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Text Messaging in Encouraging Smoking Cessation among Non-Communicable Disease Patients: What to be Considered?

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Dear Editor

We would like to comment on the publication "Effectiveness of Text Messaging in Encouraging Smoking Cessation among Non-Communicable Disease Patients: A Randomized Controlled Trial [1]." The purpose of this study was to determine the efficacy of a text messaging intervention for smoking cessation in noncommunicable disease patients. A total of 200 participants were randomly allocated to one of two groups: the intervention group, which got regular text messages supporting smoking cessation, or the control group, which received no text messages. The study looked at the prevalence of smoking cessation throughout a seven-day period, as well as exhaled carbon monoxide (CO) levels at baseline, six weeks, and 18 weeks. The intervention group had significantly higher smoking cessation rates and lower CO levels at both follow-up periods.

If positive findings are to be obtained, several methodological flaws must be addressed. First, relying on self-reported smoking cessation may create bias, as smokers may exaggerate their success to please researchers. Furthermore, the lack of long-term follow-up beyond 18 weeks makes it difficult to judge the long-term viability of smoking cessation obtained by the intervention. Furthermore, the study did not investigate participant variables that may have influenced the acceptability of the intervention, such as age, socioeconomic position, or psychosocial issues, which would have provided a more complete explanation of the intervention's effectiveness.

Future studies should include extended followup periods to establish whether smoking cessation is maintained after 18 weeks. Furthermore, qualitative data could be gathered to further understand participants' experiences and perspectives of the text message intervention. Increasing the sample size and enrolling a varied population in various situations Together, these factors may improve the results' generalizability. Researchers might also investigate messaging tactics, such as individualized messages suited to individual incentives and barriers, to enhance the intervention's impact.

How to Make Things Novel Technology-driven solutions could be included into smoking cessation therapies to make them more innovative. To engage people, for instance, utilizing a smartphone application that caters to individual needs, monitors progress, and offers immediate feedback can be more successful than simply texting. Gamification features that offer rewards for reaching targets could encourage users to keep stopping. Furthermore, these apps' social support features let users connect with others who are also trying to quit, which promotes accountability and keeps users motivated to keep trying.

Other strategies for encouraging smoking cessation include texting, incorporating behavioral therapies into programs, using online and in-person counselors, and offering educational workshops that highlight the negative health effects of smoking and give participants coping mechanisms. All of these strategies may increase participants' intentions to stop. Moreover, pharmaceutical therapies that can be administered in conjunction with behavioral approaches like nicotine replacement therapy should be taken into consideration. Ultimately, extensive public health initiatives that highlight the negative effects of smoking and the advantages of giving it up can foster a supportive atmosphere that successfully motivates people to give up.

References

 Saksiri O, Intarut N. Effectiveness of text messaging in encouraging smoking cessation among non-communicable disease patients: A randomized controlled trial. Asian Pac J Cancer Prev. 2024;25(7):2493-8. https://doi.org/10.31557/ apjcp.2024.25.7.2493.

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Reply to the letter to the editor: Text Messaging in Encouraging Smoking Cessation among Non-Communicable Disease Patients: What to be considered?

Dear Editor

We thank the authors for commenting and interesting

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in tobacco control research. we would like to response the commenting from the authors as follows;

"First, relying on self-reported smoking cessation may create bias, as smokers may exaggerate their success to please researchers". As outlined in the article, we assessed the outcome using both self-reported question and biomarkers.

"Furthermore, the lack of long-term follow-up beyond 18 weeks makes it difficult to judge the long-term viability of smoking cessation obtained by the intervention": Certainly! This study focused on short-term effectiveness due to the fact that evaluating long-term outcomes is both time-consuming and costly.

"Furthermore, the study did not investigate participant variables that may have influenced the acceptability of the intervention, such as age, socioeconomic position, or psychosocial issues, which would have provided a more complete explanation of the intervention's effectiveness"

We examined the CO value by adjusting for baseline characteristics such as age, education, occupation, income, marital status, and Fagerstrom test scores in the mixed linear regression, as detailed in Table 3. Additionally, we excluded participants with drug abuse.

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