Black Scottish or Black British <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any other Black background (Please specify) _____	E. Other Ethnic Background (Please specify) _____	F. Not Disclosed <input type="checkbox"/> G. Unknown <input type="checkbox"/>		
A. White <input type="checkbox"/> Scottish <input type="checkbox"/> Other British <input type="checkbox"/> Irish <input type="checkbox"/> Any other white background (Please specify) _____	B. Mixed Background <input type="checkbox"/> White & Black Caribbean <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Asian <input type="checkbox"/> Any other mixed background (Please specify) _____	C. Asian, Asian Scottish or Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Asian background (Please specify) _____	D. Black, Black Scottish or Black British <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any other Black background (Please specify) _____							
E. Other Ethnic Background (Please specify) _____	F. Not Disclosed <input type="checkbox"/> G. Unknown <input type="checkbox"/>									
Tobacco Use and Quit Attempts										
11. On average, how many cigarettes does the client usually smoke per day?	12. How soon after waking does the client usually smoke their first cigarette?									
<input type="checkbox"/> 10 or less <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-30 <input type="checkbox"/> More than 30 <input type="checkbox"/> Unknown	<input type="checkbox"/> Within 5 minutes <input type="checkbox"/> 6-30 minutes <input type="checkbox"/> 31-60 minutes <input type="checkbox"/> After 60 minutes <input type="checkbox"/> Unknown									
13. How easy or difficult would the client find it to go without smoking for a whole day?	14. How many times has the client tried to quit smoking in the past year?									
<input type="checkbox"/> Very Easy <input type="checkbox"/> Fairly Easy <input type="checkbox"/> Fairly Difficult <input type="checkbox"/> Very Difficult <input type="checkbox"/> Unknown	<input type="checkbox"/> No quit attempts <input type="checkbox"/> Once <input type="checkbox"/> 2 or 3 times <input type="checkbox"/> 4 or more times <input type="checkbox"/> Unknown									

15. Quit date __/__/__	
1 month follow up (for office use only)	
16. Client Contacted for 1 month follow up? <input type="checkbox"/> Yes <input type="checkbox"/> No (Client lost to Follow up) <input type="checkbox"/> No (Client did not consent to follow up) <input type="checkbox"/> No (Client Died) <input type="checkbox"/> Unknown Please now complete questions 17-21	
17. Date Follow up carried out: _____ dd/mm/yyyy	
18. Smoked in the Last 2 weeks? <input type="checkbox"/> Yes <input type="checkbox"/> No (please conduct 3 and 12 month follow up) <input type="checkbox"/> Unknown	
19. CO reading confirms quit? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> CO reading not taken	
20. Interventions used in this quit attempt: <input type="checkbox"/> Group Support <input type="checkbox"/> One to One sessions <input type="checkbox"/> Pharmacy scheme incl. Support <input type="checkbox"/> Buddy scheme <input type="checkbox"/> Telephone Support <input type="checkbox"/> Couple/family based support <input type="checkbox"/> Other (please specify) _____ <input type="checkbox"/> Unknown	
21. NRT and/or Bupropion used in this quit attempt: <input type="checkbox"/> NRT only <input type="checkbox"/> Bupropion <input type="checkbox"/> Both NRT and Bupropion <input type="checkbox"/> Neither <input type="checkbox"/> Unknown	
3 month follow-up (for office use only)	
22. Was the client contacted for 3-month follow-up? <input type="checkbox"/> Yes <input type="checkbox"/> No – Client lost to follow-up <input type="checkbox"/> No – Client did not consent to follow up <input type="checkbox"/> No – Client Died <input type="checkbox"/> Unknown Please now complete questions 23-26	
23. Date follow up carried out: _____ (dd/mm/yyyy)	
24. Has the client smoked at all (even a puff) in the last two weeks? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown	25. Has the client smoked at all since the one-month follow-up? <input type="checkbox"/> No <input type="checkbox"/> Yes, between 1 and 5 cigarettes in total <input type="checkbox"/> Yes, more than 5 cigarettes <input type="checkbox"/> Unknown

