

# STOPPING SMOKING



Smoking is a risk factor for a number of health problems and may increase risk for thrombosis, with higher levels of smoking linked to higher risk. Perhaps more importantly, for people who have reduced lung function following a pulmonary embolism, smoking can reduce lung function further making you more likely to feel out of breath and unable to do things you might previously have done.

## A STEP-BY-STEP APPROACH TO CUTTING DOWN AND EVENTUALLY STOPPING SMOKING.

This information sheet provides a step-by-step approach to cutting down and eventually stopping smoking. There is no one proven 'best way' approach to quitting, so this information sheet provides information that may help you develop your own plan to quit, but also suggests a quit programme that you can follow should you chose.

**It follows the structure below:**

1. Strengthening motivation to quit
2. Cutting down the number of cigarettes smoked.
3. Choosing a 'quit day' and stopping completely when reach 12 a day.
4. Replacing smoking with nicotine substitute
5. Reducing use of nicotine substitute
6. Avoiding slipping back to smoking

Some of these stages may appear a little arbitrary: for example, why stop completely when get to 12 a day? But there is a logic to them which the information sheet addresses as we go through the process.

Stopping smoking is not easy. If it was, you would not be reading this information sheet! So, it's important to really consider why you want to stop, and to remind yourself of these reasons at times when your motivation is slipping, and it feels a real challenge to keep on.

## STEP 1: WHY DO I WANT TO QUIT?

There are lots of benefits that affect every smoker. The long-term benefit is that non-smokers live on average eight years longer than those who do not smoke. But other effects are much more immediate and more obviously of benefit.



### Day 1:

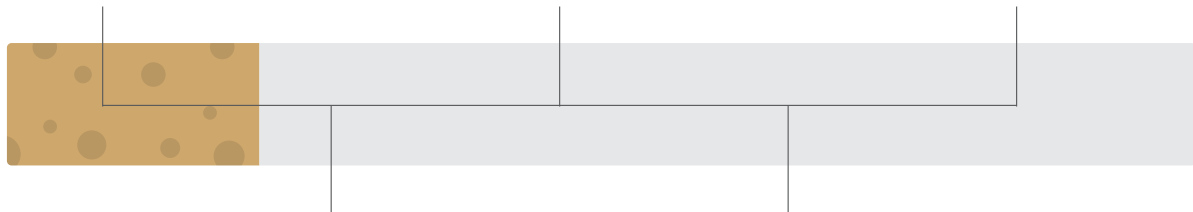
Your heart rate will reduce to a lower level and the oxygen levels in your blood will increase as you get rid of the harmful carbon monoxide.

### Day 2:

All the carbon monoxide is flushed out from your blood by now. Your lungs are beginning to clear out mucus, and you may begin to cough a bit to get rid of this. But that is good. It's a sign on recovery. Your senses of taste and smell are improving.

### Day 3:

The muscles in around the airways in your lungs begin to relax allowing more air and oxygen to be absorbed from the lungs. Your breathing gets easier, and you have more energy.



### 2 to 12 weeks:

Your lung function is beginning to improve so you may feel less short of breath when you exert yourself. Less obviously, the fibres in your lungs which help protect against infection by wafting away bugs will begin to recover and make you less likely to develop chest infections.

### 6 to 9 months:

Any coughs, wheezing or breathing problems will be improving as your lung function increases by up to 10 per cent.



**Even more important is to identify how quitting will benefit you. And the benefits may not just be your health.**

For this reason, it's worth writing down the benefits you will gain from stopping. They may include feeling fitter, less worried about your health, less out of breath, and richer! This focus may increase your motivation to stop smoking, and you can refer to them if things get difficult to keep the determination going.

## STEP 2: CUTTING DOWN

It's important to understand why smokers smoke and why cutting down before quitting is likely to be of benefit.

- **Nicotine has a very rare effect.**  
It can both increase alertness and help calm us down. Short, sharp, drags increase alertness, while long calm inhalations help calm us down. So, it's easy to get dependent on its psychological benefits.
- **Nicotine is addictive.**  
If you are addicted to nicotine, then too long a time without smoking can result in unpleasant withdrawal symptoms - which are relieved by smoking a cigarette. This leads to craving for a cigarette, and makes any cigarette you smoke at this time very rewarding as it has the double effect of relieving you of the withdrawal symptoms while also improving mood, alertness or keeping you calm.
- **Many cigarettes are habitual.**  
Smokers often smoke with a drink, at coffee time, when they meet a particular person, and so on. These cigarettes are smoked not because of the psychological or physiological benefits: simply, because they are always smoked in certain situations.

Cutting down how much you smoke, allows time to develop strategies to deal with each of these challenges without the added stress of stopping completely. And if you smoke at least 12 cigarettes a day, this will ensure you don't slip into withdrawal and sabotage your attempts at quitting.

So, step two involves cutting down to around 12 cigarettes a day. Depending on how much you smoke, this may take a week, or perhaps two to three weeks. But it's important to make meaningful reductions in the amount you smoke and move through this period as quickly as you can to avoid feeling stuck and drifting back into being a full-time smoker.



## COPING WITH CUTTING DOWN

As you get close to the 12 cigarettes a day, it can be useful to develop some strategies to help you cope with the challenges you face now and prepare for those when you stop completely.

### Cutting down habit cigarettes:

These can be the easiest cigarettes to cut down, but it's worth thinking through some strategies to help you manage this. In essence, you want to reduce the risk of temptation to smoke, make it difficult to habitually smoke, and take your mind off smoking if tempted. Some suggestions how to do this are in the box, but there are many other things you can do.

### Coping with nicotine withdrawal:

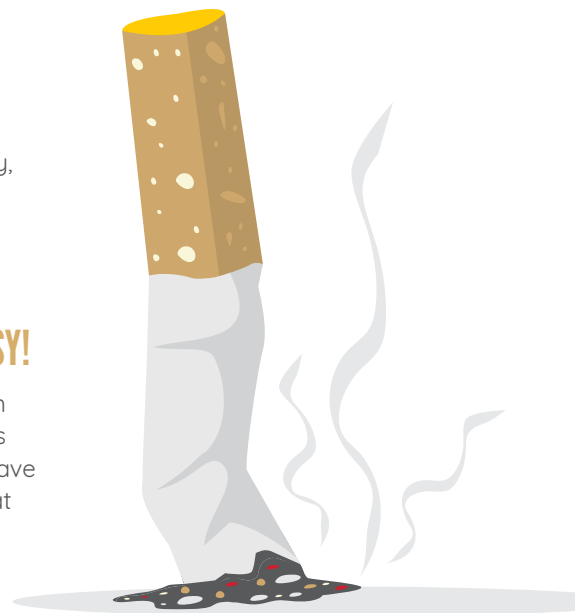
The best way of managing this is to use some sort of nicotine replacement: gum, spray, patches. You can purchase these from pharmacists or get some on prescription from your GP. The aim in this cutting down stage is that you do not go into withdrawal. But this can be a good time to check out (and possibly try out) the various nicotine replacement options you can use once you stop smoking and to decide which is best for you. We look at the use of nicotine replacement more in the next section.

## STEP 3: CHOOSE A 'QUIT DAY' AND STOP COMPLETELY

It may seem the simplest strategy to just gradually reduce the number of cigarettes over time until you are not smoking. But because you can start going into withdrawal and develop strong cravings when you smoke less than 12 a day, this strategy typically does not work. So, the optimal strategy is to cut down to 12 a day, stop smoking, and begin to use of some form of nicotine replacement therapy (NRT).

### THE FIRST STEP HERE IS TO DECIDE A 'QUIT DAY', AND THEN QUIT! EASY!

It's important to remember that withdrawal symptoms are not inevitable even in people who have smoked for many years or who have smoked many cigarettes a day, and they can vary a lot over quit attempts. So, just because these may have been difficult to cope with on a previous attempt does not necessarily mean that they will be problematic this time. Nevertheless, its best to prepare for them. And the evidence shows that the use of NRT is most likely to result in success.



## NRT CAN BE USED IN TWO WAYS:



### Nicotine patches

Last between 16 and 24 hours, provide a regular and steady dose of nicotine through the day and help stave off cravings. They help break the smoking habit because they break the link between smoking and the positive feel of a nicotine hit. So, the use of this form of nicotine replacement is key and may be the only NRT you need. There are various strengths of patches you can use depending on how many cigarettes you previously smoked, and it's worth discussing this with your pharmacist.



### Short term NRT

If the cravings do become too strong to cope with, you can add another form of NRT. These types of NRT give you a more powerful hit of nicotine and act in the short term. They include nasal or mouth sprays, inhalers, gums and microtabs (or vapes), and should only be used when cravings become problematic. If you use them every time you feel like a cigarette they keep the link between cravings and a nicotine hit, so while they are good to use if you really need them, its best to try to moderate their use as much as you can and try to use the coping strategies you developed in the cut down phase to help you manage your cravings as much as possible. Again, speak to your pharmacist or doctor for advice on which may suit you best.

Cravings and any withdrawal effects are at their strongest for around three days, so it's important to get through this early period as best you can, and not to even try to reduce the amount of NRT you are using. The use of NRT and the coping strategies you have developed earlier are crucial at this time.

It also helps to think of the sensations not so much as withdrawal effects but as signs of recovery. It may not feel like it, but these sensations are the body adjusting to low levels of nicotine and the toxins associated with smoking. They truly are signs of recovery.

After this acute period, the key is to gradually reduce the amount of NRT you are using. First, cut down the short-term NRT, and when this is no longer necessary and you can get through the day without excessive cravings, slowly reduce the use of nicotine patches. There is no need to rush this process and it can last a number of weeks or even 2-3 months. Plan on slowly reducing your NRT each week, working towards stopping completely at a time you feel confident you can achieve.

