LETTER TO EDITOR

Response to: Comment on: smoking and quitting behavior of hospitalized COVID-19 patients

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ABSTRACT

This study examines smoking behaviors and cessation tendencies in hospitalized COVID-19 patients. Intensive care unit (ICU) patients were excluded from the study due to the potential for distinct behaviors and the small sample size, which would not allow for robust statistical analysis. Although the acute phase of COVID-19 has passed, the findings may still provide guidance for other conditions. The study emphasizes the critical importance of addressing smoking behaviors in healthcare settings from a public health perspective.

Keywords: COVID-19, Smoking Cessation

ÖZET

Yanıt: Yorum: Hastaneye kaldırılan COVID-19 hastalarının sigara içme ve bırakma Davranışları

Bu çalışma, hastaneye yatırılan COVID-19 hastalarında sigara içme davranışlarını ve bırakma eğilimlerini incelemektedir. Yoğun bakım hastaları, diğer hastalardan farklı davranışlar sergileyebileceği ve küçük örneklem büyüklüğü nedeniyle güçlü istatistiklerin yapılamayacağı gerekçesiyle çalışma dışında bırakılmıştır. COVID-19'un akut dönemi sona ermiş olsa da bulgular, diğer durumlarda yol gösterici olabilir. Çalışma, sağlık hizmetlerinde sigara davranışlarının ele alınmasının halk sağlığı açısından kritik önem taşıdığını vurgulamaktadır.

Anahtar Kelimeler: COVID-19, Sigara Bıraktırma

Dear Editor,

We appreciate the insightful comments and valuable feedback provided on our article, "Smoking and Quitting Behavior of Hospitalized COVID-19 Patients."[1]. It is heartening to see the interest in our study, and we welcome the opportunity to address the points raised.

Regarding the exclusion of intensive care unit (ICU) patients from our analysis, this decision was made to ensure the focus and clarity of our study. ICU patients constitute a distinct subgroup with unique clinical and behavioral characteristics, which could introduce variability into the findings. Moreover, their small sample size and elevated mortality rates limited the ability to perform a robust statistical evaluation. Therefore, we believed it would be more appropriate to address this subgroup in a separate, dedicated study

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to preserve the integrity of our primary analysis. Future research exploring the smoking behaviors and outcomes of ICU patients could provide valuable insights and complement our findings. Our primary objective was to investigate the relationship between smoking behaviors and COVID-19, particularly changes in smoking habits following hospitalization. Although we provided mortality data to describe the groups comprehensively, we refrained from making causal inferences regarding smoking and mortality in the context of COVID-19.

Although the acute phase of the COVID-19 pandemic has largely subsided, the lessons learned from our study remain relevant for addressing public health issues related to smoking behaviors during hospitalization for other acute or chronic illnesses. The potential for hospitalization to act as a critical window for

smoking cessation interventions transcends COVID-19 and is applicable to a broader healthcare context.

We are also grateful for the correspondents' recognition of our study's contributions and their thoughtful critique, which has provided us with new perspectives for future work.

Once again, we extend our sincere thanks to the correspondents and the editorial team for this opportunity to engage in meaningful scholarly exchange. We look forward to contributing further to this evolving field and hope our work serves as a catalyst for continued exploration in similar domains.

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