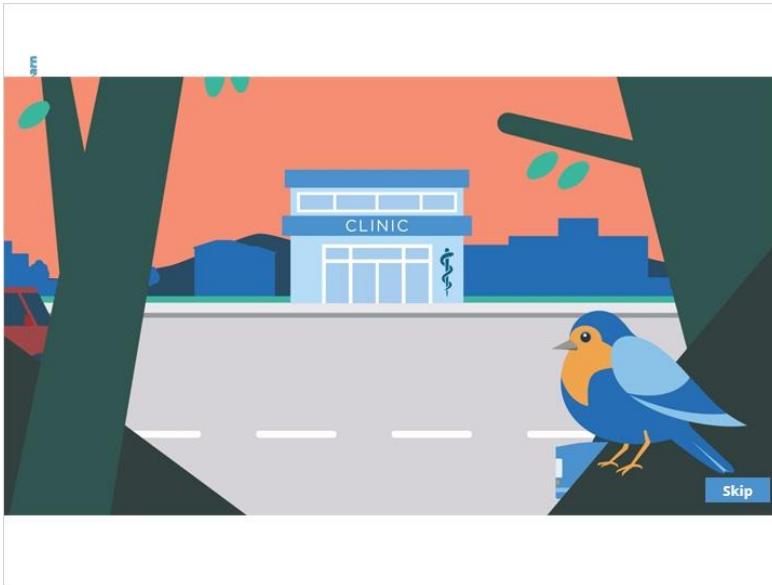


Case 33 Xiao Yun

1. Conflicts

1.1 Intro Video



1.2 Module Navigation and Instructions

A slide titled 'Module Navigation and Instructions'. It features a navigation menu on the left with items like 'Slide instruction', 'More Information', and 'Proceed'. On the right, there is a preview of a 'COVID-19' module, which includes a thumbnail image of a doctor and a patient, and a 'Proceed' button. The slide is framed by a white border.

1.3 Learning Objectives

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Learning Objectives

At the end of this module participants should be able to:

1. Identify key factors/findings in family medicine to help establish common clinical diagnoses.
2. Evaluate best evidence/guidance and practice tools to determine preferred treatment options for patients.
3. Synthesize patient preference, evidence and experience to formulate comprehensive plans for patient cases.

 Approximately 15 minutes to complete each patient case.

 Proceed

2. Xiao Yun

2.1 Meet Xiao Yun

CFPCLearn

Xiao Yun, 68

 You have been following Xiao Yun and his wife since you started your practice.

 Xiao is a retired elementary school teacher who is active but also loves to relax with a cigarette. You have discussed smoking cessation numerous times with little success so far.



Xiao 1 (Slide Layer)

CFPC Learn

Xiao Yun, 68

Xiao: Did Li make an appointment with you? She had a mini-stroke last week and is supposed to follow up with you.

You: I'm sorry to hear that. I haven't seen her yet. What brings you in, Xiao?

Conversation I **Conversation II**

Moving Forward



Xiao 1 - Copy (Slide Layer)

CFPC Learn

Xiao Yun, 68

Xiao: Well, with Li having a stroke and all, I figure she'll never stop smoking unless we do it together. So here I am!

You: I'm happy to hear you want to quit smoking. It is probably the best thing you can do for your health.

I know! You've told me that before!

Conversation I **Conversation II**

Moving Forward



2.2 True or False 1

(Multiple Response, 10 points, 1 attempt permitted)

Is this statement true or false?



Assuming an unassisted quit rate of 2-3%, brief advice to encourage smoking cessation can lead to an additional 1-3% of patients quitting smoking (versus usual care).

True
 False



Submit

Correct

Choice

X

True

False

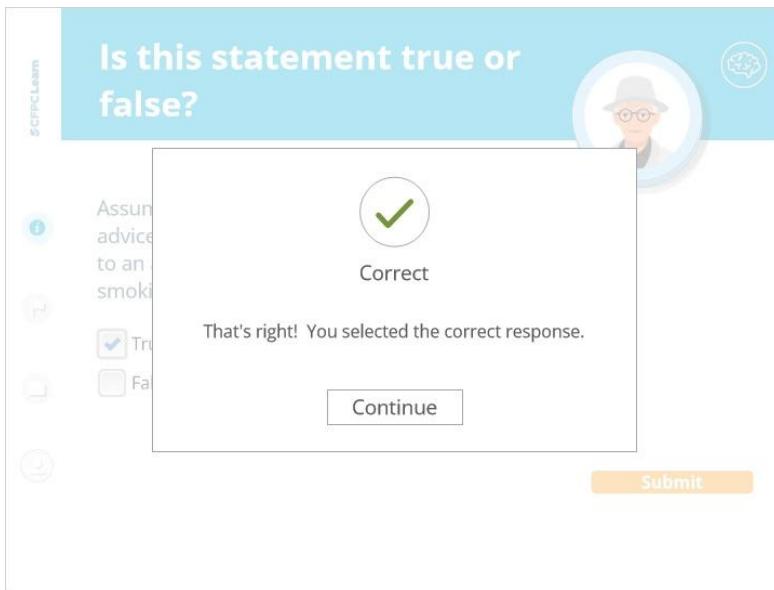
Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

Correct (Slide Layer)



Is this statement true or false?

Correct

That's right! You selected the correct response.

