



Very Brief Advice on Smoking (VBA+)

30 seconds to save a life

Very Brief Advice on Smoking, known as VBA, is a life-saving intervention delivered by health and social care practitioners that triggers quit attempts. VBA is recommended by NICE as evidence-based and cost-effective.¹⁻⁶

VBA is a 30-second intervention that can be delivered by all healthcare professionals in almost every consultation with patients who smoke.

VBA involves asking patients about their current smoking, advising them on the best methods of stopping smoking available to them and helping them access evidence-based stop smoking support.

The original VBA model focused on driving people who smoke to Local Stop Smoking Services. VBA+ is an update to the original model and aims to reflect the fact that access to stop smoking support delivery can vary. The principles and merits of VBA remain the same and VBA can be adapted to reflect support that is locally available.

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Very Brief Advice on Smoking

ASK

and record smoking status

"Do you smoke?"

ADVISE

on the most effective way of quitting

"Did you know that the best way of stopping smoking is with a combination of specialist support and medication or a nicotine vape?"

"I can refer you to our friendly Local Stop Smoking Service that many of my patients have found useful."

or *"You can receive support right here in our clinic/hospital/local pharmacy."*
or add any other support options available locally.

ACT

on patient's response

INTERESTED

Build confidence.
Give information. Prescribe.

Refer to: Local Stop Smoking Service
OR in-house stop smoking support
OR any other locally available support

Patients are three times more likely to quit with support and a stop smoking aid.

FOLLOW-UP

Make a note of the referral, and ask about referral uptake and smoking status next time you see the patient.

NOT INTERESTED

*"It's your choice of course.
Help will always be available.
You can always return to see me,
contact the smokefree helpline or
your GP if you change your mind."*

Ensure patient understands where to find support.

REASSESS

Repeat VBA+ at future visits and at least once a year.

Support to stop smoking: evidence of effectiveness

The most effective way to quit smoking is with a combination of behavioural support and a stop smoking aid.^{2,7-13}

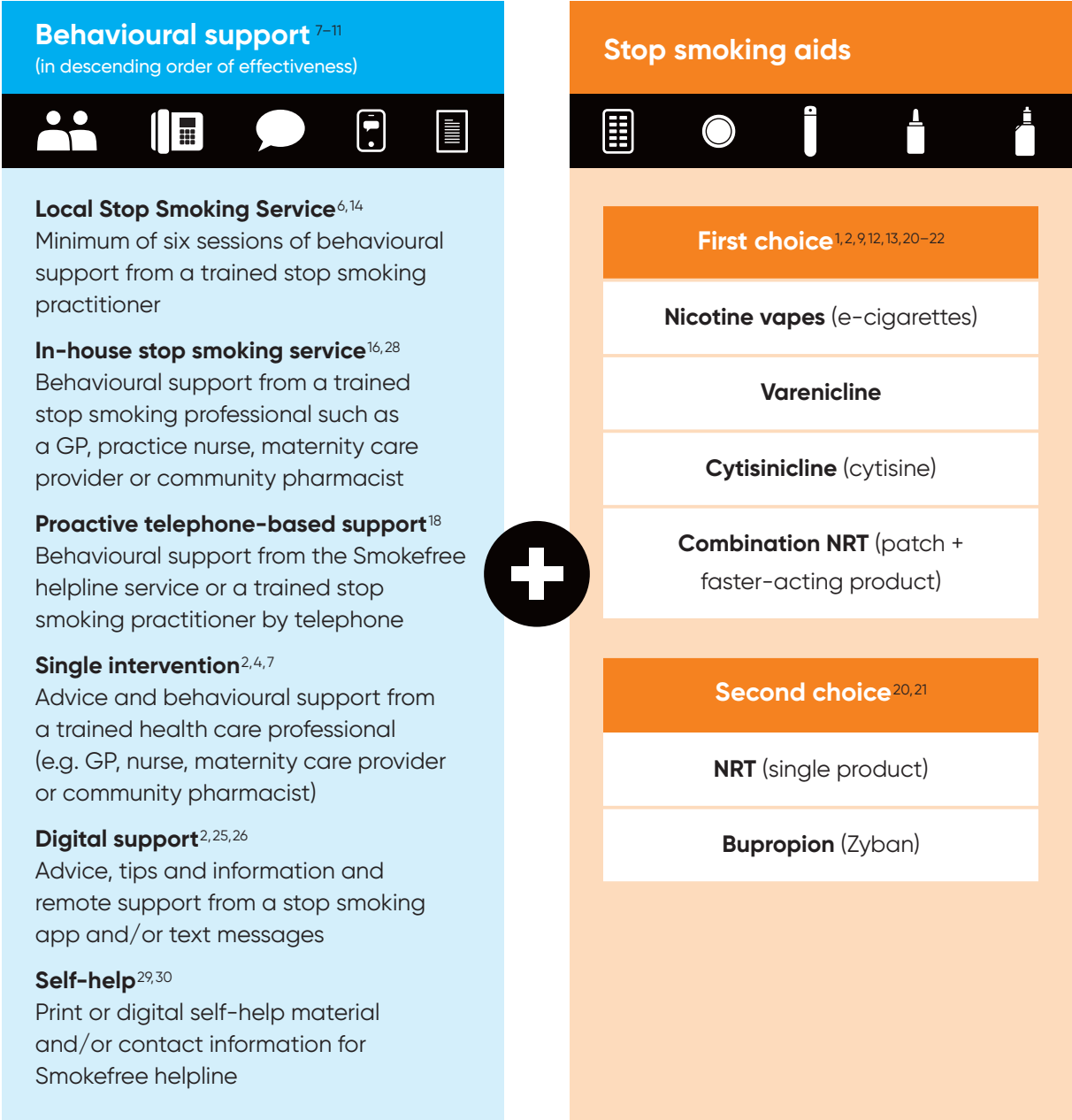
Specifically, we know:

