

Scared Smokeless: Graphic Antismoking Ads Increase Quitting Attempts

Truth in advertising shows what you really get when you smoke.



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When it comes to getting smokers to try to quit, not all antismoking ads are created equal. According to one new study, ads that evoke strongly negative emotions like fear or sadness, or highly graphic images of diseased lungs and other smoking-related illness, are more effective than other types of ads in getting people to try to quit.

There is already plenty of evidence that mass media anti-smoking campaigns can promote smoking cessation. But less has been known about the types of messages that are most effective or about who responds to such ads. The authors of the study analyzed data from the New York Adult Tobacco Survey, a random telephone

survey of adults older than 18 years in New York State, from June 2003 through 2010; the study cohort comprised 8,780 current smokers. They found greater exposure to highly emotional or graphic ads to be positively associated with quitting attempts in the previous 12 months, whereas exposure to ads that focused on advice on quitting, offered encouragement to quit, or highlighted the dangers of secondhand smoke had no such association. The graphic ads were found to be equally effective regardless of respondents' desire to quit, income, or education level.

Some experts have criticized fear-based antismoking campaigns, saying they go too far or that their short-term benefits fade once their audiences become inured to the images, but the evidence in this study makes a strong counterargument that such ads do in fact work.

And it may be that the real motivator isn't fear as much as it is

truth in advertising. "Nurses have long seen these exact graphic things happen to patients. But the people who buy and get hooked on cigarettes haven't," says Ruth E. Malone, professor in and chairwoman of the Department of Social and Behavioral Sciences at the University of California, San Francisco, School of Nursing. Anything that makes the pack look less cool, she says, is effective in deterring youth from taking up smoking.

Graphic advertising campaigns can also bolster the supportive approach many nurses try to take with their already addicted patients. "Nurses can emphasize that finally, after decades of deception, the tobacco companies are being forced to show what you really get when you use this product," says Malone, "and it isn't sexy, glamorous, sporty, or cool." —Laura Wallis

Farrelly MC, et al. *Am J Prev Med* 2012; 43(5):475-82.

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📌 **Early end-of-life talks improve care for patients with late-stage cancer.** Patients with terminal cancer (or their surrogates) who participate in end-of-life discussions earlier in the course of their illness receive less aggressive care and increased hospice care in the last days of life. Researchers reviewed the end-of-life status of 1,231 patients with a diagnosis of end-stage lung or colorectal cancer. If discussions took place more than 30 days before death, patients received fewer aggressive treatments such as chemotherapy in the last two weeks before death or ICU care in the last 30 days of life. They were also twice as likely to use hospice care as patients whose discussions on end-of-life care occurred within 30 days of death. Initiating early discussions before patients deteriorate gives patients and families "time to plan for more difficult times in the future," write the authors in the December 10, 2012, *Journal of Clinical Oncology*.