

Promoting smoking cessation through the Quit and Win contest - comparing telephone brief advice, SMS message, and self-help approaches to smoking cessation

Submission date 06/07/2012	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 31/07/2012	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 20/06/2014	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

This study aims to promote smoking cessation in the community and assess the effectiveness of two additional interventions compared to self-help material for participants of the Quit and Win Contest. The specific objectives are to examine the reach and effect of the Quit and Win Contest in attracting smokers to quit smoking in the community; to evaluate the effectiveness of two smoking cessation approaches (i.e. providing brief advice by telephone or sending standard SMS messages compared to providing self-help cessation materials) on achieving successful quitting among smokers who join the Quit and Win Contest organized by the Hong Kong Council on Smoking and Health.

Who can participate?

Hong Kong residents aged 18 or over who have smoked at least one cigarette per day in the past 6 months, are able to communicate in Cantonese and read Chinese, and have a mobile phone to receive messages.

What does the study involve?

Participants were randomly allocated to receive either telephone counselling, mobile phone messages or self-help smoking cessation materials. All participants were followed up at 2, 6 and 12 months. Participants who reported to have stopped smoking at 6 and 12 months were invited for smoking status assessment by a biochemical test. Participants who passed the test were offered the opportunity to enter into a lucky draw organized by COSH.

What are the possible benefits and risks of participating?

Since the interventions to participants involved a brief telephone counseling from a nurse or receiving mobile phone messages, there will be no immediate direct benefit to those taking part. There was also no potential risks to the participants.

Where is the study run from?

Daily smokers were recruited in the shopping malls of 16 districts in Hong Kong. The study was run by the Hong Kong Council on Smoking and Health.

When is study starting and how long is it expected to run for?

The study ran from May to July 2009.

Who is funding the study?

The study was funded by the Hong Kong Council of Smoking and Health.

Who is the main contact?

Professor Sophia Siu Chee Chan (nssophia@hku.hk)

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Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Protocol serial number

N/A

Study information

Scientific Title

Promoting smoking cessation through the Quit and Win contest: a randomized controlled trial comparing telephone brief advice, SMS message, and self-help approaches to smoking cessation

Study objectives

The study is a three-armed randomized controlled trial to evaluate the effectiveness of brief advice by telephone (TEL group), a standard SMS message (SMS group) compared to self-help materials (CONTROL group) to smokers who join the Quit and Win Contest organized by The Hong Kong Council on Smoking and Health (COSH). The aims are to promote smoking cessation in the community, and to assess the effect of minimal intervention on smoking cessation through the Quit and Win Contest. We hypothesize that the proactive telephone brief advice and SMS message interventions will lead to significant increases in rates of smoking cessation in the intervention groups compared with the control group.

The specific objectives of the study are:

1. To test the effectiveness of different smoking cessation approaches on quit rate among smokers who join the Quit and Win Contest
2. To evaluate the effectiveness of the Quit and Win Contest to attract smokers to quit smoking.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Institutional Review Board of the University of Hong Kong/Hospital Authority Hong Kong West Cluster, ref: UW 09-236

Study design

Three-armed randomized controlled trial

Primary study design

Interventional

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Promoting smoking cessation

Interventions

TEL intervention group:

Study participants who are randomized to the TEL group will receive a proactive call from our trained smoking cessation counselor within 2 days after their consent to the RCT. They will receive advice on quitting smoking and specific warning on the hazardous effects of smoking on health will be highlighted. A hotline number will be given to the participants if they need further help. The brief telephone advice will last less than 5 minutes.

SMS intervention group:

Study participants who are randomized to the SMS group will receive SMS text messages on smoking cessation advice and warning on the hazardous effects of smoking on health. The participants will receive at least one SMS text and one more SMS text message will be sent if we obtain sponsorship from mobile phone companies.

Control group:

Study participants who are randomized to the CONTROL group will not receive any quitting assistance other than the self-help materials from COSH at the recruitment sites.

Participants who agree to join the Quit and Win Contest but refuse to be randomized and still agree to be followed-up will also be considered as the control group. They will be provided with self-help materials and be followed up at 2, 6 and 12 months. Those who reported to have stopped smoking will also be invited for biochemical validation of smoking status.

All participants of the Quit and Win Contest will receive self-help materials on smoking cessation.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

RCT of smoking cessation interventions:

Self-reported 7-day point prevalence (pp) quit rate measured at 6 months.

Process evaluation of Quit and Win Contest:

1. Number of people who visited the exhibition
2. Number of leaflets distributed
3. Number of people who visited the smoking cessation booth
4. Number of smoking cessation self-help materials distributed
5. Number of people interested in joining the Quit and Win Contest
6. Number of eligible participants
7. Number of eligible participants enrolled into the contest
8. Number of eligible participants consenting to the RCT study

Key secondary outcome(s)

1. Biochemically validated quit rate at 6 months
2. Self-reported 7-day pp quit rates at 2 and 12 months
3. Rate of smoking reduction by at least of half
4. Number of quit attempts at 2, 6 and 12 months

Completion date

15/07/2009

Eligibility

Key inclusion criteria

1. Hong Kong residents aged 18 or above
2. Smoke at least one cigarette per day in the past 6 months
3. Able to communicate in Cantonese and read Chinese
4. Have a mobile phone to receive SMS

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Smokers who are psychologically or physically unable to communicate
2. Currently following other forms of smoking cessation programme

Date of first enrolment

30/05/2009

Date of final enrolment

15/07/2009

Locations**Countries of recruitment**

Hong Kong

Study participating centre

4/F, William M.W. Mong Block

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Hong Kong

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Sponsor information**Organisation**

Hong Kong Council on Smoking and Health (Hong Kong)

ROR

<https://ror.org/05enx7587>

Funder(s)**Funder type**

Government

Funder Name

Hong Kong Council on Smoking and Health (Hong Kong)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes