



Wespath

BENEFITS | INVESTMENTS

a general agency of The United Methodist Church



Q: What is the first step to quitting tobacco?

A: Develop a plan. Quitting tobacco is one of the most difficult habits to break, but people do it every day, and you can too. Pick a quit date that gives you time to prepare without losing your motivation to quit. Tell friends and family that you are quitting. Remove tobacco products and ashtrays from your home, work and car. Identify triggers and decide how you are going to deal with them.

Q: What is the best way to quit?

A: There are a variety of different ways to quit. One isn't better than the other. You need to determine which way is best for you. Here are some of the most popular ways to stop using tobacco.

- 1. Medications** can curb cravings and may also make smoking less satisfying if you do pick up a cigarette. Other drugs can ease withdrawal symptoms such as depression or problems with concentration. Popular medications to help you quit tobacco are Bupropion (Zyban) and varenicline (Chantix). Your primary care provider (PCP) must prescribe these medications.
- 2.** About 90% of people who try to quit smoking do it '**Cold Turkey**'—no aids, therapy, or medication. Although most people try to quit this way, it's not the most effective or successful method. Only 4 – 7% are able to quit by going cold turkey alone.
- 3. Work with a counselor** to find ways not to smoke. Together, you'll find your triggers (such as emotions or situations that make you want to smoke) and make a plan to get through cravings.
- 4.** Nicotine gum, patches, inhalers, sprays and lozenges are **nicotine replacement therapies (NRT)**. They work by giving you nicotine without using tobacco. You may be more likely to quit smoking if you use NRT. If you are younger than 18, you need to get your PCP's permission to use it. This plan works best when you also get behavioral therapy and extra support from friends and family.

Using a combination of treatment methods may raise your chances of quitting. For example, behavior therapy combined with nicotine replacement therapy, or behavior therapy and medication. The FDA has not yet approved using two types of NRT (nicotine patch and gum) at the same time, so be sure to talk to your PCP.

Q: How hard is it to quit?

A: Everyone is different, and how tough it is depends on things such as:

- How often you smoke or use tobacco products. The more you smoke or use tobacco, the more difficult it can be to quit.
- The number of people you spend time with who smoke or use tobacco products (friends, family, co-workers). Social tobacco users often socialize with other social tobacco users. When you are with them and they are smoking, you may be more likely to relapse. Unfortunately, friends who are smokers may not want you to quit—they may feel that they are losing a friend. Limit those situations until it gets easier for you to be around tobacco users.
- The reason why you use tobacco products (weight control, to fit in, certain social situations).

Many people try several times before giving up cigarettes for good. If you do relapse, don't get discouraged. Think about what happened and use it as an opportunity to step up your commitment to quitting. Try to set your next quit date soon.

Q: Why is tobacco so addictive?

- A:**
- Blame nicotine—the main drug in tobacco—for your addiction. Your brain quickly adapts to it and craves more and more to feel the way you used to feel with just one cigarette.
 - Over time, the brain learns to predict when you're going to use tobacco. You feel down and tired, so you think "I need to use tobacco again," and the cycle repeats.
 - It's not just about brain chemistry. Certain situations make you want to use tobacco. Everyone's triggers are different. Yours might include the smell of cigarette smoke, having an ashtray next to you, seeing a carton of cigarettes or tin of chewing tobacco at the store, having certain food or drinks, eating a good meal, or talking to someone who you normally smoke with. Sometimes just the way you feel is a trigger. One of the biggest keys to quitting is spotting the triggers and trying to avoid them or plan ahead for how you are going to deal with it.

Q: What are the benefits of quitting?

- A:**
- Within hours of quitting, your body starts to recover from the effects of nicotine and additives. Your blood pressure, heart rate and body temperature—all of which are higher than they should be because of nicotine—return to healthier levels. Within a day, your blood's carbon monoxide level also falls back to normal. In just 2-3 weeks, you will lower your odds of having a heart attack and in time you will lower your chance of getting lung cancer and other cancers.
 - Any respiratory problems you may have will start to improve, such as: asthma, bronchitis, COPD or a chronic cough.
 - Quitting helps your appearance. You will be less likely to get wrinkles and your teeth will be less stained.
 - You will positively impact your loved ones' health. Secondhand smoke can increase your child's likelihood of developing asthma, ear infections, respiratory issues and some cancers.
 - You'll save money.¹

¹ http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/

**What about E-cigarettes?**

E-cigarettes, or electronic cigarettes, are battery-operated smoking devices. They often look like cigarettes, but work differently. Using an e-cigarette is called vaping. The user puffs on the mouthpiece of a cartridge. This causes a vaporizer to heat the liquid inside the cartridge. The liquid contains nicotine, flavorings, and other chemicals. The heated liquid turns into the vapor that is inhaled.

Some people think that e-cigarettes are safer than cigarettes, and that they can be used to help people quit smoking. Not much is known about the health risks of using them, or whether they do help people quit smoking. However we do know about some dangers of e-cigarettes:

- They contain nicotine, which is addictive
- They contain other potentially harmful chemicals
- There is a link between e-cigarette use and tobacco cigarette use in teens
- The liquid in e-cigarettes can cause nicotine poisoning if someone drinks, sniffs, or touches it²

² <https://medlineplus.gov/ecigarettes.html>

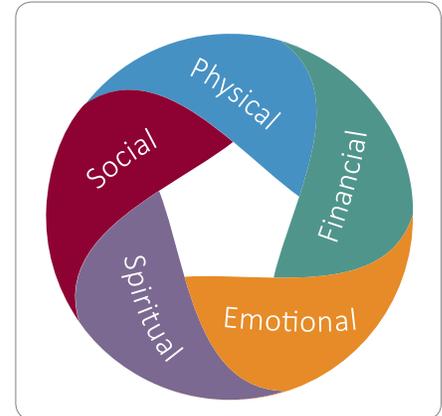
Q: I really enjoy smoking, why should I quit?

A: Cigarette smoking is the leading preventable cause of death in the United States. By continuing to smoke you negatively impact your own health as well as those around you through secondhand smoke. By continuing to smoke you increase your risk for:

- Coronary heart disease and stroke by 2 to 4 times
- Developing lung cancer by 25 times (men)
- Developing lung cancer by 25.7 times (women)
- Developing Type II diabetes by 30-40%

Other health implications of smoking include:

- Cancer almost anywhere in your body
- Infertility—both men and women
- Pre-term delivery
- Low birth weight
- Increased risk of birth defects
- Increased risk for miscarriage
- Negative impacts on health of teeth and gums²

**Q: I don't smoke but my partner does. Does that impact me too?**

A: Secondhand smoke is smoke from any burning tobacco product, and it has been directly linked to the following conditions in children:

- Ear infections
- More frequent and severe asthma attacks
- Respiratory symptoms (coughing, sneezing, shortness of breath)
- Respiratory infections (bronchitis and pneumonia)
- Greater risk for sudden infant death syndrome (SIDS)

In adults, secondhand smoke has been linked to:

- Heart disease
- Lung cancer
- Stroke³
- Respiratory symptoms (coughing, sneezing, shortness of breath)
- Respiratory infections (bronchitis and pneumonia)

When smoking is no longer something you do, it can change how you see yourself. As much as you want to stop using tobacco, you may be surprised to feel sad or miss it. That's normal. A great way to combat this response is to think about all the benefits of not smoking: you have more time and money for other things, cleaner teeth, healthier lungs, and no lingering smells of smoke on your breath, hair or clothes.

³ http://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/general_facts/index.htm

Adapted from WebMD unless otherwise noted

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