- People can benefit from a single stop smoking support intervention, but **success with quitting increases with multiple sessions** (usually at least six weekly appointments).^{2,4,7,9,11,14-16}
- Some people will benefit from **extended support for 12 weeks** or longer.^{1,2} People that may benefit include pregnant women, people with severe mental illness and people with co-addictions or other complex needs.^{1,2}
- **Individuals who smoke have higher quit rates when they receive support from a trained stop smoking specialist** (someone whose main role is to support people with quitting).^{2,14,15}
- While face-to-face counselling (either individual or group) is considered the 'gold standard', **people who receive support via telephone also do well**.^{2,7,9,11,16-18} There is less evidence on video-based support, but it is reasonable to assume that video would be comparable to telephone-based models.¹⁹
- **The most effective stop smoking aids are varenicline, cytisinicline (cytisine), nicotine vapes and combination nicotine replacement therapy** (NRT; nicotine patch + faster-acting NRT product).^{12,13,20-22} These are known as first-choice stop smoking aids.
- Stop smoking aids are typically used for 12 weeks; however, **some people benefit from extended treatment (six to 12 months or longer)**. Aids may be used for an extended period by those who are at risk of a relapse back to smoking.^{1,23}
- Having access to stop smoking support (aids plus behavioural support) free of charge **can increase the likelihood that a person will use these treatments properly and for the recommended duration**.²⁴
- Person-based interventions are considered superior to **digital interventions**. There is some research that well designed digital stop smoking interventions, when utilised at regular intervals, can enhance rates of stopping smoking, but more research is needed. Digital support is most effective when combined with a first-choice stop smoking aid. Digital support is recommended as a complement to support from a trained practitioner and/or for people who would not otherwise access stop smoking support.^{9,25,26}
- **Financial incentives** have been shown to increase engagement in support and rates of stopping.²⁷

Tailoring VBA+ to match available local support and the needs of people who smoke

Not everyone has access to the same stop smoking support. To inform the **ACT** component of VBA+, it will be important to identify which stop smoking support is available in your locality so that you can refer people interested in quitting to the best available support.

We know that both behavioural support and stop smoking aids are effective in supporting quitting when delivered on their own. **Combining both leads to the best outcomes.** The figure below outlines the types of behavioural support and stop smoking aids that may be available locally in a suggested order of effectiveness.



We know that training health and social care providers in VBA+ is important. Even a short 30-minute training session can increase rates at which providers deliver VBA+. ^{31,32}

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