Continue

Submit

Assume advice to an smoker

True

False

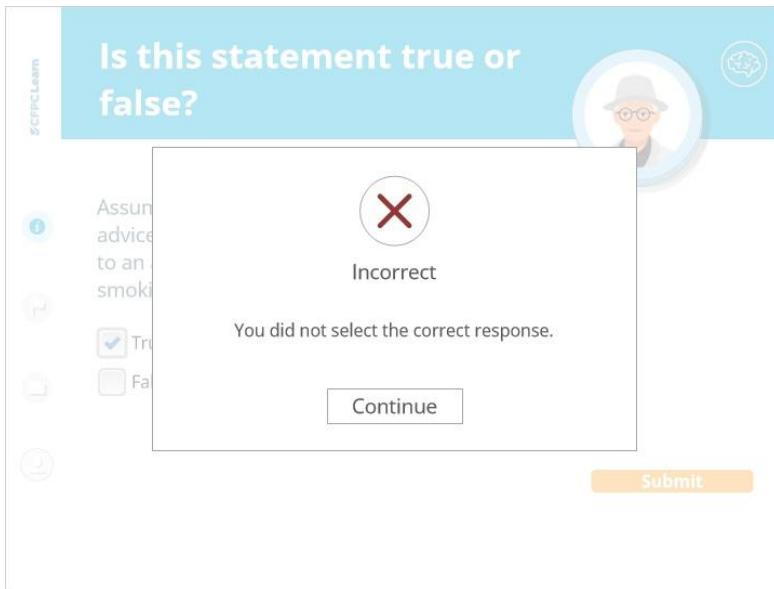
SCFICLearn

A circular icon with a brain and a person's head.

A large green checkmark icon.

A small orange 'Submit' button.

Incorrect (Slide Layer)



Is this statement true or false?

Incorrect

You did not select the correct response.

Continue

Submit

Assume advice to an smoker

True

False

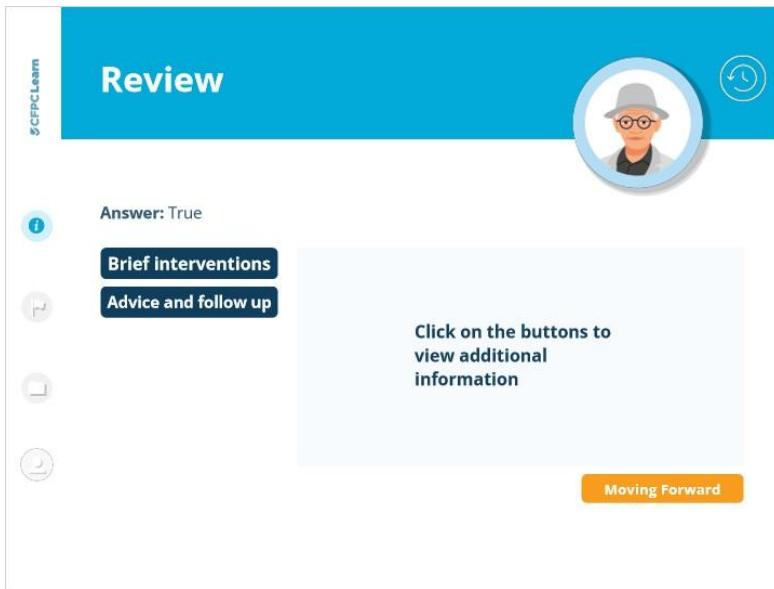
SCFICLearn

A circular icon with a brain and a person's head.

A large red 'X' icon.

A small orange 'Submit' button.

2.3 Review



Answer: True

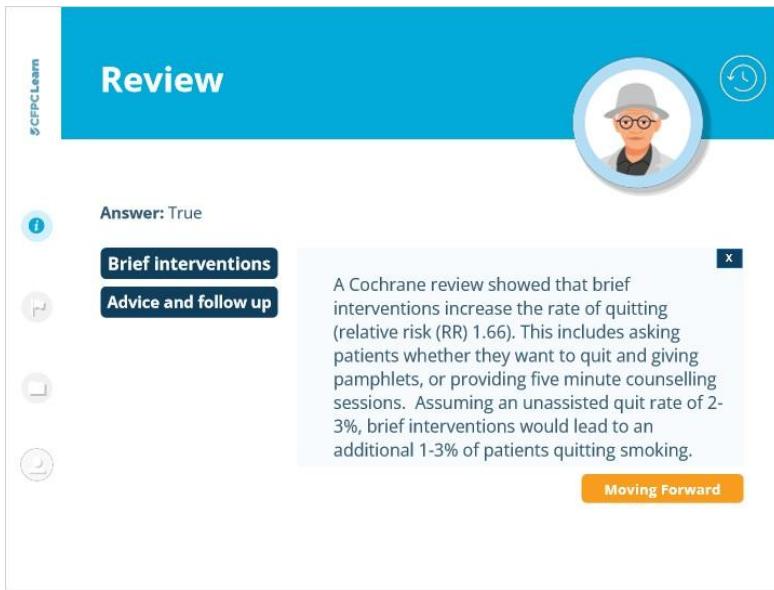
Brief interventions

Advice and follow up

Click on the buttons to view additional information

Moving Forward

Evidence (Slide Layer)



Answer: True

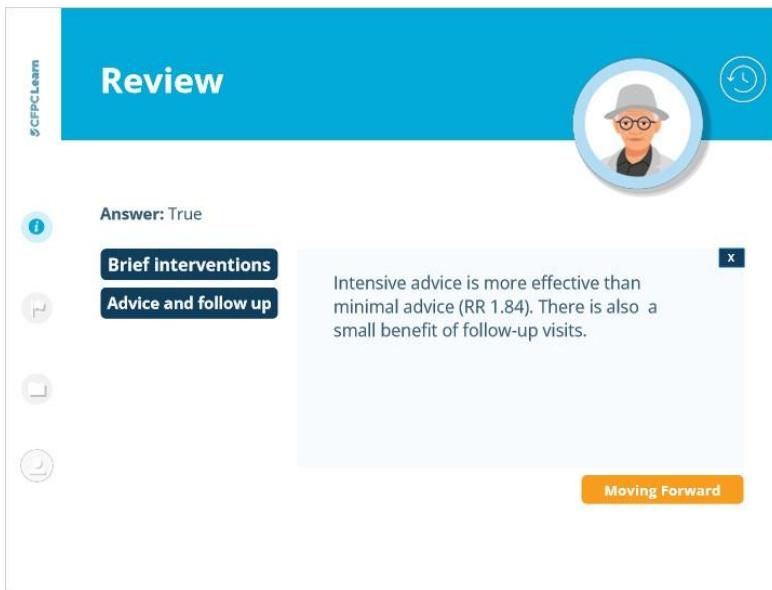
Brief interventions

Advice and follow up

A Cochrane review showed that brief interventions increase the rate of quitting (relative risk (RR) 1.66). This includes asking patients whether they want to quit and giving pamphlets, or providing five minute counselling sessions. Assuming an unassisted quit rate of 2-3%, brief interventions would lead to an additional 1-3% of patients quitting smoking.

