

Reimbursement for smoking cessation treatment

Submission date 12/09/2005	Recruitment status No longer recruiting	☐ Prospectively registered
		☐ Protocol
Registration date 12/09/2005	Overall study status Completed	☐ Statistical analysis plan
		☒ Results
Last Edited 10/09/2009	Condition category Mental and Behavioural Disorders	☐ Individual participant data

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
NTR104; STIVORO and the Dutch Asthma Foundation 3.4.03.28

Study information

Scientific Title
(Added 18/08/09) The (cost)-effectiveness of reimbursement for smoking cessation treatment

Study objectives

Reimbursement for smoking cessation treatment will increase the use of the treatment and the number of quit attempts. The increased use of smoking cessation treatment by reimbursement will result into increased prolonged abstinence.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved by the Medical Ethics Committee of the Trimbos Institute in Utrecht, The Netherlands (May 2005).

Primary study design

Interventional

Study design

Random consent design

Study type(s)

Other

Health condition(s) or problem(s) studied

Smoking cessation

Interventions

For a period of 6 months, smokers in the intervention group had the opportunity to apply for reimbursement for SCT. They received a leaflet with a description of the SCTs for which reimbursement was available, and information on how to receive the reimbursement. Smokers in the intervention group could receive full reimbursement for pharmacological treatment (bupropion and NRT (chewing gum, patch, tablet, sublingual tablet and inhaler)), behavioural counselling (written advice, telephone or face to face counselling) or a combination. To receive reimbursement, they had to send the receipt and two statements of personal contact with a health care professional (general practitioner, general practice nurse, physician, psychologist or health community worker) to the health insurance company. Before the study started, all the health care professionals in the study region were informed about the study. No limit was set on the number of applications for reimbursement. In the control, no reimbursement or information about smoking cessation treatment was offered.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

The primary outcome measure of the reimbursement study was continuous abstinence from smoking. Continuous abstinence was defined as not having smoked for at least seven days preceding the 6-month and 12-month questionnaire and not having relapsed between both questionnaires. After the 6-month and 12-month questionnaire, quitters were contacted to make an appointment for biochemical validation of their smoking status.

Key secondary outcome(s)

Secondary outcomes were the use of smoking cessation treatment, the number of quit attempts that were undertaken, and the cost-effectiveness of reimbursement was assessed.

Completion date

01/05/2003

Eligibility

Key inclusion criteria

We included smokers of at least 18 years old and healthcare insured by health insurance company "De Friesland Zorgverzekeraar". Participants did not have to be motivated to quit smoking.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Sex

All

Key exclusion criteria

Only one smoker per household was allowed to participate.

Date of first enrolment

01/05/2002

Date of final enrolment

01/05/2003

Locations

Countries of recruitment

Netherlands

Study participating centre

Care and Public Health Research Institute (CAPHRI), Maastricht University

Maastricht

Netherlands

6200 MD

Sponsor information

Organisation

CAPHRI research institute, University Maastricht (Netherlands)

ROR

<https://ror.org/02jz4aj89>

Funder(s)

Funder type

Charity

Funder Name

Dutch Asthma Foundation (Netherlands)

Funder Name

STIVORO (Netherlands)

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?
Results article	results	01/07/2005		Yes	No
Results article	results on cost effectiveness	01/07/2006		Yes	No
Results article	results on sustained abstinence	01/11/2006		Yes	No