



**SWOPE HEALTH
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Ten Year Partnership between University of Kansas Medical Center & Swope Health Services Yields Groundbreaking Research on African-American Smokers

KANSAS CITY, MO – Swope Health Services and the University of Kansas Medical Center are pleased to announce the 10 year anniversary of their partnership to improve tobacco use treatment for African American smokers. *Kick It at Swope (KIS)* programs have served over 1400 African American smokers in the Kansas City region and addressed a major public health issue: **tobacco use is the leading preventable cause of disease and death for all Americans, but African Americans bear the greatest health burden from tobacco use with higher rates of tobacco-related death and disease, including death from lung cancer, coronary heart disease and stroke. For example, African American men are at least 50 percent more likely to develop lung cancer and 30 percent more likely to die from the disease than White men.**

Kick It at Swope (KIS-I) began in 1998 and enrolled 600 African American moderate to heavy smokers (greater than or equal to 10 cigarettes per day) in a trial combining Motivational Interviewing (MI) counseling with either bupropion (Zyban) or placebo medication. Confirmed abstinence rates at the end of 7 weeks of treatment were 36% in the bupropion group and 19% in the placebo group. At 6 months the quit rates were 21.0% in the bupropion group and 13.7% in the placebo group (p=0.02). **This was the first study to demonstrate the efficacy of bupropion for smoking cessation among African Americans.**

From KIS I, program researchers learned that about half of African American smokers are light smokers (smoking 1-10 cigarettes per day) and have been excluded from most smoking cessation research studies. Therefore Kick It at Swope II was developed and began in 2003 to target African American light smokers. KIS II examined use of nicotine gum or placebo in conjunction with Motivational Interviewing [MI] or Health Education [HE] counseling for smoking cessation among 755 African American light smokers. Those who received HE counseling had 26 week abstinence rates of 16.7% compared to 8.5% for those who received MI counseling. In addition, the 26 week abstinence rates for placebo and active gum were 11.1% and 14.2%, respectively.

KIS-II findings indicated that advice-oriented HE counseling was more effective than MI counseling for smoking cessation among African American light smokers who were ready to stop smoking. Findings also indicate variations in daily smoking patterns and a wide range of baseline cotinine levels among study participants. The lack of benefit of nicotine gum use in that study may have been due to under-dosing or inadequate use of medication, suggesting challenges with effectively using nicotine replacement within a heterogeneous group of light smokers.

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KIS I and KIS II demonstrated efficacy of bupropion for smoking cessation among moderate to heavy smokers, and efficacy of Health Education (HE) counseling among light smokers. In an effort to combine the best evidence for treatment, we recently launched our third major program, KIS-III, funded by the National Cancer Institute. KIS-III will evaluate the combination of health education (HE) counseling with bupropion (compared to placebo) to enhance smoking cessation treatment for African American light smokers. **KIS-III will serve 540 light smokers and will extend the science by evaluating individual factors (individual drug metabolism, genetic and psychosocial factors) related to treatment success.** The focus of this research is to better understand individual differences and key factors related to smoking cessation treatment success, with the goals of improving counseling and medication treatment and delivering the best treatment possible.

Kick It at Swope III began enrolling in January 2008 and already has enrolled over 100 African American smokers into this treatment program. Through **advances in science and improvement in smoking cessation treatment for African Americans, the Kick It at Swope programs strive to reduce tobacco-related health disparities and improve health within the community.** For additional information or to enroll in KIS III, please call (816)627-2122 or stop by the Outreach Department at Swope Health Central, 3801 Blue Parkway, Kansas City, MO 64130.

Additional Tobacco-Related Health Disparities Statistics

- African Americans have similar rates of cigarette smoking as Whites (20% vs. 22% respectively in 2004) and lower overall exposure to tobacco smoke, but are more likely to develop and die from lung cancer. Black men are at least 50 percent more likely to develop lung cancer and 30 percent more likely to die from the disease than White men.
- In 2004, African American men were 30% more likely to die from heart disease, as compared to non-Hispanic white men.
- African Americans are twice as likely to die from stroke as Caucasians. The rate of first strokes in African Americans is almost double that of Caucasians.

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