Moving Forward

Advice (Slide Layer)



CFPC Learn

Review

Answer: True

Brief interventions

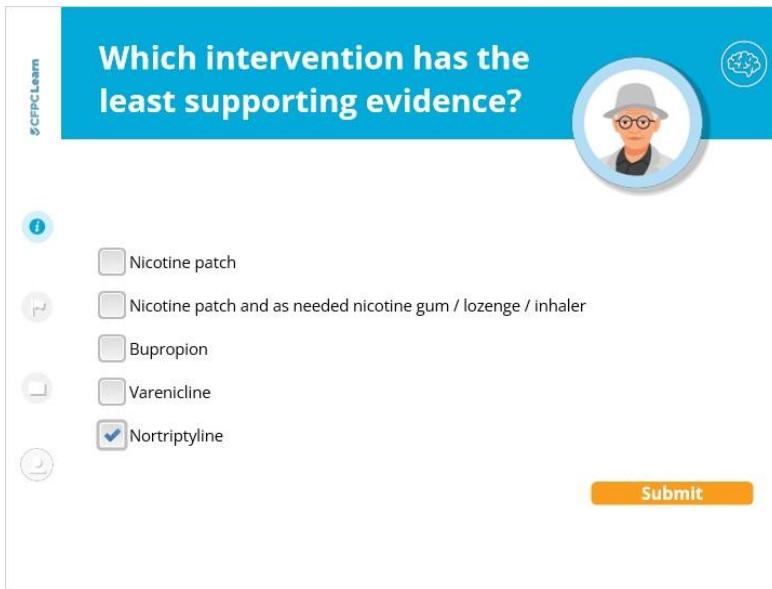
Advice and follow up

Intensive advice is more effective than minimal advice (RR 1.84). There is also a small benefit of follow-up visits.

Moving Forward

2.4 Recommendation

(Multiple Response, 10 points, 1 attempt permitted)



CFPC Learn

Which intervention has the least supporting evidence?

Nicotine patch

Nicotine patch and as needed nicotine gum / lozenge / inhaler

Bupropion

Varenicline

Nortriptyline

Submit

Correct	Choice
	Nicotine patch
	Nicotine patch and as needed nicotine gum / lozenge / inhaler

Correct	Choice
	Bupropion
	Varenicline
X	Nortriptyline

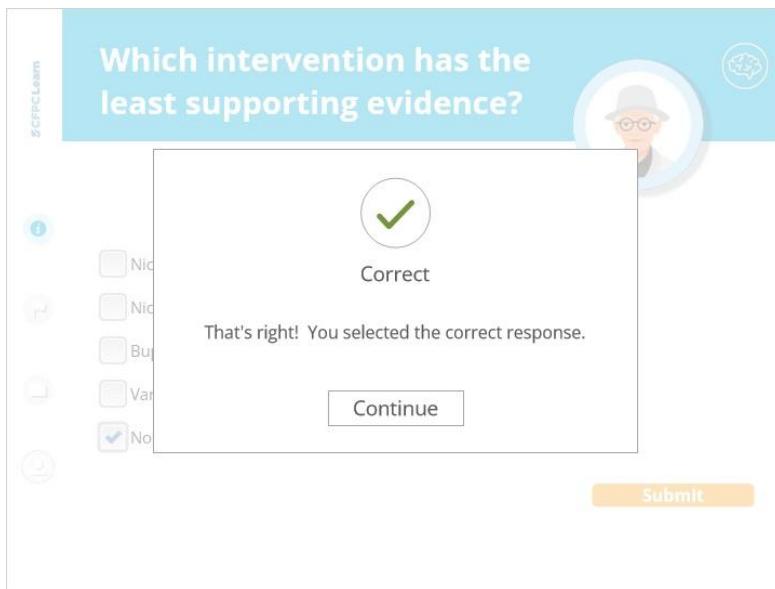
Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

Correct (Slide Layer)



The slide layer has a light blue header with the question: "Which intervention has the least supporting evidence?". On the left, there are navigation icons for back, forward, and search. The main content area shows a list of interventions with checkboxes: Nic, Nic, Bu, Var, and No. The 'No' checkbox is checked. A large green checkmark icon is centered above the word 'Correct'. Below it, the message "That's right! You selected the correct response." is displayed. A "Continue" button is at the bottom left, and a "Submit" button is at the bottom right.

Incorrect (Slide Layer)



Which intervention has the least supporting evidence?

Nic

Nic

Bu

Var

No

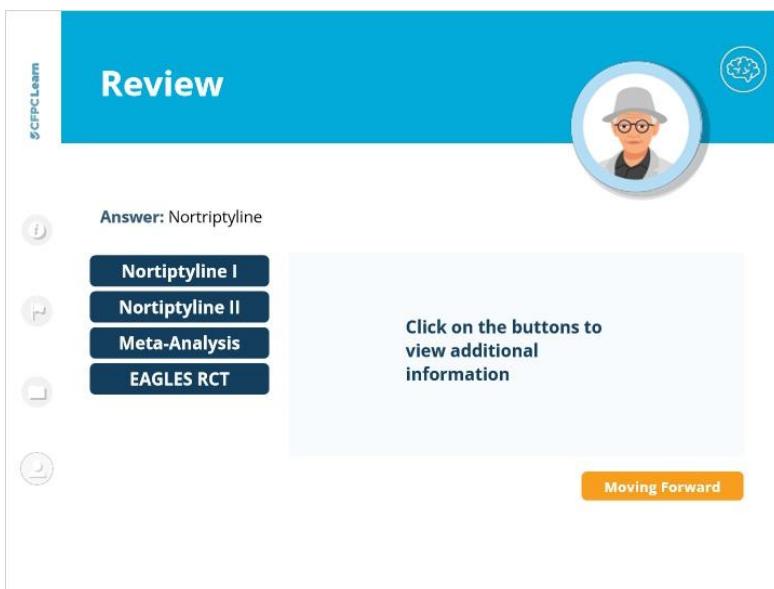
Incorrect

You did not select the correct response.

Continue

Submit

2.5 Review



Review

Answer: Nortriptyline

Nortriptyline I

Nortriptyline II

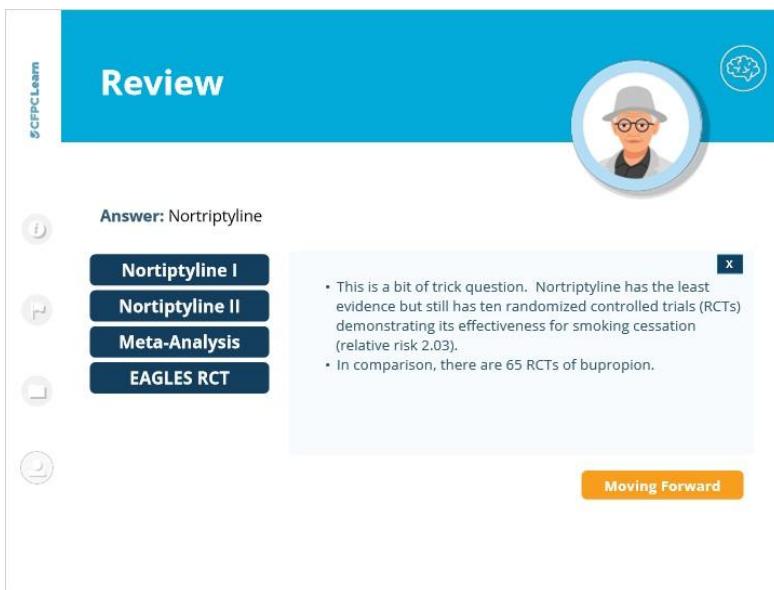
Meta-Analysis

EAGLES RCT

Click on the buttons to view additional information

Moving Forward

Nortriptyline (Slide Layer)



CFPC Learn

Review

Answer: Nortriptyline

Nortriptyline I

Nortriptyline II

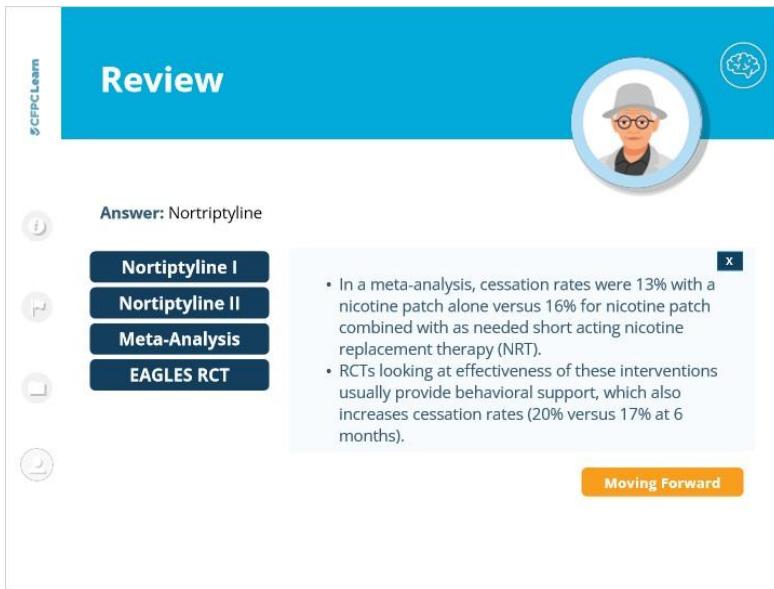
Meta-Analysis

EAGLES RCT

- This is a bit of trick question. Nortriptyline has the least evidence but still has ten randomized controlled trials (RCTs) demonstrating its effectiveness for smoking cessation (relative risk 2.03).
- In comparison, there are 65 RCTs of bupropion.

Moving Forward

meta-analysis (Slide Layer)



CFPC Learn

Review

Answer: Nortriptyline

Nortriptyline I

Nortriptyline II

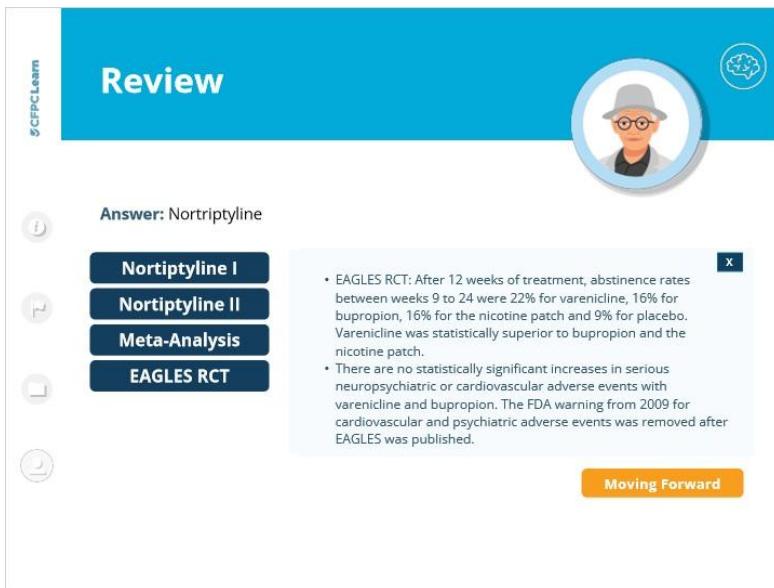
Meta-Analysis

EAGLES RCT

- In a meta-analysis, cessation rates were 13% with a nicotine patch alone versus 16% for nicotine patch combined with as needed short acting nicotine replacement therapy (NRT).
- RCTs looking at effectiveness of these interventions usually provide behavioral support, which also increases cessation rates (20% versus 17% at 6 months).

Moving Forward

EAGLES RCT (Slide Layer)



Answer: Nortriptyline

Nortriptyline I

Nortriptyline II

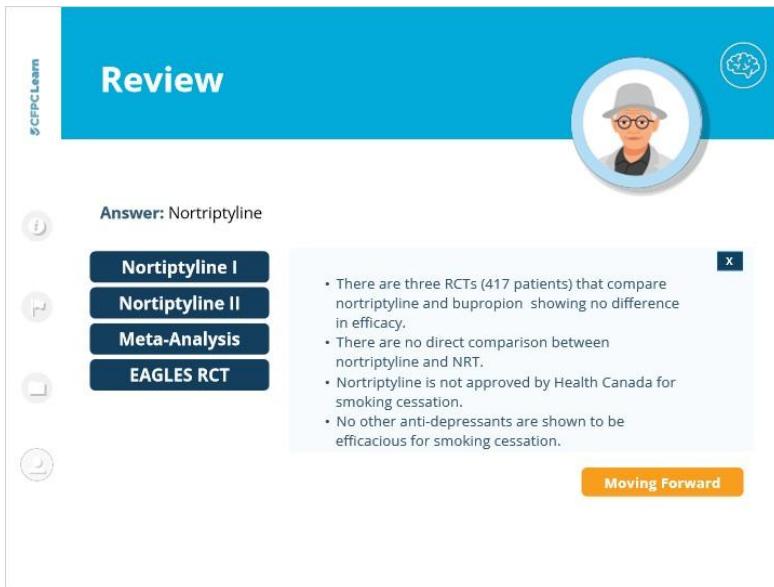
Meta-Analysis

EAGLES RCT

- EAGLES RCT: After 12 weeks of treatment, abstinence rates between weeks 9 to 24 were 22% for varenicline, 16% for bupropion, 16% for the nicotine patch and 9% for placebo. Varenicline was statistically superior to bupropion and the nicotine patch.
- There are no statistically significant increases in serious neuropsychiatric or cardiovascular adverse events with varenicline and bupropion. The FDA warning from 2009 for cardiovascular and psychiatric adverse events was removed after EAGLES was published.

Moving Forward

Nortriptyline - Copy (Slide Layer)



Answer: Nortriptyline

Nortriptyline I

Nortriptyline II

Meta-Analysis

EAGLES RCT

- There are three RCTs (417 patients) that compare nortriptyline and bupropion showing no difference in efficacy.
- There are no direct comparison between nortriptyline and NRT.
- Nortriptyline is not approved by Health Canada for smoking cessation.
- No other anti-depressants are shown to be efficacious for smoking cessation.

Moving Forward

2.6 True or False 2

(Multiple Response, 10 points, 1 attempt permitted)

CFPCLearn

True or false?



1

Xiao: How about e-cigarettes? Are they any better than the pills? My son started using them. He likes them but I'm not sure they are better. In the end, you are still addicted to nicotine. I'm not sure I'd like that.

2

There is good evidence that nicotine e-cigarettes are more effective than varenicline or bupropion.

True

False

Submit

Correct	Choice
	True
X	False

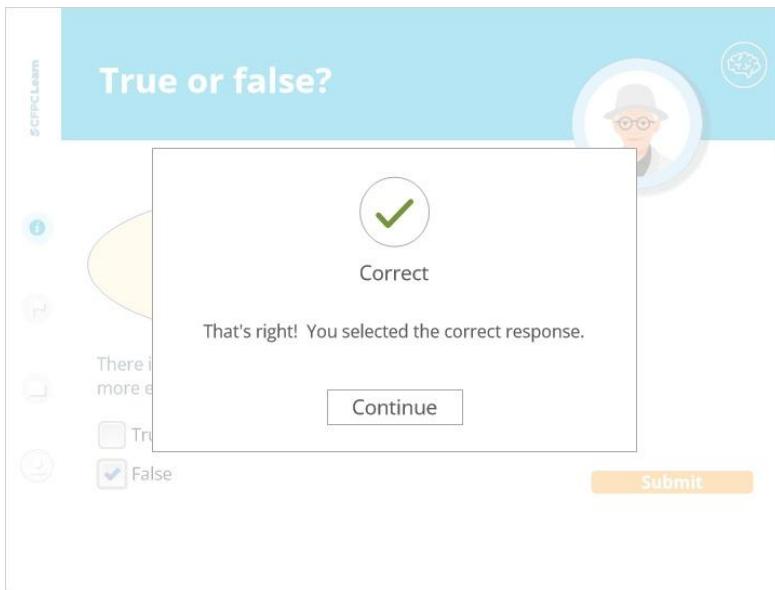
Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

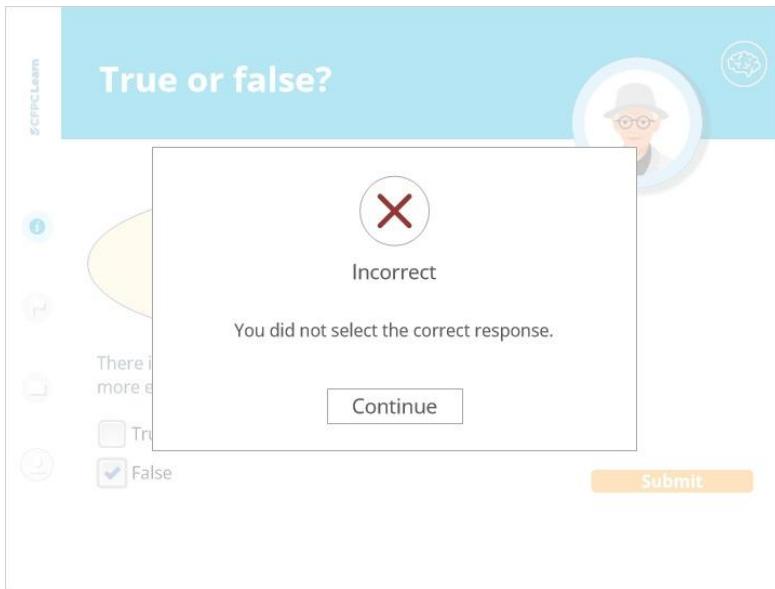
You did not select the correct response.

Correct (Slide Layer)



The slide is titled "True or false?". A large green checkmark icon is centered on the screen. Below it, the word "Correct" is displayed. A message below the checkmark says, "That's right! You selected the correct response." A "Continue" button is located in the bottom right corner of the slide area. On the left side of the slide, there is a sidebar with icons and text: a blue circle with a white question mark, a yellow circle with a white plus sign, and a grey circle with a white minus sign. Below these are the words "There is more to learn" and two radio button options: "True" (unchecked) and "False" (checked). A "Submit" button is located in the bottom right corner of the slide area.

Incorrect (Slide Layer)



The slide is titled "True or false?". A large red X icon is centered on the screen. Below it, the word "Incorrect" is displayed. A message below the X says, "You did not select the correct response." A "Continue" button is located in the bottom right corner of the slide area. On the left side of the slide, there is a sidebar with icons and text: a blue circle with a white question mark, a yellow circle with a white plus sign, and a grey circle with a white minus sign. Below these are the words "There is more to learn" and two radio button options: "True" (unchecked) and "False" (checked). A "Submit" button is located in the bottom right corner of the slide area.

2.7 Review

The slide has a blue header with the title 'E-cigarettes: Evidence review'. Below the header is a circular profile picture of a person with glasses and a grey hat. To the right of the profile picture is a brain icon. On the left side of the slide, there are four small circular icons: a question mark, a brain, a person, and a circular arrow. In the center, there is a light blue box containing the text 'Answer: False' and two buttons: 'Evidence I' (light blue) and 'Evidence II' (dark blue). To the right of the box is the text 'Click on the buttons to view additional information'. At the bottom right of the slide is an orange button labeled 'Moving Forward'.

Evidence (Slide Layer)

The slide layer has a blue header with the title 'E-cigarettes: Evidence review'. Below the header is a circular profile picture of a person with glasses and a grey hat. To the right of the profile picture is a brain icon. On the left side of the slide, there are four small circular icons: a question mark, a brain, a person, and a circular arrow. In the center, there is a light blue box containing the text 'Answer: False' and two buttons: 'Evidence I' (light blue) and 'Evidence II' (dark blue). To the right of the box is the text 'There is no high quality RCT comparing e-cigarettes to varenicline or bupropion.' and a small 'x' icon. Below this text is a larger block of text: 'A 2021 Cochrane review showed that quit rates were higher in people receiving electronic cigarettes compared to NRT (RR 1.53). Most common adverse events are mouth irritation, headache, cough and nausea. There was no evidence of serious harms but follow-up was limited to 2 years.' At the bottom right of the slide is an orange button labeled 'Moving Forward'.

Evidence II (Slide Layer)

 E-cigarettes: Evidence review

Answer: False

Evidence I  **Evidence II**  

- In one RCT (2022), patients unable to stop smoking with usual treatments were more likely to achieve abstinence at 6 months with e-cigarettes (19.1% vs 3% with NRT).
- Nicotine e-cigarettes appear to be more effective than non-nicotine e-cigarettes.
- In some trials, continued use of e-cigarettes has been high, up to 80% of participants. For this reason, e-cigarettes remain controversial and are usually used as a harm reduction strategy.



2.8 Multiple choice question

(Multiple Response, 10 points, 1 attempt permitted)

 Choose the correct statement.

Xiao: I don't know. It's been 50 years. I'm scared to disappoint Li if I can't quit. I'm not sure I'm ready now. I need a bit more time... Are you sure you are giving me the strongest thing? Can I start the pills now?

Adding NRT products to varenicline has no additional benefits

If patients are not ready to quit today but may be in 3 months, one should start varenicline or NRT today



Correct Choice

Adding NRT products to varenicline has no additional benefits

Correct Choice

X If patients are not ready to quit today but may be in 3 months, one should start varenicline or NRT today

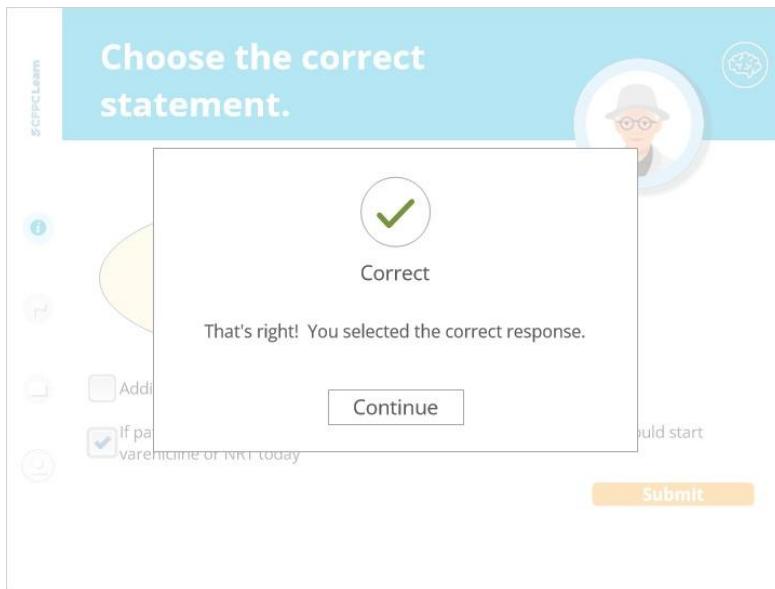
Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

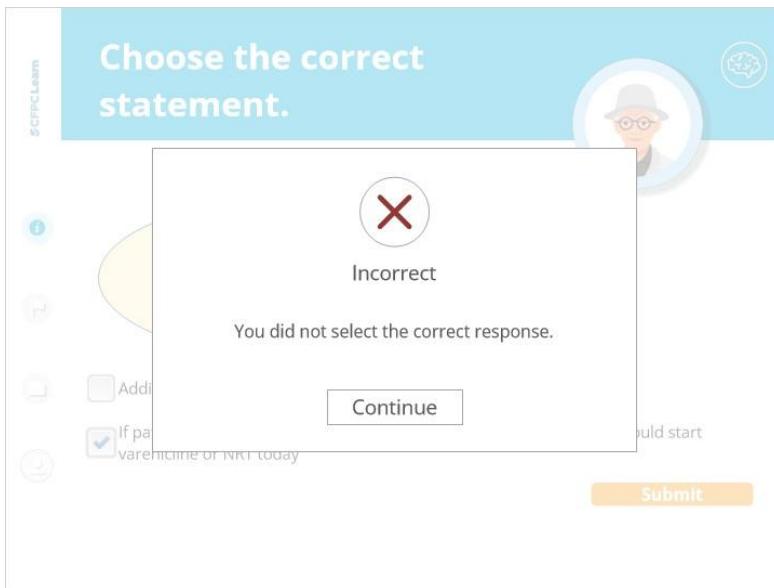
Correct (Slide Layer)



The screenshot shows a slide layer with the following content:

- Header:** Choose the correct statement.
- Feedback:** Correct
- Text:** That's right! You selected the correct response.
- Buttons:** Continue, Submit
- Left sidebar:** Shows icons for back, forward, and search, along with a list:
 - Add
 - If pa varenicline or NRT today

Incorrect (Slide Layer)



Choose the correct statement.

Incorrect

You did not select the correct response.

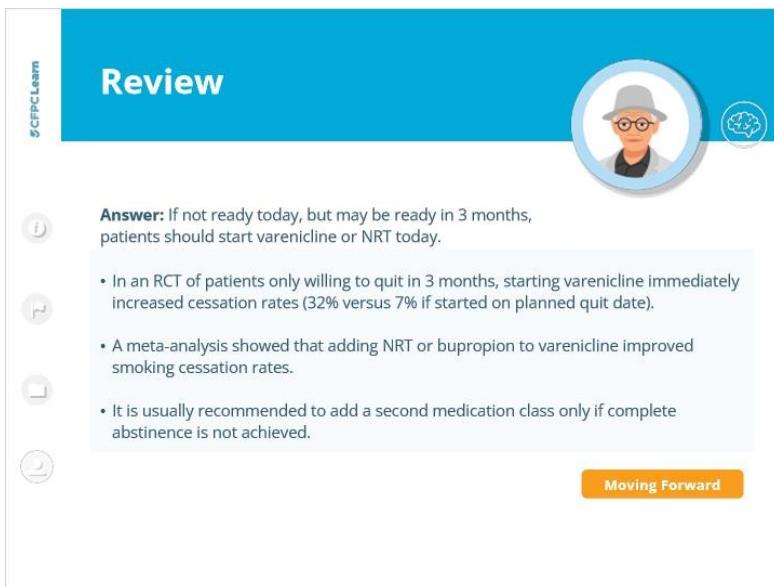
Add

If pa

Continue

Submit

2.9 Review



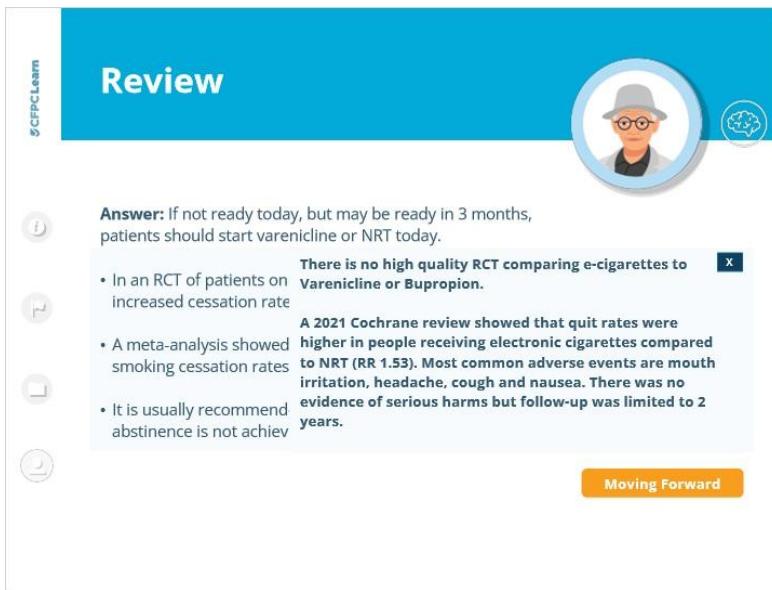
Review

Answer: If not ready today, but may be ready in 3 months, patients should start varenicline or NRT today.

- In an RCT of patients only willing to quit in 3 months, starting varenicline immediately increased cessation rates (32% versus 7% if started on planned quit date).
- A meta-analysis showed that adding NRT or bupropion to varenicline improved smoking cessation rates.
- It is usually recommended to add a second medication class only if complete abstinence is not achieved.

Moving Forward

Cochrane (Slide Layer)



Answer: If not ready today, but may be ready in 3 months, patients should start varenicline or NRT today.

