

Quitlines, and other sources of support

[Index](#) | [Introduction](#) | [Smoking-Aware Practice](#) | [Quitlines](#) | [Supporting quit attempts](#)
[Pharmacotherapies](#) | [Alternative Approaches](#) | [Special Groups](#) | [References](#)

Telephone counselling services, known as 'Quitlines' in many countries, are an effective, evidence-based, population-wide strategy to deliver smoking cessation support.[39] Quitlines can help direct smokers to the most appropriate assistance and provide cessation help in the form of one-off sessions or systematic programmes of call-back counselling.[39].

Quitline services have been available in North America since 1980. In 1988, the first quitline in the European Union was established in the United Kingdom and there are now quitlines in 24 European countries. Operational and service details for quitlines in Europe, North America and Canada can be accessed via http://www.naquitline.org/pdfs/NAQC_Quitline_06_by_pg.pdf. Information on Australian quitlines is available at <http://www.quitnow.gov.au/>.

Telephone quitlines have been shown to be a useful adjunct (number needed to treat = 4) to advice and support offered in primary care.[40][41] Counselling may be offered reactively for people who call smoking cessation helplines, but telephone quitlines that provided pro-active or call-back counselling have been shown to be more effective.[39][42] There is some evidence that simply having quitlines available may make a positive contribution to smoking cessation at a population level. A study comparing cessation rates in a community with a quitline to a comparable community without one found greater cessation in the community with the quitline.[41]

These data suggest that primary care health professionals should not only promote the use of quitlines to their patients, but also campaign for the provision of a quitline in those countries where a service is not yet available.