

Quitting Tobacco Use





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For a digital copy of this book, please visit **go.osu.edu/pted3430**.

Talk to your doctor or health care team if you have any questions about your care.

For more health information, go to **wexnermedical.osu.edu/patiented** or contact the Library for Health Information at 614-293-3707 or health-info@osu.edu.

The Benefits of Quitting and Resources to Quit

Benefits of quitting

If you guit smoking right now...

- Within 20 minutes, your heart rate and blood pressure drops.
- After 8 hours, the oxygen levels in your blood return to normal.
- Within 3 months, your circulation and lung function improves.
- Within 9 months, you will cough less and breathe easier.
- After 1 year, your risk of heart disease is cut in half.
- After 5 years, your risk of having a stroke will be the same as a nonsmoker's. Your risk of cervical cancer and stroke return to normal.
- By 10 years, you will have decreased your risk of developing cancer.

Resources to quit

Ohio State resources

- If you have an Ohio State primary care doctor, talk to your doctor about a referral to the office's pharmacist for smoking cessation counseling. Ohio State's family medicine and internal medicine doctors are your health partners to quit tobacco use.
- You may also call 614-293-QUIT (7848) to connect with a pharmacist for one-on-one assessment, counseling and treatment.
 For more information about this program, please visit https://wexnermedical.osu.edu/heart-vascular/clinical-pharmacist-services/smoking-cessation.

Quit lines

- American Cancer Society, 800-227-2345
- American Lung Association,
 1-800-LUNGUSA (1-800-586-4872)
- BeTobaccoFree.gov, 877-448-7848
- Ohio Tobacco Quit Line, 1-800-QUIT-NOW (1-800-784-8669)

Websites

- American Cancer Society at https://www.cancer.org/healthy/stay-away-from-tobacco/guide-quitting-smoking.html
- betobaccofree.gov at https://
 betobaccofree.hhs.gov/
- MedlinePlus at https://medlineplus.gov/quittingsmoking.html
- Ohio Partners for Smoke Free Families at http://ohiosmokefreefamilies.org
- Smokefree.gov at https://smokefree.gov/
- March of Dimes at <u>www.marchofdimes.</u> org/pregnancy/smoking-duringpregnancy.aspx

Mobile apps

 Search your mobile device's app store for quit smoking apps, such as QuitGuide and QuitSTART.

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Why Tobacco is Harmful

Cigarettes, cigars, pipes and smokeless tobacco all expose the body to toxic chemicals and make it harder for the body to get enough oxygen. The more tobacco you use, the greater your risk for these health conditions:

- · High blood pressure.
- Blood clots that can lead to a heart attack or stroke (bleeding or blood clot in the brain).
- Cardiovascular disease (CVD) where the blood vessels and arteries of the body get blocked or narrow from the buildup of a waxy substance, called plaque. This makes it hard for blood to flow. The chemicals in tobacco also make these vessels narrow or constrict. This can result in a heart attack.
- Cancer of the lungs, liver, throat, bone marrow and blood, trachea (airway), larynx (voice box), nose, mouth, stomach, bladder, cervix, colon and rectum.
- Chronic Obstructive Pulmonary Disorder (COPD), such as emphysema or chronic bronchitis, a disease that makes it is hard to breathe and get enough oxygen into the body.
- Type 2 Diabetes where the body is unable to regulate sugar and insulin.
- Other problems including vision loss, bone loss, problems with pregnancy or reproduction.

Electronic cigarettes

E-cigarettes deliver nicotine to the body with a vapor. As a nicotine product, they are addictive. The vapor also contains propylene glycol and glycerol, chemicals that are known to cause throat and lung irritation.²

E-cigarettes are not recommended by the U.S. Food and Drug Administration (FDA) as a quit aid. For tobacco users who want to quit, see pages 8-9 for proven treatment strategies.

²Callahan-Lyon, P. 2014. Electronic cigarettes: Human health effects. Tobacco Control. 23. ii36-ii40.

What is in tobacco?

Tobacco can have 7,000 chemicals¹. Many are carcinogens, meaning they cause cancer in humans. Some chemicals in tobacco are:

- Acetone, nail polish remover
- Ammonia, a household cleaner
- **Arsenic**, found in rat poison
- Benzene, found in gasoline fumes
- Butane, a cigarette lighter fuel
- Cadmium, in batteries
- Carbon monoxide, in car exhaust
- **DDT**, an insecticide banned in the USA
- Ethylene oxide, in antifreeze
- Formaldehyde, found in embalming fluid
- **Hexamine**, a barbecue lighter fluid component
- **Lead**, used in batteries
- Mercury, a toxic metal
- Methanol, in rocket fuel
- Nitrobenzene, a gasoline additive
- Propylene glycol: de-icing fluid and solvent
- Tar, used for road paving
- Vinyl chloride, in making PVC pipe

Quitting Tobacco Use

The 3 Challenges of Addiction

Nicotine is a chemical in tobacco products your body craves. It is part of the reason tobacco is an addiction. To be successful at quitting tobacco use, your body needs to rid itself of nicotine and overcome physical, emotional and behavioral addiction.

