The 5 R's

The **5 R's** may help a patient identify personal reasons that can motivate her to eventually try to quit smoking.

Relevance: Patient identifies motivational factors

Risks: Patient identifies potential negative consequences of continued smoking.

Rewards: Patient describes how quitting would benefit her and her family.

Roadblocks: Patient identifies barriers to quitting.

Repetition: Repeat at every visit for patients who smoke.

Relevance. Encourage the patient to discuss why quitting may be personally relevant – for example, because there are children in the home – to help her identify motivational factors on her own. The idea is to link the motivation to quit to the patient's personal situation, being as specific as possible.

Risks. To ensure that the patient understands the risk to her own health and to her baby's health if she continues to smoke, ask her to identify potential negative consequences. One way to begin this part of the discussion is to ask, "Although you do not want to or are not ready to quit now, what have you heard about smoking during pregnancy?" If the patient seems unaware of the risks, this is a good time to give her pregnancy-specific information. A patient who has had a healthy child while smoking may be unconvinced of the need to quit. This is an opportunity to reiterate the benefits of quitting for this pregnancy and for the child or children she already has. Also, she needs to be aware that each pregnancy is different and she is different as well: older, smoking longer, may have a new chronic disease. The absence of complications in a previous pregnancy does not guarantee future pregnancies free of trouble.

Rewards. Ask the patient to describe how quitting smoking might benefit her and her family. Depending on her situation, she may need some examples, such as, "You will have more energy to take care of yourself and your new baby," or "You'll set a good example for your children and their friends." The patient's history and comments about her smoking behavior can provide valuable information to create a checklist of factors that will increase her motivation to quit – for example, saving money, taking the baby home from the hospital with her, protecting a child who has asthma, less time required for smoking-related doctors' visits, vanity (healthier skin, absence of odor), and pleasing family and friends.

Roadblocks. Most patients can easily identify barriers to quitting. Reassure the patient that assistance is available to help her overcome roadblocks such as withdrawal symptoms, weight gain, another smoker in the house, and emotional consequences. Problem-solving strategies and tools, including information, can be applied to many situations once roadblocks are identified (see Table 6).

Repetition. Follow up at each visit to see if the patient has changed her mind about undertaking a quit attempt. Tell patients who have tried to quit and relapsed that most people make repeated attempts to quit before they are successful, that she can learn from repeated quit attempts, and each new attempt increases the likelihood of quitting. For a patient who does not respond to the 5 R's intervention, it may be useful to provide information about how to get help if she changes her mind.