



Tobacco dependence treatment among heterosexual and sexual minority current smokers

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INTRODUCTION

- There are more than 480,000 deaths in the United States attributed to smoking. Sexual minority adults represent a vulnerable population that smokes at higher rates than heterosexuals.
- We examined differences in use of evidence-based tobacco dependence treatments (i.e., behavioral and/or pharmacological treatments) comparing sexual minority current smokers – those identifying with lesbian, gay, or bisexual (LGB) identity – to their heterosexual counterparts using data from a nationally representative survey.

METHODS

- Data: 2015 National Health Interview Survey.
- Dependent variables: Evidence-based tobacco dependence treatments.
 - 1) Behavioral treatment: telephone help, stop-smoking clinic, or one-on-one counseling.
 - 2) Pharmacological treatment: nicotine patch, gum or other nicotine product, or prescription medications.
- Multivariate-adjusted regression models were used to examine the correlates of tobacco treatment use among current smokers, comparing sexual minority populations to their heterosexual counterparts, stratifying by current gender status, and adjusting for sociodemographic factors, provider recommendation, serious psychological distress, and smoking-related cancers.

RESULTS

- A total of 5,244 adult current cigarette smokers were included in this analysis, whereby 46.4% (n=2,433) identified as heterosexual female, 2.7% as LGB female (n=140), 48.8% heterosexual male (n=2,558) and 2.2% LGB male (n=113).
- The majority of all adult current smokers did not use evidence-based tobacco dependence treatment regardless of sexual orientation.

Table 1. Smoking cessation utilization among heterosexual and sexual minority current smokers, National Health Interview survey (NHIS), 2015

Characteristic	Female				p	Male				p
	Sexual Minority		Heterosexual			Sexual Minority		Heterosexual		
	N	%	N	%		N	%	N	%	
Unweighted observations	140	2.7	2,433	46.4		113	2.2	2,558	48.8	
Any pharmacological treatment	17	12.1	405	16.6	0.1	13	11.5	350	13.7	0.6
Any behavioral treatment	3	2.1	130	5.3	0.0	5	4.4	79	3.1	0.4
Both treatments	3	2.1	83	3.4	0.2	3	2.7	57	2.2	0.2
Any treatment	17	12.1	452	18.6	0.0	15	13.3	372	14.5	0.5

- Few respondents utilized any pharmacological treatment (LGB females: 12.1% vs. heterosexual females: 16.6%; LGB males: 11.5% vs. heterosexual males: 13.7%) or any behavioral treatment (LGB females: 2.1% vs. heterosexual females: 5.3%; LGB males: 4.4% vs. heterosexual males: 3.1%).

Table 2. Multiple logistic regression of current smokers receiving cessation treatment, National Health Interview survey (NHIS), 2015

Characteristic	Female			Male		
	AOR	95%CI		AOR	95%CI	
Sexual orientation						
Heterosexual	1.00			1.00		
Sexual Minority	0.47	0.23	0.98	0.65	0.31	1.34

Covariates included age, race/ethnicity, household income, educational attainment, health insurance status, region, provider recommendation, serious psychological distress, and smoking-related cancers.

- In fully-adjusted models, LGB females were significantly less likely than heterosexual females to receive any tobacco treatment (OR=0.47; 95% CI=0.23, 0.98).

CONCLUSION

- Using a nationally representative sample of US adults, we found that the population-level use of evidence-based tobacco treatment is low regardless of sexual orientation.
- Sexual minority female smokers represent a prime target for interventions to expand access and utilization of evidence-based tobacco use treatment.

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