

SCOPE STATEMENT FOR HERC COVERAGE GUIDANCE

INTERVENTIONS TO REDUCE THE HARMS OF TOBACCO DURING PREGNANCY

Population description	Women during pregnancy and the postpartum period <i>Population scoping notes: Includes all forms of tobacco, including e-cigarettes</i>
Intervention(s)	Screening for tobacco use, pharmacotherapy, behavioral interventions (telephonic, in person, individual, group), Internet based interventions, and multisector interventions such as policy, systems, and environmental change <i>Intervention exclusions: None</i>
Comparator(s)	No care, usual care, other studied interventions
Outcome(s) (up to five)	Critical: Pregnancy complications, low birth weight, perinatal/infant death Important: Abstinence from tobacco during pregnancy, long-term tobacco abstinence <i>Considered but not selected for GRADE Table: Maternal exposure to secondhand smoke, health benefits to mothers.</i>
Key questions	<ol style="list-style-type: none">1. What interventions are most effective and most cost-effective to:<ol style="list-style-type: none">a. Reduce tobacco-related perinatal/infant morbidity and mortality?b. Reduce tobacco use prevalence in pregnant women?c. Sustain tobacco abstinence after delivery among women who quit tobacco use during pregnancy?2. Does effectiveness vary by socioeconomic factors such as race, ethnicity, income and educational attainment?3. What models of care would allow these interventions to be implemented most effectively and cost-effectively?