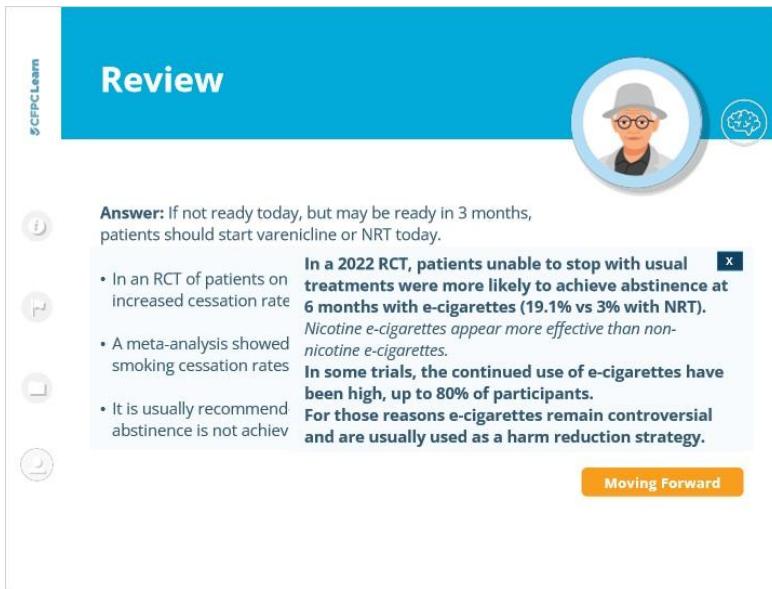
- In an RCT of patients on increased cessation rate
- A meta-analysis showed smoking cessation rates
- It is usually recommended abstinence is not achieved

There is no high quality RCT comparing e-cigarettes to Varenicline or Bupropion.

A 2021 Cochrane review showed that quit rates were higher in people receiving electronic cigarettes compared to NRT (RR 1.53). Most common adverse events are mouth irritation, headache, cough and nausea. There was no evidence of serious harms but follow-up was limited to 2 years.

Moving Forward

Nicotine e-cigarettes (Slide Layer)



Answer: If not ready today, but may be ready in 3 months, patients should start varenicline or NRT today.

- In an RCT of patients on increased cessation rate
- A meta-analysis showed smoking cessation rates
- It is usually recommended abstinence is not achieved

In a 2022 RCT, patients unable to stop with usual treatments were more likely to achieve abstinence at 6 months with e-cigarettes (19.1% vs 3% with NRT). Nicotine e-cigarettes appear more effective than non-nicotine e-cigarettes.

In some trials, the continued use of e-cigarettes have been high, up to 80% of participants. For those reasons e-cigarettes remain controversial and are usually used as a harm reduction strategy.

Moving Forward

2.10 Create a Plan

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Let's Make a Plan



Using what you have learned write a plan for Xiao. It can include any/all of the following: lifestyle intervention(s), prescription intervention(s), lab(s)/test(s) required, follow up appointment time frame, and referral required.

Fill in your plan for the patient here



See how your plan compares

2.11 Plan Answers

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Xiao Yun



This is the proposed plan for Xiao. How does your plan compare?

Quit
Medication
Counselling
Follow Up

Select details on the left to see suggested recommendations

What's in a name?

Quit (Slide Layer)

This slide layer is titled 'Xiao Yun' and features a circular profile picture of a man with glasses and a grey hat. The main text asks, 'This is the proposed plan for Xiao. How does your plan compare?'. On the left, there is a vertical navigation bar with icons for back, forward, and search, and a 'What's in a name?' button. On the right, a list of options is shown: 'Quit', 'Medication', 'Counselling', and 'Follow Up'. A detailed description of the proposed plan follows: 'Xiao agrees to quit smoking in 3 months.' A small 'x' icon is in the top right corner of the slide area.

Medication (Slide Layer)

This slide layer is titled 'Xiao Yun' and features a circular profile picture of a man with glasses and a grey hat. The main text asks, 'This is the proposed plan for Xiao. How does your plan compare?'. On the left, there is a vertical navigation bar with icons for back, forward, and search, and a 'What's in a name?' button. On the right, a list of options is shown: 'Quit', 'Medication', 'Counselling', and 'Follow Up'. A detailed description of the proposed plan follows: 'You do not wait for his quit date. Instead, you start him on varenicline 0.5mg PO daily x 3 days then 0.5mg PO BID x 4 days then 1mg PO BID.' A small 'x' icon is in the top right corner of the slide area.

Counselling (Slide Layer)



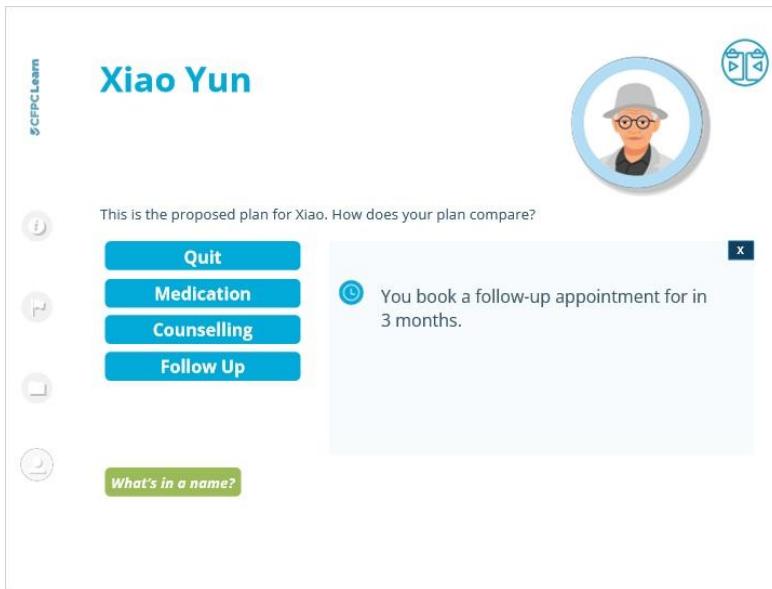
This is the proposed plan for Xiao. How does your plan compare?

Quit
Medication
Counselling
Follow Up

You also refer him to the local resource for counselling support to assist with cessation.

What's in a name?

Follow Up (Slide Layer)



This is the proposed plan for Xiao. How does your plan compare?

Quit
Medication
Counselling
Follow Up

You book a follow-up appointment for in 3 months.

What's in a name?

Name (Slide Layer)

This is the proposed plan for Xiao. How does your plan compare?

Quit

Medication

Counselling

Follow Up

Meaning behind Xiao Yun's name:

Xiao Yun means "cloud."

What's in a name?

2.12 References

Thanks for visiting the clinic!

References are available [here](#).

This activity is eligible for up to 0.25 Mainpro+ credits.