

Tobacco Cessation

Best practices & programs for quitting tobacco

There are about 47 million smokers in the United States (about ¼ of the population) – most say they would like to quit, but only about 5 percent manage to do so each year.¹

Quitting smoking, chewing tobacco, snuff, or any other type of tobacco product is hard. That's because nicotine (a drug found naturally in tobacco products) is highly addictive – as addictive as heroin or cocaine.²

“Smoking is the nation’s leading preventable cause of death. It significantly increases the risk for coronary heart disease, stroke, and peripheral vascular disease. In fact, more than half of all smoking-related deaths in America each year are from heart disease, stroke, or other cardiovascular diseases.”³



“Smoking-related diseases claim an estimated 430,700 American lives each year. Smoking costs the United States approximately \$97.2 billion each year in health-care costs and lost productivity. It is directly responsible for 87 percent of lung cancer cases and causes more cases of emphysema and chronic bronchitis.”⁴

“Quitting smoking is easy. I’ve done it a thousand times.”²
– Mark Twain

The reality is, we could dedicate an entire book to talking about the statistics – the negative health consequences related to tobacco use and those exposed to it, as well as the financial consequences for the individual and the nation. Some of these reasons might even convince some to consider quitting, but most people who smoke will make the decision to quit for their own reasons – be it their own health, the health of a loved one, or some other circumstances, such as no smoking policies at work, in the community, etc.

Although talking about these elements may provide a bit of insight or motivation, for the most part, we don’t want or need to be told *why* to quit, we want and need to know *how*.

Key Factors for How to Quit Beginning the fight for freedom from tobacco

The problem with describing how to quit tobacco is that there isn’t one right way or one magic pill that works for all tobacco users. In fact, what works for one may not work for another. And, what works for someone who smokes may or may not work as well for someone who chews tobacco. Still, there seem to be some key factors that help most people quit, so let’s start with these key factors for quitting and staying quit:

- **Make the decision to quit**, and keep all of your reasons for wanting to quit visible.
- **Set a quit date**, and mark it on your calendar.
- **Get ready** by planning how you will deal with obstacles to quitting and choosing the method by which you will quit.
- **Get support** through friends, family, one-on-one support, group support, support from a former smoker, and/or telephone help lines.
- **Get medication** (if needed), and use it correctly.
- **Stay quit** by deciding now how you will deal with relapse and maintaining your quit status.^{2, 5}

For a quick-start guide, see [Steps for Quitting Tobacco](#).

Deciding to Quit

Are you ready?

Research says that you will be more likely to quit smoking if you:

- believe you could get a tobacco-related disease, and that worries you.
- believe that you can make an honest attempt at quitting.
- believe that the benefits of quitting outweigh the benefits of continuing tobacco use.
- know someone who has had health problems as a result of their tobacco use.²

You may go through stages of contemplation about quitting. First, you may not be thinking seriously about quitting. Then you're thinking about it, but you're concerned that the stress at work is too much, [you'll gain weight](#), you'll be anxious all the time, or you're just not sure you can do it. Finally, you will be prepared and ready to quit.

It is normal to go through these thoughts. If you are stuck thinking about quitting but not moving on to prepare to quit, read on about how to deal with some of the elements that might be holding you back. Perhaps you have even tried to quit before but aren't sure how to go about it again. If you didn't make a plan for quitting before – try it this time (we'll show you how). Many people try quitting at least two to three times before they are successful. Some people try five to seven times or more before they reach the goal. Others can go “cold turkey” and quit the first time. Don't be discouraged. Not quitting the first time is **NOT** failing. Look at your attempt as a positive experience – progress toward quitting for good – you are trying and learning what triggers your tobacco use along the way. Don't give up; get

ready for your next attempt to quit for good.

