

Evaluation of an intervention aimed at improving the support for smoking cessation of patients by general practitioners

Submission date 11/09/2024	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 25/11/2024	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 12/01/2026	Condition category Other	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Each year, more than 75,000 deaths in France are attributable to smoking. Despite strong measures that have reduced smoking, the number of daily smokers has stagnated since 2019. Studies show that smokers accompanied by a health professional are at least 70% more likely to succeed in quitting smoking than those who try to quit smoking alone. However, the majority of smokers try to quit on their own, and health professionals underestimate the demand for support and its effectiveness. The objective of the study is to evaluate how well tools intended to support and encourage general practitioners in supporting smoking cessation work.

Who can participate?

General practitioners (GPs) from mainland France who do not work exclusively in a hospital, in a clinic and/or in a company.

What does the study involve?

GPs are recruited via an online panel and another contact file comprising around 37,000 GPs on the whole. GPs have to complete a recruitment questionnaire, at the end of which they are randomly allocated to one of two groups: (1) Control, receiving nothing, (2) Treatment, receiving a kit by post. The kit includes: 1/ an information sheet on carrying out a brief intervention in three stages: Screen, Advise and Refer; 2/ leaflets to be placed in the waiting room with a questionnaire to survey patients about their smoking, information on the benefits of cessation and the role of GPs in helping smoking cessation; 3/ a poster to attract patients' attention to the questionnaire. The use of the tools is planned over a period of 4 weeks, at the end of which a follow-up questionnaire is sent to GPs from both groups. GPs report the number of patients with whom they talked about smoking cessation, and if they proposed a support, during the last full working day. To evaluate the impact of the tools, the results in GPs who received these tools are compared to those of GPs who did not receive them.

What are the possible benefits and risks of participating?

Participants in the intervention group can continue to use the tools beyond the duration of the experiment. Participants in the control group can download the tools after answering the follow-

up questionnaire. Participants in both groups receive compensation of 30 euros if they respond to both questionnaires (recruitment and follow-up). No risk is identified.

Where is the study run from?

Santé publique France, the French national public health agency, manages the study. The experiment takes place in general medicine practices.

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

September 2022 to May 2024

Who is funding the study?

Santé publique France and the French national health insurance.

Who is the main contact?

Romain Guignard, romain.guignard@santepubliquefrance.fr

Contact information

Type(s)

Public, Principal investigator

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Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Protocol serial number

Nil known

Study information

Scientific Title

Effectiveness of the provision of tools for general practitioners to support smoking cessation, compared to no intervention

Acronym

Tabac-Pro

Study objectives

1. The intervention increases the number of patients with whom the doctor talks about smoking cessation
2. The intervention increases the likelihood that they will offer support to patients (medication prescriptions, referral to another healthcare professional, or suggestion of a follow-up appointment)
3. The intervention increases the number of patients for whom they screen smoking status
4. The intervention increases the proportion of smokers for whom they assess the level of dependence
5. The intervention increases the proportion of smokers for whom they assess the motivation to quit
6. The intervention increases the proportion of smokers for whom they suggest reducing their consumption
7. The intervention increases the proportion of smokers for whom they recall the benefits of quitting smoking

Ethics approval required

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Ethics approval(s)

approved 08/01/2024, Behavioural Insights Team's internal ethics committee (58 Victoria Embankment, London, EC4Y 0DS, United Kingdom; +44 7306118521; bobby.stuijfzand@bi.team), ref: FR000088

Study design

Interventional two-arm simple-blinded randomized controlled trial

Primary study design

Interventional

Study type(s)

Prevention

Health condition(s) or problem(s) studied

Prevention of tobacco smoking

Interventions

General practitioners (GPs) have to complete an online recruitment questionnaire, at the end of which they are randomized to one of both groups by an integrated algorithm.

GPs in the intervention group receive a kit by post with:

- an information sheet on carrying out a brief intervention for smoking cessation in three stages: Screen, Advise and Refer.
- leaflets to be placed in the waiting room with a questionnaire to survey patients about their smoking, information on the benefits of cessation and the role of GPs in the management of cessation
- a poster to attract patients' attention to the questionnaire.

GPs in the control group receive no intervention (usual care).

The use of the tools is planned over a period of 4 weeks, at the end of which a follow-up questionnaire is sent to both groups.

Intervention Type

Behavioural

Primary outcome(s)

Number of patients with whom a GP talked about smoking cessation during the last full working day, at 4 weeks, self-reported in a follow-up questionnaire.

Key secondary outcome(s)

Probability that a GP offers smoking cessation support during the last full working day, at 4 weeks, self-reported in a follow-up questionnaire.

Completion date

10/05/2024

Eligibility

Key inclusion criteria

1. Practice in mainland France
2. Not work exclusively in a hospital, in a clinic and/or in a company

Participant type(s)

Health professional

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Total final enrolment

800

Key exclusion criteria

Work exclusively in a hospital, in a clinic and/or in a company

Date of first enrolment

15/01/2024

Date of final enrolment

08/03/2024

Locations

Countries of recruitment

France

Study participating centre

Santé Publique France

12, rue du Val d'Osne

Saint-Maurice

France

94415

Sponsor information

Organisation

Santé Publique France

ROR

<https://ror.org/00dfw9p58>

Funder(s)

Funder type

Government

Funder Name

Santé Publique France

Funder Name

Caisse nationale de l'Assurance Maladie

Alternative Name(s)

French National Health Insurance Fund, National Fund for Health Insurance, CNAM

Funding Body Type

Government organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

France

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study will be available upon request from Romain Guignard (romain.guignard@santepubliquefrance.fr). Anonymized data can be shared with external teams after analysis of the project by Santé publique France and signing of a confidentiality commitment.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		09/01/2026	12/01/2026	Yes	No
Participant information sheet			20/09/2024	No	Yes