

The Modified Fagerström Tolerance Questionnaire (mFTQ) for Adolescents¹ (Scoring Information)

Based on:

Prokhorov, et al. and the NCI website

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Date of Preparation: 2/17/2009

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- ❖ This modified version of the FTQ² assesses the level of nicotine dependence among adolescents. The instrument uses a 5 -point Likert scale for all seven items, except for one item on smoking during the first two hours of the day. The original FTQ item, assessing nicotine content in the respondent's "usual" brand of cigarettes, was excluded from this adolescent version.
 - ❖ The mFTQ is a physiologically validated scale
 - ❖ Target Population: Adolescents aged 14 – 20
 - ❖ Easy to use in a clinic or office setting
 - ◆ 7 questions
 - ◆ Linear scale
 - 0 – 9 points
 - For Research Purposes, can be split:
 - No Nicotine Dependence = 0-2 points
 - Moderate Nicotine Dependence = 3-5 points
 - High Nicotine Dependence = 6-9 points
 - ❖ Use the mFTQ to diagnose severity of tobacco dependence as you would measure blood pressure to diagnose severity of hypertension
 - ❖ Measure immediately before you start treatment for tobacco dependence
 - ❖ Not useful to re-measure after a adolescent has stopped smoking
 - ❖ Useful to re-measure after adolescent has relapsed
 - ❖ In Clinical Medical Practice:
 - ◆ Remember the mFTQ is linear
 - The higher the mFTQ score the more physically dependent is your teen patient on nicotine
 - A teen patient with an mFTQ score of 9 means that patient is 11% physically more dependent on nicotine than a different teenager with an mFTQ score of 8
 - A teen patient with an mFTQ score of 8 or 9, for example, will need a much more comprehensive treatment plan for tobacco dependence than one with an mFTQ score of 2 or 3 to receive effective treatment

NB: This form and scoring instructions may be duplicated without restriction for patient -care or education purposes.

¹ Prokhorov AV, et al. Measuring nicotine dependence among high -risk adolescent smokers. *Addict Behav.* 1996; 21:117-127.

² Fagerström KO. Measuring degree of physical dependence to tobacco smoking with reference to individualization of treatment. *Addict Behav.* 1978; 3:235-241.