Find reasons to quit that are important to you. Try to think of more than just health reasons. Consider the following ideas:⁶

- the amount of money you'll save by not buying tobacco;
- the time you'll have for yourself instead of taking cigarette breaks, rushing out to buy tobacco, or searching for a light;
- not being short of breath, coughing as much, or fighting sores in your mouth; and
- setting a better example for your children, grandchildren, or others.⁶

Write down all of your reasons for wanting to quit. Ask former smokers their reasons for quitting. Keep the entire list, or at least the top five on your list,⁷ where you will see them often, such as: where you keep your cigarettes or other tobacco products, in your wallet or purse, in the kitchen, in the bathroom, in your car, attached to the TV remote, or beside your bed.⁶

Setting Your Quit Date

Making your mark

You've decided to quit tobacco. Unless there is a critical health reason that causes you to need to quit immediately, give yourself time to make some important changes and make a plan. The first thing you need to do is to set a quit date. When choosing a quit date, try these recommendations:

- Choose a date 2–4 weeks away (within the next month) to give yourself time to prepare but not so long that you lose your drive to quit.
- Choose a date that is special to you (e.g., birthday, anniversary, holiday, New Years Day, Independence Day, World No Tobacco Day [May 31], or the

date of the [Great American Smokeout](#) [3rd Thursday in November each year]). Choosing a random date is fine, too.

- If you use tobacco at work, choose a quit date on the weekend or a day off. That way you'll already be tobacco-free when you return.
- Mark the date on your calendar.
- Make a strong personal commitment to quit that day, and stick with it.^{2,5,6}

Get Ready to Quit

Environment, tobacco triggers, & quit methods

Getting ready to quit involves:

- considering your environment,
- discovering your tobacco triggers, and
- deciding the best quit method for you.

Considering Your Environment.

Make a clean getaway! Make some special plans for your quit date. Plan to make a clean break with tobacco on the date you quit. Change your usual routine and environment to increase your chances for success by following these suggestions:

- Remove all tobacco products from your home, car, and work. Throw away all your cigarettes, snuff, chew, cigars, etc. Throw away or give away your matches, lighters, and ashtrays (if an item has sentimental value, ask a friend to store it for you). Don't forget the ones in your makeup bag, junk drawer, tackle box, golf bag, or other places outside the home.
- Do **NOT** save just one pack of cigarettes or chew, one cigar, or one can of snuff. Some smokers like to do this “just in case” or to “prove” they have the willpower not to use tobacco. Don't! Saving

just one pack of tobacco makes it easier to start again.

- Schedule an appointment on your quit date to have your dentist clean your teeth to get rid of tobacco stains. See how great they look, and try to keep them that way.
- Make things clean and fresh at home, work, and in your car. Clean your drapes and clothes. Wash your car – inside and out. Buy flowers for your home and/or workplace – you'll enjoy their scent as your normal sense of smell returns.



- Don't let people smoke in your home. Ask other members of your household who smoke to quit with you. If they won't quit, ask them if they would be willing to smoke outside or at least not to smoke around you.
- Change your normal routine. If you normally have a cigarette with your coffee in the morning, try juice or a bowl of cereal instead. Avoid places or change routines where you normally drink alcohol – alcohol and tobacco use typically go hand-in-hand. If you smoke when you take a bath, try a shower instead. If you always take a tobacco break at the same time and place each day at work, change the time and place you take your break, and replace tobacco with a walk around the grounds or hallway, or spend the time getting a healthy snack. If you always smoke in the car, try riding with a friend who doesn't smoke, or place gum,

toothpicks, etc. in your car to chew on instead.^{5, 6, 8, 9}

Discovering Your Tobacco

Triggers. Certain things trigger, or turn on, our need to use tobacco. These things can be moods, feelings, places, or things we do. Examples include: feeling stressed, feeling down, talking on the phone, drinking alcohol, watching TV, driving your car, finishing a meal, playing cards, taking a work break, being with other smokers, drinking coffee, seeing someone else smoke, cooling off after an argument, and feeling lonely.⁶

Know your pattern for tobacco use, such as, which triggers are the strongest; which cigarettes are the "must haves"; and where, when, or with whom you're most likely to use tobacco. It can help you begin to break the pattern.¹⁰

Before you quit tobacco, make a sincere effort at keeping a [written record](#) of each time you use tobacco and under what circumstances. Try to do this for at least three days; if possible, keep recording your tobacco use for a couple of weeks. This record will be extremely useful in uncovering what triggers your use of tobacco most often. Many people find that they use tobacco without even thinking about it when they see it written down. Most importantly, this record will help you prepare how best to fight the urge to use tobacco when you quit.