## STEP 4: KEEPING OFF THE CIGARETTES!

Be warned! Around three quarters of smokers who successfully stop smoking start back within six months. You may have quit, but there is still part of the battle to be fought. And cravings can occur well after you have successfully stopped smoking. So, it's good to be prepared. There are a number of strategies you can use during this time, which link back to previous coping strategies:

- **Don't stop the NRT too early.**

Make sure you are confident you can cope and are not experiencing any cravings or longings for cigarettes before you stop using it.

- **Reduce your exposure to risky situations.**

As in the cut-down period, make sure you are confident you can cope with risky situations before going back into them. Can you sit with your smoker friends over coffee? What about if you drink alcohol with smokers? You need to be really confident you can cope with these situations before going back to them.

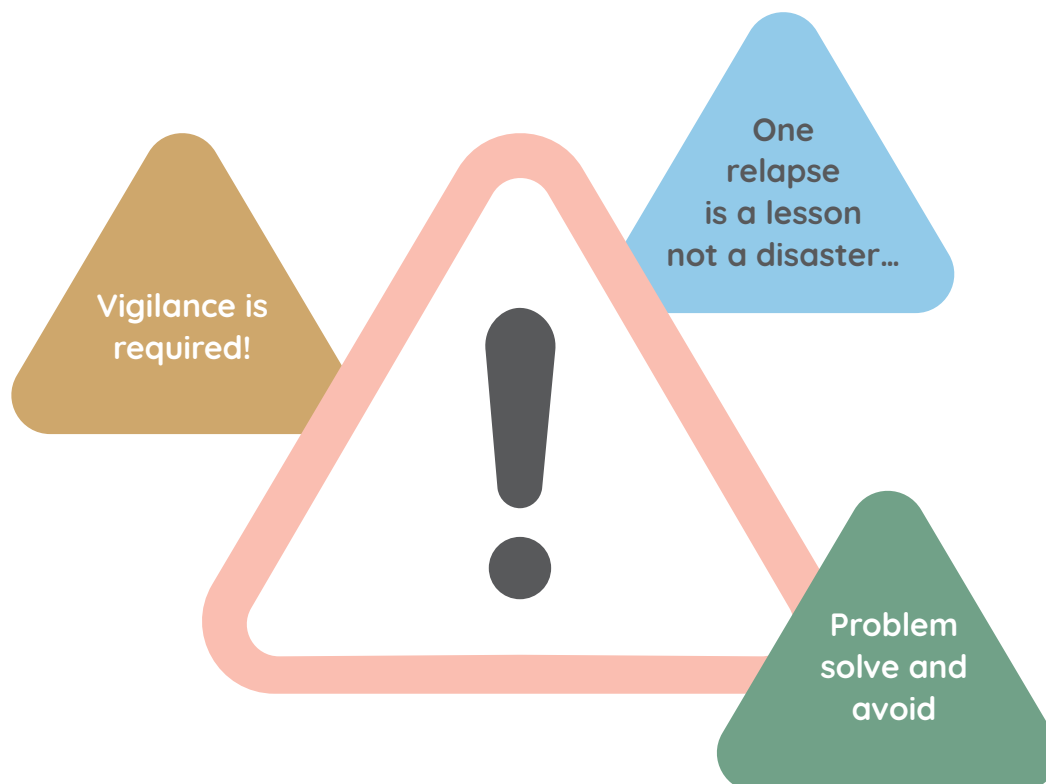
- **Have a plan on how to cope with urges:**

the strategies of distraction, thinking through negative images of smoking etc. Any strategies you used when cutting down can be used now as well.

- **Remember... cravings don't last forever.**

The key is to manage them for a few minutes, and they will reduce.

If you do relapse, be kind to yourself. It's not the end of the world, and we are all human. But, you can learn from it. Think why you have relapsed, what you could have done differently... learn from it. And then get back to being a non-smoker. Good luck!



## REDUCING TEMPTATION

### Avoidant strategies



Sit with non-smoking friends at coffee breaks



Drink something different at coffee breaks – to break your routine and not light up automatically



Go for a walk instead of taking a smoking break



Chew sugar-free gum or sweets at times you would normally smoke



Move ashtrays out of sight



Try to keep busy, so you won't have time to think of cigarettes

### Coping strategies

- Focus attention on things happening around you – not on your desire for a cigarette
- Think distracting thoughts – count backwards in sevens from 100
- Remember your reasons for stopping smoking – carry them on flashcards and look at them if this helps
- Imagine or look at pictures that depict the bad things about smoking... a full ashtray, damaged lungs, etc.... or think of the positive benefits of smoking... a holiday, more money in your pocket, better health etc.
- Call a friend and chat about anything but smoking



### Make it difficult to smoke



Don't carry money – so you can't buy cigarettes



Avoid passing the tobacconist where you usually buy your cigarettes

## Links to support groups

Thrombosis UK ([www.thrombosisuk.org](http://www.thrombosisuk.org))

Tel: 0300 772 9603 Email: [admin@thrombosisuk.org](mailto:admin@thrombosisuk.org)