<p>26. Pharmaceutical Usage:</p> <p> <input type="checkbox"/> NRT only <input type="checkbox"/> Bupropion <input type="checkbox"/> Both NRT and Bupropion <input type="checkbox"/> Neither <input type="checkbox"/> Unknown Number of Weeks: _____ </p>	
<p>12 month follow up (for office use only)</p>	
<p>27. Was the client contacted for 12-month follow-up?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No – Client lost to follow-up <input type="checkbox"/> No – Client did not consent to follow up <input type="checkbox"/> No – Client Died <input type="checkbox"/> Unknown </p> <p>Please now complete questions 28-30</p>	
<p>28. Date follow up carried out:</p> <p>_____ (dd/mm/yyyy)</p>	
<p>29. Has the client smoked at all (even a puff) in the last two weeks?</p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown </p>	<p>30. Has the client smoked at all since the one-month follow-up?</p> <p> <input type="checkbox"/> No <input type="checkbox"/> Yes, between 1 and 5 cigarettes in total <input type="checkbox"/> Yes, more than 5 cigarettes <input type="checkbox"/> Unknown </p>

Source: PATH (Partnership Action on Tobacco and Health)

Appendix 2.

Definition of services to be included in the national minimum dataset monitoring in Scotland

'A specialist service is an NHS supported service with staff who have nationally recognised training and dedicated time for group and 1-1 support for a series of planned sessions where the client is followed up at 1 month, 3 months and 1 year post quit date and the data is recorded.'

This definition is intended to reflect services as they are currently set up in Scotland. It is noted that a substantial proportion of services have been set up in recent years and are in the early stages of development. It is therefore expected that this definition will change over time as services become established and further evidence becomes available

Definition	Explanation of terms/rationale
A specialist service is	A service which is in some way dedicated (which can be for short or longer sessions) provided by specially trained staff
an NHS supported service	This would normally mean funded by the NHS, but leaves room for services trained by the NHS or working to the same levels to be included- e.g. workplace or prisons
with staff who have nationally recognised training and dedicated time	Nationally recognised would mean PATH modules, local training approved by PATH or Maudsley courses. Training should meet the criteria in 'Guidance for Health Behaviour Change Training' and should reach or be designed to reach national standards in Scotland. Update should have taken place within the last 5 years.
for group and 1-1 support	Evidence and current guidelines support group work, and 1-1 where desirable and because of geographical constraints.
for a series of planned sessions	This would normally be a minimum of 4, usually around 7 sessions where the first and last would generally last at least 20 minutes. This will exclude opportunistic and brief advice work, but allow expert practitioners (the staff defined above with regards to training and time) to use personal judgement
where the client is followed up at 1 month 3 months and 1 year post quit date and the data is recorded	This should include CO validation at 1 month.

Supplementary Tables - NHS Board Breakdowns

Table A. Quit attempts made – pregnant females (NHS boards, 2008)

NHS Board	Number of quit attempts made by pregnant women (2008)	Number of women smoking in pregnancy (SMR02, 2007)	Estimated % pregnant smokers attempting to quit using NHS cessation services (2008) ¹
Ayrshire & Arran	47	1042	5%
Borders	27	248	11%
Dumfries & Galloway	37	332	11%
Fife	155	976	16%
Forth Valley	35	752	5%
Grampian	99	1173	8%
Greater Glasgow & Clyde	594	2369	25%
Highland	79	640	12%
Lanarkshire	220	1333	17%
Lothian	217	1552	14%
Orkney	1	28	4%
Shetland	2	38	5%
Tayside	212	843	25%
Western Isles	8	23	35%
Scotland	1733	11385	15%

Notes

¹ The estimated 15% of pregnant smokers attempting to quit using NHS cessation services, in Scotland in 2008, is based on: quit attempts made in the 2008 calendar year and the latest available estimate of the number of women smoking in pregnancy. Note: the latter is based on the 2007 calendar year and so the figures given in the last column are intended as a guide only.

Table B. Number of quit attempts made by SIMD deprivation decile (NHS boards, 2008)

		NHS Board													
		Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanark -shire	Lothian	Orkney	Shetland	Tayside	Western Isles
SIMD 2006 deciles for Scotland	SIMD 1 (Least Deprived)	67	41	16	86	42	294	439	29	120	441	0	0	54	0
	SIMD 2	164	62	49	204	146	429	604	134	273	292	2	3	172	0
	SIMD 3	70	115	169	132	151	561	585	183	289	371	4	10	293	0
	SIMD 4	194	211	179	252	179	398	624	324	421	378	16	9	347	0
	SIMD 5	164	180	292	315	124	600	863	379	629	405	14	16	294	10
	SIMD 6	227	177	323	381	150	562	857	451	951	484	5	9	228	24
	SIMD 7	450	82	207	269	304	350	1306	342	1024	866	0	15	318	60
	SIMD 8	659	87	140	398	366	513	1633	295	1200	752	0	4	381	49
	SIMD 9	511	93	105	476	230	389	2588	204	1481	761	0	0	473	0
	SIMD 10 (Most Deprived)	501	51	59	261	186	311	5881	129	993	607	0	0	425	0
	Unknown	10	54	10	11	110	67	250	181	180	98	3	20	56	3
	NHS Board Total	3017	1153	1549	2785	1988	4474	15630	2651	7561	5455	44	86	3041	146

Table C. Percentage of quit attempts made by SIMD deprivation decile (NHS boards, 2008)

		NHS Board													
		Ayrshire & Arran	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanark -shire	Lothian	Orkney	Shetland	Tayside	Western Isles	
SIMD 2006 deciles for Scotland	SIMD 1 (Least Deprived)	2%	4%	1%	3%	2%	7%	3%	1%	2%	8%	0%	0%	2%	0%
	SIMD 2	5%	5%	3%	7%	7%	10%	4%	5%	4%	5%	5%	3%	6%	0%
	SIMD 3	2%	10%	11%	5%	8%	13%	4%	7%	4%	7%	9%	12%	10%	0%
	SIMD 4	6%	18%	12%	9%	9%	9%	4%	12%	6%	7%	36%	10%	11%	0%
	SIMD 5	5%	16%	19%	11%	6%	13%	6%	14%	8%	7%	32%	19%	10%	7%
	SIMD 6	8%	15%	21%	14%	8%	13%	5%	17%	13%	9%	11%	10%	7%	16%
	SIMD 7	15%	7%	13%	10%	15%	8%	8%	13%	14%	16%	0%	17%	10%	41%
	SIMD 8	22%	8%	9%	14%	18%	11%	10%	11%	16%	14%	0%	5%	13%	34%
	SIMD 9	17%	8%	7%	17%	12%	9%	17%	8%	20%	14%	0%	0%	16%	0%
	SIMD 10 (Most Deprived)	17%	4%	4%	9%	9%	7%	38%	5%	13%	11%	0%	0%	14%	0%
	Unknown	0%	5%	1%	0%	6%	1%	2%	7%	2%	2%	7%	23%	2%	2%
	NHS Board Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Table D. Percentage of quit attempts made by pharmacotherapy used (NHS boards, 2008)

NHS Board	Pharmacotherapy							Total NHS Board
	NRT	Varenicline	Bupropion	NRT + Varenicline (change in product)	NRT + Bupropion (change in product)	None	Unknown	
Ayrshire & Arran	88%	10%	0%	0%	0%	0%	1%	100%
Borders	67%	5%	0%	0%	0%	1%	28%	100%
Dumfries & Galloway	56%	20%	0%	2%	0%	3%	18%	100%
Fife	58%	34%	0%	1%	0%	2%	4%	100%
Forth Valley	65%	21%	1%	1%	0%	4%	8%	100%
Grampian	82%	13%	0%	0%	0%	1%	4%	100%
Greater Glasgow & Clyde	77%	20%	0%	1%	0%	0%	2%	100%
Highland	53%	17%	0%	0%	0%	11%	19%	100%
Lanarkshire	76%	10%	0%	1%	0%	1%	12%	100%
Lothian	60%	22%	2%	1%	0%	6%	9%	100%
Orkney	89%	7%	0%	0%	0%	0%	5%	100%
Shetland	81%	2%	1%	0%	1%	0%	14%	100%
Tayside ¹	34%	12%	0%	0%	0%	17%	36%	100%
Western Isles	64%	15%	0%	0%	0%	8%	13%	100%
Scotland	70%	17%	0%	1%	0%	3%	9%	100%

¹ Tayside - missing information on pharmacotherapy use has lead to an under-recording of the numbers of clients using pharmacological support for their quit attempt.