Once you know what triggers you to use tobacco, you can start preparing how you will handle these circumstances when you quit. See [Quitting Tobacco Tips](#) for ideas on how to cope with your tobacco-use triggers.

Deciding the best quit method.

Some people may argue that quitting "cold turkey" – abruptly and totally – is the only way to quit tobacco. That just happens to be the

way most people who use tobacco prefer to quit.² They use tobacco until their quit date and then stop all at once. The truth is, **there is no one right way to quit** for everyone. So, if you are concerned about quitting abruptly on your quit date, you might want to try [nicotine fading or tapering off](#) for a few weeks prior to your quit date.

Smokeless Tobacco...

Unique Aspects of Quitting

Like cigarettes, smokeless tobacco is addictive. When we try to quit smokeless tobacco, we will deal with withdrawal symptoms and cravings just as a smoker does. That's because smokeless tobacco delivers high doses of nicotine to the body. An average dose of snuff is 3.6 mg, and an average dose of chew is 4.6 mg – compared to 1.8 mg nicotine for a cigarette.

A Swedish study on quitting smokeless tobacco reported participants having as much trouble quitting smokeless tobacco as smokers had quitting cigarettes. In fact, evidence also suggested that regular snuff users would smoke cigarettes to satisfy their need for nicotine.

Thus, we know that quitting smokeless tobacco is challenging. The psychological and physical challenges are there to be met head on. And, though many of the methods for handling these challenges are the same as for a smoker, there are two unique aspects to quitting for the smokeless tobacco user:

- There is often a stronger need for oral substitutes to take the place of chew or snuff.
- The disappearance of mouth sores and gum problems caused by smokeless tobacco provides a readily visible benefit.¹¹

Get Support: Increase Your Chance for Success

Studies have shown that you have a better chance of quitting tobacco if you have some help in the form of support people.⁵ Support can come in many forms: individuals, family, friends, former smokers, one-on-one programs, group programs, health care providers, smoking counselors, or telephone quitlines. You may have some ideas of your own about who can best help you. Try seeking support through some or all of the following avenues:

- Tell your family, friends, and co-workers that you are going to quit and would like their support. Ask them not to smoke around you, or ask them to consider quitting with you.
- Seek out individual, group, or telephone counseling. “The more counseling you have, the better your chances of quitting.”⁵ Check with your employer, health insurance company, or local hospital for help finding support groups. Try a smoking cessation group program, or check out a quitline for support and resources.
- Talk with your health care providers. These can include doctors, dentists, nurses, pharmacists, psychologists, nutritionists/dieticians, and smoking counselors. All of these people can be a great source of information and support.

Try these resources to find support:

- [Talking with Family & Friends - What Can I Say?](#)
- [What to Look for in a Cessation Program...and What to Watch out for](#)

This document is meant for educational purposes only and is not intended to replace the advice of your doctor or other health care provider.

- [Quitlines - Support at Your Fingertips](#)

If you are trying to give support to someone who is trying to quit tobacco, see [Being a True Support: How Do I Support Someone Trying to Quit?](#)

Self-Help Materials

Finding what works for you

Did you know that you don't have to leave the comforts of your own home to participate in some programs? There are many excellent self-led programs and [self-help materials](#) available either on-line, through the mail, and even at local libraries and bookstores. These programs offer flexibility and privacy, and many are free. You can use these materials to learn how to prepare for your quit attempt, deal with withdrawal symptoms, develop strategies to help with cravings, and prevent relapse once you've quit.

See our [Resource Guide](#) for more information on programs and resources that can help you quit.