Physical addiction

When you use tobacco, nicotine travels to your brain. In 10 seconds, the chemical reaction gives you feelings of pleasure and relaxation. These feelings come from a release of dopamine in the brain. Your body creates more nicotine receptors as you increase tobacco use. This leads to a physical addiction or nicotine dependency.

When you quit tobacco, your brain continues to crave nicotine. Your body will go through withdrawal until the number of nicotine receptors returns to the amount they were before you started to use tobacco. Find physical activities that you enjoy when quitting, such as walking, biking or group sports to replace time spent using tobacco.

Emotional addiction

Nicotine produces feelings of pleasure. As you rid your body of nicotine, it can affect your mood and how you feel. If you used tobacco to manage stress or your emotions, find family or friends to support you instead of using tobacco for support. Look for online support groups and communities. Be honest about how you feel, work to identify and address the emotions you have about tobacco, and create new coping skills to use while you quit.

Did you know?

- Most smokers inhale 200 hits of nicotine and 100 cancer causing chemicals from a pack of cigarettes. Cutting down on tobacco before you quit can help to reduce signs of withdrawal.
- One cigar can have as much tobacco as a pack of cigarettes. As the amount of nicotine may be different across tobacco products, choose lower nicotine options as you prepare to quit tobacco.

Behavioral addiction

Tobacco use is a learned behavior. Breaking the tobacco habit means **creating new behaviors** to replace it. This can take as little as 3 weeks. Think about when you are most likely to use tobacco and find new behaviors that will support your changed lifestyle.



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The 5 Steps to Quitting Tobacco

Quitting is easier if you prepare. Use these 5 steps when you are ready to quit.

1. Talk to your provider or pharmacist

Quitting "cold turkey" is not your only choice. Talk to your provider or pharmacist about quit aids, nicotine replacement products, support groups, quality websites and smart phone apps to help you quit. Some products are available without a prescription. See pages 8-9 for more information.

If you are pregnant or breastfeeding, talk to your provider and visit the March of Dimes at www.marchofdimes.org/pregnancy/smoking-during-pregnancy.aspx for support to quit. For the safety of your baby, nicotine replacement products are not recommended.



2. Set a quit date.

Pick a date within the next few weeks to quit tobacco. This will give you time to prepare. Pick a date that you know is less busy or stressed and avoids social situations (a night out with friends) that may tempt you to use tobacco.

On your quit day, change your regular routine. Get out of the house and go to a movie or to dinner at a tobaccofree restaurant.



3. Tell family and friends you plan to quit.

Having support is key to successful quitting. Share with your family and friends how they can help. Here are some ideas:

- Tell family and friends your reasons for quitting.
- Ask your family and friends to be your "quit buddies".
- Identify your smoking triggers and ask your quit buddies to help you manage them.
- Ask friends and family to join you in tobaccofree activities, like going to the movies or playing basketball.



- If family members use tobacco, create a tobacco-free zone where you live. For example, tobacco is only used outside - not inside and not in vehicles.
- If friends use tobacco, ask them to quit with you or at least to not use it around you.
- Tell friends and family what to do if they see you slip and use tobacco after your quit date.
- Let your friends and family know that you may have mood changes or be anxious when quitting. Ask them to be patient and help you through it.
- Do you take any medicines? Tell your provider or pharmacist you are quitting tobacco. You may need to change your regular medicines or the amount you take (dose) after you quit. Ask about quit aids to help you stop using tobacco.



CDC/Amanda Mills

4. Prepare for your quit date.

- Cut down on the amount of tobacco products you use now to make it easier when you reach your quit date, such as only smoking half a cigarette at a time.
- Buy sugarless gum, carrots, celery, hard candy, toothpicks or straws. Use these items to replace tobacco when you have the urge for something in your mouth.
- Throw away all tobacco products, matches, lighters and ashtrays from your home, car and work. Do not save products "just in case". It increases your risk for using tobacco again.
- Clean your home, car and clothes to remove tobacco odors.
- Have your dentist clean your teeth to remove tobacco stains.

5. Plan a reward system for quitting.

Reward yourself for choosing healthy behaviors that replace tobacco use and meet certain milestones.

- Set reasonable goals. Choose goals that are meaningful to you, such as milestones of 1 day, 1 week, 1 month, 3 months and 6 months.
- Think of small and large rewards that will motivate you. Create a money jar from saved tobacco money.
 Use it to go out to dinner, pay bills, take a vacation or get new exercise equipment.





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Smoking Cessation Aids

Smoking cessation aids are tools that help people quit, but **they will not make a person quit**. As you work with your health care provider to find the best product for you, ask yourself these questions:

- How important is quitting tobacco to me?
- How ready am I to begin the process of quitting?
- How much and how often am I using tobacco throughout the day?

Your answers to these questions will help your provider select the best product for you at the right dose. If you are using over the counter products, such as patches, gum or lozenges, be sure to follow the directions on the package or discuss further with your provider or pharmacist.

If your health insurance doesn't provide coverage of smoking cessation aids, the most affordable products out of pocket are patches, gum, lozenges and bupropion (available by prescription only).

Nicotine replacement therapy

Nicotine replacement therapy (NRT) products reduce nicotine withdrawal and cravings, making quitting easier. Some products have different doses of medicine based on the amount of tobacco used. **Talk to your provider about the best product for you.** Do not take more medicine than ordered. The active ingredient in these products is nicotine and can cause similar side effects to the nicotine in tobacco products, including increased heart rate or blood pressure, abnormal dreams, problems sleeping and headaches.

Patches

This medicine is available over the counter. Use a new patch each day or as directed for up to 3 months. Place on your arms or torso (non-hairy areas such as your back, chest or stomach). Wash your hands after placing a patch. To avoid skin irritation, rotate the sites where the patch is placed. Do not cut the product or you will not get the full benefit of nicotine therapy. If you have trouble sleeping, remove the patch before bedtime.

Gum

This medicine is available over the counter. It can be used for up to 3 months. Chew each piece slowly until you feel tingling and then hold it (park it) between your cheek and gum until the flavor is gone. Repeat chewing and holding until flavor does not come back. One piece may last 30 minutes. Drink only water 15 minutes before and after using the gum. Coffee, juice and soft drinks can reduce the nicotine delivered.

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Lozenges

This medicine is available over the counter. It can be used for up to 3 months. Allow each lozenge to dissolve in the mouth over 30 minutes. Do not chew. Drink only water for 15 minutes before and after using the lozenge. Coffee, juice and soft drinks can reduce the nicotine delivered.

Inhaler

This medicine is available by prescription only. It can be used for up to 6 months. It is okay to take a few puffs or continuously puff. Each cartridge will be empty after about 20 minutes of active use. Clean the mouth piece regularly with soap and water. Inhalers can be less effective delivering nicotine in cold temperatures. Drink only water 15 minutes before and after using the inhaler.

Nasal spray

This medicine is available by prescription only. It can be used for up to 6 months. When first using the spray, it needs to be primed. To do this, hold a tissue over the tip and pump the bottle until medicine comes out. This often takes 6-8 pumps. You will need to prime the spray if you do not use the medicine for 24 hours or longer. To do this, pump 1-2 times. Blow your nose before use. Tilt your head back slightly and insert the tip of the bottle into your nostril. Breathe through your mouth and spray once in each nostril. Do not sniff, swallow or inhale through nose during administration. Wait 2-3 minutes before blowing your nose. Avoid contact with skin, eyes and mouth. Tell your provider if you have any nasal irritation.

Oral medicines

These prescription medicines are oral tablets that are taken by mouth 2 times a day. They help reduce nicotine withdrawal and cravings, making quitting easier. It is very important to not miss a dose as taking less of the medicine will not give you the full benefit of the medicine. **Talk to your provider about the best product for you.** Do not take more medicine than ordered.

Bupropion (Alplenzin, Wellbutrin or Zyban)

This medicine is available by prescription only. It works to decrease nicotine cravings. It is often started 1-2 weeks before quitting tobacco and is typically used for 3-6 months, but can be used up to 1 year. Tell your provider if you have a history of seizures or eating disorders. If you have trouble sleeping, take the evening dose no later than 4:00 pm. Some people may notice less of an appetite while taking this medicine. This can be beneficial if there is concern for increased appetite when stopping smoking.

Varenicline (Chantix)

This medicine is available by prescription only. It blocks the effects of nicotine to help with withdrawal and reduce cravings. It is often started 1 week before quitting tobacco and is typically used for up to 3-6 months. Tell your provider if you have a history of depression or any changes in mental health while taking this medicine. This medicine can cause nausea if taken on an empty stomach. It is best to take this medicine on a full stomach with a glass of water to prevent nausea. This medicine can cause vivid dreams. While some individuals may enjoy these dreams, others may not. Please speak to your provider if you notice unpleasant dreams while taking this medicine.

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Getting through the First Week

During the first week, you may have physical signs of nicotine withdrawal. Here are some tips that may help you to feel better or cope with the signs you experience. If you ever have a sign that concerns you, call your health care provider for help and support.

Dry mouth, cough or sore throat

Drink plenty of fluids and increase the amount of water you drink. Chew gum or use hard candy or cough drops.

Nasal drip or mucus

You body may produce more mucus to clear nicotine out of your body. Cough drops with menthol can help to open nasal airways. Your health care provider may also recommend an over the counter medicine, such as an antihistamine.

Headache

Your health care provider may recommend an over the counter pain reliever to help with headaches. Try warm or cold therapy, such as a warm shower or bath or a cool ice pack. Wrap the ice in a towel and apply it for 15 to 20 minutes and then take it off. Sleeping longer at night or taking a nap may also help.

Feel dizzy

Call your health care provider. When you feel dizzy, sit or lie down for your safety. Take your time changing positions, especially when you go from sitting to standing. Avoid sudden movements.

Sleeping problems

Limit caffeine drinks such as sport drinks, energy drinks, coffee and tea. **Drink any** caffeine before noon each day.

Problems concentrating

Improve thinking and focus by lowering stress the week you quit. Allow yourself "mini mind vacations" during the day or take a quick walk, and then regroup to regain your concentration. Take a deep breath and meditate. Count to 20 slowly. Say the alphabet backwards. Give yourself a pep talk. Listen to a favorite song to motivate you.

Hunger

As food tastes better, you may want to eat more. Choose healthy foods for meals and snacks, such as fruit, vegetables, whole grains and low fat dairy products. Eat foods high in fiber to help you to feel full longer. Try to eat every 3 to 4 hours so that your blood sugar level stays about the same. When your blood sugar gets low, you want to eat more. Avoid sweets and high processed foods like candy and chips. While they may fill an immediate craving, you may feel hungry soon after. Choose healthy foods to avoid weight gain and to give your body the nutrition it needs to overcome nicotine dependency faster. For more information, ask for the handout, Tips for Eating More Fruits and Vegetables or visit https://go.osu.edu/pted1217.

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Preventing a Slip or Relapse

A **slip** is using a small amount of tobacco one or two times after quitting. It is a part of your current quit attempt. A **relapse** is returning to the amount of tobacco you used before you quit. Focus on slips and make changes to your quit plan to increase your success.

What led to my slip?

Think about your answers to these questions so that you can better understand what led to your tobacco use. Be specific in your answers.

- What was I doing?
- Who was I with?
- What was I thinking before using tobacco?
- How was I feeling emotionally right before I decided to use tobacco?
- How was I behaving right before I decided to use tobacco? Was this behavior consistent with my old behaviors or new planned behaviors?
- What trigger(s) or stress was hard to manage? What other factors led to my decision to use tobacco?
- What else do I need to create or implement into my quit plan to overcome these barriers? What might I do to be successful?
- To what extent did I react automatically and abandon my quit plan?
- What strategies in my quit plan can I use next time, so it doesn't happen again?
- Who or what could I have with me to support my decision to not use tobacco?
- What tobacco products do I still have with me that I need to remove?

Practice exercises

Think about how you would handle these situations as a way to check your quit plan.

- You are out to dinner with friends. You are inside where smoking is not allowed. After dinner, one friend decides to go out for a cigarette and offers you one. What can you say or do to stay tobacco free?
- 2. You have been tobacco free for 3 weeks. You use nicotine patches and gum to help you quit. You have been using the gum during stressful times at work but forgot them at home today! You have a severe craving and urge for tobacco. What can you do to stay tobacco free?
- 3. You live in a house with 2 people who use tobacco, and you are working to quit. You have talked about a no tobacco rule in the house and the other tobacco users have agreed. However, you get home and one person is having a cigar in the living room. What do you say? What can you do to stay tobacco free?

Create your own scenarios to test your quit plan. Continue to add strategies to your plan to stay tobacco-free.

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My Plan to Succeed

Withdrawal is the most uncomfortable part of quitting, but signs often pass in less than a week. The real challenge is beating long-term cravings for tobacco and staying away from tobacco. Understanding what to expect will help you make a plan to successfully quit tobacco use.

Understanding withdrawal

Withdrawal is your body's way of ending tobacco dependency. The signs of withdrawal are temporary and include:

- · Feeling depressed
- Problems sleeping
- · Being angry or irritable
- Feeling anxious or nervous
- Problems concentrating
- Feeling restless
- Headaches
- Increased appetite or weight gain
- A slower heart rate

You may notice signs 2 to 3 hours after you last used tobacco. Your signs may peak 2 to 3 days later, depending on how much and how long you used tobacco.

My plan to cope with withdrawal

- ☐ I will talk to my provider about using nicotine replacement products to reduce signs of withdrawal. Using these products can double your chances of quitting for good. See pages 8-9 for more information.
- ☐ I will follow the tips listed on page 10 for coping with the physical signs of withdrawal.

- ☐ I will tell my quit buddies that I plan to quit and let them know that I may need to talk, cry, laugh or get involved in an activity to get through withdrawal.
- ☐ I know that I do not need to quit alone. I can:
 - Talk to my provider.
 - Find a counselor.
 - · Gather family members.
 - Talk with friends.
 - Talk with someone from my faith/ religious group.
 - Share with close neighbors.
 - Tell people with whom I share hobbies.
 - Join an online community.
 - Call a guit line.
- ☐ I will drink plenty of water and other fluids. Water helps to flush nicotine from your body.
- ☐ I will cut back on caffeine. Some people report feeling anxious and having trouble sleeping even if the same amount of caffeine is in the diet.
- □ I will increase my exercise. Physical activity helps to release energy and keeps you focused on something other than tobacco. Talk to your provider about how much exercise is right for you. If you are new to exercise, ask for the handout, Eight-Week Walking Program or visit https://go.osu.edu/pted2331.

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Understanding cravings

The urge to use tobacco will come and go. There are people, places, things and situations that may **trigger** the urge to use tobacco. I use tobacco:

When getting up in the morning	Before or after meals
At meals (breakfast, lunch, dinner)	When having a snack
When drinking coffee, tea or alcohol	When socializing and drinking alcohol
When I am with other smokers	When driving a vehicle
When I smell tobacco products	When a passenger in a vehicle
When I see another person use tobacco	As a reward for a task
When taking a break at work	As a reward when I have a "bad day"
When talking on the phone	When I feel angry or upset
When going to a party	When I am frustrated
When going to a sporting event	When I feel bored
When playing cards or games	When I feel stressed
When I miss my partner, family or friends	When I feel lonely
After intimacy with my partner	
After an argument with my partner	
After an argument with family or friends	

My plan to cope with cravings

You won't be able to avoid all triggers, so it's important to make a plan for how you will handle them. Cravings often last 5 to 10 minutes. Make a plan to wait it out or to do an activity to distract yourself. For example:

- Avoid tobacco when driving a car, clean your car and fill it with an air freshener. Keep gum or mints in the car. Ride your bike or take a bus where you are not able to use tobacco.
- **To avoid tobacco after a meal**, do an activity right after, so there is no time to use tobacco. Plan phone calls with a friend or sign up for a volunteer activity in a tobacco-free zone.
- To avoid tobacco after an argument, go for a walk, take deep breaths or listen to your favorite music.
- To avoid tobacco when getting up in the morning, read a list of your reasons for quitting.
- To avoid tobacco when socializing, go to a movie theater or a tobacco-free restaurant.
- To avoid tobacco when stressed, start a new hobby, activity or exercise.

Use these ideas and others to deal with your triggers.

Now it's your turn. Look at the list of triggers you identified on page 13. Create a plan to cope with each one. List one or more behaviors or activities you will do instead of using tobacco.

My trigger	What I will do instead
l feel bored	I will listen to music, text or call a quit buddy, go to a library, chew gum, think about my reasons for quitting, play with my kids or pet, give myself a pep talk or plan an activity

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Overcoming Barriers

As you quit tobacco, you may notice barriers that work against your success. Barriers are normal and different for everyone. Barriers may be physical, psychological and social. Common barriers to quitting include:

- Enjoyment of smoking
- Craving for tobacco products
- Loss of tobacco as a method to handle stress and bad moods
- Fear of gaining weight after quitting
- Lack of insurance coverage for treatment

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List some barriers you may have as you quit

My strategies

Preparing for barriers now can help you to succeed. For example, if you lack support from a spouse to quit tobacco, your strategy may be to ask a friend to be your guit buddy, to find a support group or to get counseling from a pharmacist by calling 614-293-QUIT (7848).

Look again at the barriers you listed. What strategies will help you to overcome them? What might you add to your quit plan or change in your plan to help you overcome these barriers on a regular basis?

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Create a support system of family, friends, people at work and health care providers to help you succeed.





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