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# Smoking cessation for psychotic patients facing compulsory treatment in a French inpatient psychiatric unit

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### **Background**

Patients with a psychotic disorder have consistently been shown to have very high rates of smoking and they have between 2 and 4 times the rates of cardiovascular and respiratory diseases of the general population. The French law of November 2006, decret nø2006-1386, bans smoking in public places and therefore in public hospitals.

#### **Methods**

The study takes place in an inpatient psychiatric unit where free, voluntary and compulsory patients mostly with DSM IVR schizophrenia and mood disorders are hospitalized. Patients facing compulsory treatment arrive in acute or very acute state, often by force, and they need a tailored smoking cessation program, combining nicotine transdermal patches, gums, but also motivational intervention, psychoeducation, diet counselling and physical exercises.

#### Results

Nicotine replacement therapy plus motivational intervention and multidisciplinary care are necessary to reduce anxiety, depression and food craving, and they have to go on for months. Antipsychotic medications in combination with transdermal patches may be useful. Alcohol or cannabis addictive disorders worsen the prognosis. Smoking cessation is more difficult for anxious and depressed patients. Young patients are less sensible to health complications than to recovered personal freedom. There is a need to reduce psychotropic medications while carrying out the smoking cessation program.

#### Conclusion

Patients with psychotic or mood disorders have a high rate of cigarette smoking. Patients facing compulsory hospitalization must stop in acute state and they need targeted smoking cessation policies in order first to convince, rather than to constrain them: that's a new challenge for them, but for caregivers too.