Concurrent Sessions Abstracts
(in alphabetical order from first author’s surname)

1. The Use of QCSRF and NEEDNT Questionnaires to Monitor Weight Gain Post Cessation

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Poster Presentation
Introduction Weight gain is a concern for clients wanting to quit smoking. The use of the Questionnaire on Craving for Sweet and Rich Food (QCSRF) and the Non-Essential Energy-Dense Nutritionally deficient food (NEEDNT) questionnaire may be useful in the clinical setting to complement weight and body mass index (BMI) measurements. This study aims to validate these instruments and describe their ease of use. Method The QCSRF and NEEDNT were administered to 256 New Zealand smokers who planned to quit smoking and who were participants in a longitudinal observational study. Results The QCSRF was found to have similar factor structure as the original study. The QCSRF was correlated with the NEEDNT (rs = 0.273, N = 256, p < 0.01) Discussion The QCSRF was found to have similar validity in measuring craving for sweet and rich food as the original study. The correlation with NEEDNT was expected and reassuring. Both instruments were easily used in the clinic setting, taking 10 minutes to complete. The NEEDNT is used as an alternative for a food diary and creates opportunities to discuss healthy eating. Therefore these instruments may be useful to monitor certain foods as possibilities of weight gain on quitting smoking.

2. Ethnic differences of tobacco smoking during pregnancy and the birth weight: Tailoring cessation programs

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Poster Presentation
Background: Roma are Hungary’s greatest minority (8%) with low socioeconomic status (SES) and the worst low birth weight (LBW) outcomes. Tobacco smoking during pregnancy (TSDM) is widespread among Roma, affecting heavily the babies’ BW. Methods: In a retrospective cohort study of singleton babies’ mothers (N = 12,417), we separated the self-identified Roma (n = 3,054), and non-Roma (n = 7,538), LBW (n = 880) and normal BW (n = 9,712) cases. We used logistic regression to assess factors that contribute to LBW (p < .05) and linear regression to measure differences among BW babies (p < .05). Results: Comparing Roma/non-Roma subsamples, the LBW frequency was 12.9% versus 6.4%, TSDM 87.9% versus 47.4%, teenage pregnancy 9.1% versus 0.9%, and BMI-underweight 21.2% versus 10.0%. Being Roma was not significant in the logistic regression model, however TSDM increased the probability of LBW two-fold (95% CI = 1.74–2.56), the BMI-underweight by 1.9 (95% CI = 1.56–2.28). In the linear regression model, being Roma lowered average birth-weight (118.6 gram (95% CI = 88.1–149.1) with TSDM (186.3 gram; 95% CI = 159.5–213.0), BMI-underweight (230.9 gram 95% CI = 201.4–260.4) and the mother’s age.
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