

Introduction

In 1982, the National Cancer Institute began the Smoking and Tobacco Control Program (STCP). The STCP included a comprehensive research program for testing the efficacy of a variety of smoking intervention strategies. To date, nearly \$300 million has been allocated for this effort (Figure 1), making the STCP the largest program of its kind in the world.

Figure 1
National Cancer Institute funding for smoking and tobacco control research

(in \$000's)

1982	10,943
1983	9,476
1984	16,721
1985	21,131
1986	27,099
1987	37,288
1988	39,604
1989	40,151
1990	41,500
1991	46,900
Total 1982-1991	\$290,813

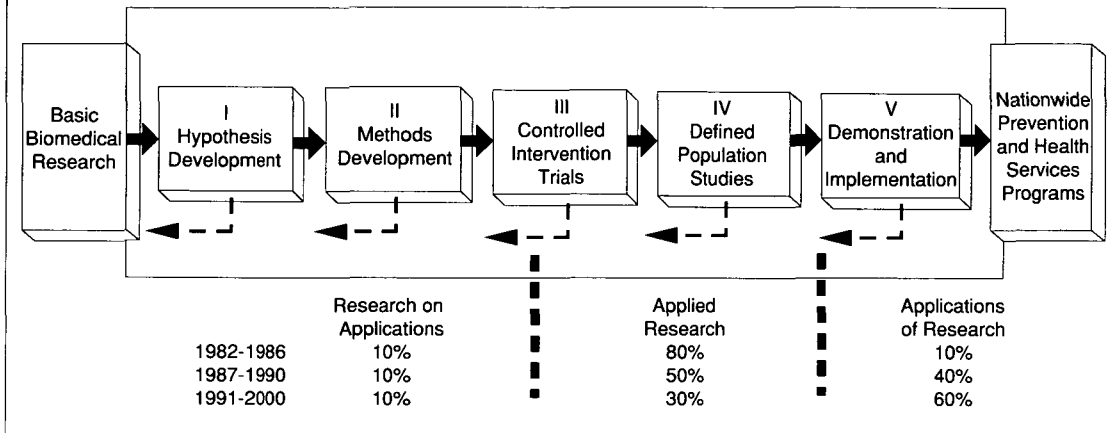
Source: National Cancer Institute

STCP TRIAL AREAS

The priorities for STCP intervention research grew from a systematic planning process for cancer prevention and control that had already been developed within the National Cancer Institute. This early strategy positioned the control of smoking as the cornerstone for NCI's effort to reduce cancer mortality by 50 percent by the end of the 1990's. The strategy's blueprint was a model that defined NCI priorities for cancer control (Figure 2).

Priorities for STCP intervention activities evolved from state-of-the-art reviews and consensus development incorporating contributions from hundreds of scientists and public health experts. The result was the two-pronged strategy now in use. The first part involves the study of intervention methods that are school-based programs, self-help techniques, physician-delivered and dentist-delivered interventions, mass media

Figure 2
Cancer control phases applied to smoking and tobacco control research



approaches, and community-based interventions. The second strategic arm targets specific populations that are (1) at greater risk for developing cancer and/or (2) amenable to prevention/cessation strategies. Included in the second strategy are youth, ethnic minority groups, women, smokeless tobacco users, and heavy smokers.

While nearly 100 separate intervention trials and studies now make up the NCI portfolio of smoking and tobacco use intervention research, 60 trials constitute the original core of the STCP program (Figure 3).

To aid in the national dissemination of STCP trial results, a series of monographs, of which this is the first, will be produced. This first monograph, *Strategies To Control Tobacco Use in the United States: A Blueprint for Public Health Action in the 1990's*, presents an overview of the components of an effective, comprehensive smoking control strategy. Future monographs will focus on individual trial areas or related topics.

SMOKING AND TOBACCO CONTROL MONOGRAPHS

Smoking and Tobacco Control Monographs are but one means that NCI uses for informing both the public health and research communities of emerging results from the smoking intervention trials initiated in the mid-1980's. While monograph contents will be based primarily on information and findings from NCI-funded trials and studies, they also will address various issues of importance to the public health community in the effort to reduce smoking-related disease. One important area, which recently has begun to receive increased attention, is that of policies and their effect on practices related to smoking and tobacco use.

Figure 3

Smoking and tobacco control intervention trials

Goal: To develop and evaluate interventions to aid in either stopping or preventing tobacco use.

Number of Trials (1983-1987): 60

<u>Intervention Areas</u>	<u>Number of Trials</u>
School-Based Interventions	10
Self-Help Strategies	7
Physician/Dentist Interventions	6
Mass Media Interventions	5
Interventions in Black Populations	8
Interventions in Hispanic Populations	3
Interventions in Populations of Women	5
Control of Smokeless Tobacco Use	5
Heavy Smoker Interventions	11
Total	60

Purpose

In developing the concept for the Smoking and Tobacco Control Monographs, the Institute intended that the publications serve four major objectives:

1. Provide a cohesive and integrated description of individual smoking and tobacco issues, control strategies, and trial results to allow maximal utilization and dissemination of current and evolving knowledge and thereby influence the professional and layperson's understanding of these matters.
2. Significantly reduce the time between availability of information emanating from research projects and the publication and wide dissemination of this information.
3. Enhance the rapidity and efficiency with which NCI can utilize findings from research trials as a means of reducing cancer morbidity and mortality for those cancers most associated with tobacco use.
4. Provide a mechanism for codification and synthesis of information relevant to the use of those agencies, institutions, and individuals in the Nation that can affect the formulation of public policy related to smoking and tobacco use.

The rapidly growing understanding of what constitutes an effective strategy for controlling tobacco use has outstripped the ability of the peer-reviewed literature to disseminate this understanding to those responsible for implementing smoking

control programs. The limited space available in peer-reviewed journals and the relatively long lag time from the initiation of a study to the publication of its results are barriers to the rapid dissemination of new information and approaches to tobacco control. In addition, the dispersion of information on a given smoking control approach across multiple journals and different years of publication makes it very time-consuming and complicated to assemble a comprehensive picture of what is known about that approach. The Smoking and Tobacco Control Monographs are intended to aid in overcoming these barriers to information dissemination.

**Monograph
Development
Process**

The major strength of the peer-reviewed literature and of Government reports on smoking, such as the Surgeon General's reports on the health consequences of smoking, has been the extensive review provided by individuals knowledgeable and experienced in the topic under examination. In establishing the editorial system for the STCP monographs, NCI has decided to adopt a process that relies extensively on input from the large number of talented researchers and program personnel currently working to reduce the burden that tobacco places on our society. The following summarizes the process for compiling the Smoking and Tobacco Control Monographs.

**Topic Selection
And Outline**

The staff of the STCP, in consultation with its support contractor and outside experts, develops a short list of possible monograph topics or ideas for consideration, and from that list a single topic is selected. The selection is based on program need, availability of data (both within and outside the program), public health importance, and other factors. The monograph's senior scientific editor develops a detailed outline and transmits it to Institute staff along with a list of candidate authors for individual sections and chapters.

**Scientific Content
Development**

Individual authors are recruited to produce draft manuscripts. Because the monograph content is based primarily on NCI-supported intervention trials, the majority of authors are STCP principal investigators. An editorial team is assembled, consisting of the senior scientific editor and consulting editors with expertise in the area under development.

Depending on the complexity and length of the proposed material, authors are asked to produce an initial draft manuscript between 90 and 120 days after accepting their writing assignments. During this time, the authors are encouraged to discuss any problems of content, focus, or style with the monograph editorial team.

After the initial drafts are produced, a 1-day working meeting of all monograph participants (authors, editors, and STCP and contractor staff) is convened. During that meeting, each author is provided with specific comments and suggestions.

Approximately 60 days after the initial meeting, a second meeting of participants is convened, and final suggestions are provided. Within 30 to 45 days after the second meeting, a final version of each manuscript is delivered to the Institute. The individual manuscripts are then edited and consolidated into chapters by the Smoking and Tobacco Control Monograph editors.

Peer Review

All manuscripts are subjected to a two-tier peer review process. This process includes chapter reviews, whereby two or three experts in each subject area are asked to provide a critical review. Concurrent with the first review, a second peer review is conducted, involving senior scientists—individuals who have a long history of involvement in smoking control. These individuals are sent the entire monograph manuscript. Comments and criticisms from both groups are incorporated into the document by the scientific editorial team in collaboration with STCP staff.

The First Volume

This monograph was the work of dozens of individuals—STCP trial investigators, public health and smoking control experts, and scientists and experts from other disciplines.

The monograph is organized into six chapters:

Chapter 1—The Scientific Rationale for Comprehensive, Community-Based, Smoking Control Strategies

Chapter 2—Evolution of Smoking Control Strategies

Chapter 3—Smoking Prevalence and Lung Cancer Death Rates

Chapter 4—Approaches Directed to the Individual

Chapter 5—Approaches Directed to the Social Environment

Chapter 6—Interdependence and Synergy Among Smoking Control Activities.