Anti-tobacco education: the need for trials of greater length and rigor

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Dear Editor,

Kanicka et al. are to be praised for their excellent report into the effects of an anti-tobacco education programme [1]. The programme improved knowledge but seemed to have no effect on the hard outcome of behaviour and it is worth considering why. There are two main possibilities and they should be explored as they could have real effects on the way that future studies are conducted.

First of all, the control group received no intervention. It may have been better if there was no control group but rather a number of arms to the study where different groups received different interventions. One of the interventions may have had more of an effect on behaviours than the others, and this would have enabled the researchers to delineate exactly what components of an educational programme actually has an effect on behaviours. Some interventions may have been briefer and perhaps of lower cost than the others, and once again this might have enabled the researchers to draw conclusions about the intervention that was most effective and of lowest cost. All these conclusions, however, could only be drawn from a multi-arm controlled trial.

Secondly, although the intervention seemed to have no observed effect on behaviour, the follow up period was quite short. Those involved in the trial were schoolchildren and yet smoking is a lifelong addiction. Therefore, those in the intervention group who stopped smoking a few years after the education would still have gained considerably in terms of their health. Longer trials are more expensive to run; are associated with much more logistics; and inevitably there is a higher drop-out rate. However, in the case of interventions to prevent smoking, the increased expense and logistics are justified by the potential gains from showing the long-term effects of an intervention.

REFERENCES