What about Medications? Double your chances for quitting

Do you use tobacco within 30 minutes of waking up in the morning? Do you smoke 20 cigarettes (one pack) or more each day? At times when you can't use tobacco or don't have any, do you feel a craving for it? Is it tough for you to keep from using tobacco for more than a few hours? When you are sick enough to stay in bed, do you still use tobacco?¹²

If you answered yes to two or more of the questions above, you may be at a level of nicotine addiction that

warrants the use of medication as part of your quit smoking plan.¹³ In fact, “research has shown that using a quit-smoking medicine, such as bupropion (Zyban®), varenicline (Chantix®), or the nicotine patch, gum, nasal spray, inhaler, or lozenge, can double your chances of successfully quitting.”¹⁴

The U.S. Food and Drug Administration has currently approved seven medications to help you quit, some which are available over-the-counter and some by prescription. To learn more about these medications, see [A Quick Reference to Quit Tobacco Medications](#) and [Tobacco Cessation Medications - The Right Choice for You?](#)^{5, 15}

Stay Quit Withdrawal, cravings, & relapse

Dealing with withdrawal, cravings, and relapse when trying to quit tobacco – simply put – is hard to do. We've put together a list of [Quitting Tobacco Tips](#) that includes ideas pulled from many reputable resources that have helped others when trying to quit tobacco – and it may help you, too.

See our [Resource Guide](#) for information that is designed to help you through the quit process. It contains information on quit tobacco contact numbers and websites; books and audio books; face-to-face programs and support; prenatal, infant, and child resources, quitline resources; tools for teens; web-based programs and support; and worksite and community events and materials.

To view the references used in this newsletter, go to:
<http://fcs.tamu.edu/health/healthhints/2008/oct/ref.php>

Educational programs of the Texas AgriLife Extension Service are open to all people without regard to race, color, sex, disability, religion, age, or national origin.

The Texas A&M University System, U.S. Department of Agriculture, and the County Commissioners Courts of Texas Cooperating

Steps for Quitting Tobacco

Though quitting tobacco can look different for each individual in terms of strategies for coping with withdrawal, cravings, and maintenance of your quit status, there are some steps that tend to be the same for most people. These steps can help you be successful in your attempt to give up tobacco – be it smoking or smokeless tobacco. Take a step forward now by beginning this process.

Make a decision to quit

Some reasons for quitting might include:

- your health,
- health of a loved one,
- no smoking policies in places you frequent, and/or
- other reasons.

Set a quit date

Choosing a random date is fine, but you might want to choose a special occasion, such as:

- birthday,
- anniversary,
- holiday,
- New Year's Day,
- World No Tobacco Day (May 31st), or
- Great American Smokeout (3rd Thursday in November).

Whatever date you choose, mark the date on your calendar and circle it.



Get ready to quit

This is your time to prepare. Take two to three weeks to prepare before you quit tobacco.

- Choose the method you feel will make you the most likely to quit.
- Keep a journal of your tobacco use for at least three days to two weeks to notice what triggers your use of tobacco.
- Plan how you will deal with obstacles to quitting (withdrawal, cravings, social situations, etc.).
- Begin thinking about or making changes in your environment/surroundings to help you quit (e.g., post your top five reasons for quitting in obvious places; find all of your packs of tobacco so you can dispose of them; and think about what changes need to be made in your routine to eliminate tobacco use triggers).

Get support

Support can help increase your chances for quitting tobacco. Try any or all of the following types of support:

- family,
- friends,
- one-on-one support program,
- group support program,
- support from a non-smoker,
- support from another smoker who is trying to quit tobacco, and/or
- telephone quitline support and/or counseling.



Get medication

Talk with your health care provider about whether or not medication might help you in the quit process. Use only FDA-approved medications. Ask your doctor about:

- Varenicline
- Bupropion SR,
- Nicotine gum,
- Nicotine inhaler,
- Nicotine nasal spray, and
- Nicotine patch.



Stay quit

Make plans for maintaining your quit status. Decide how you will deal with offers to use tobacco and what you will do if you “slip” and use tobacco once you’ve quit.

Sources:

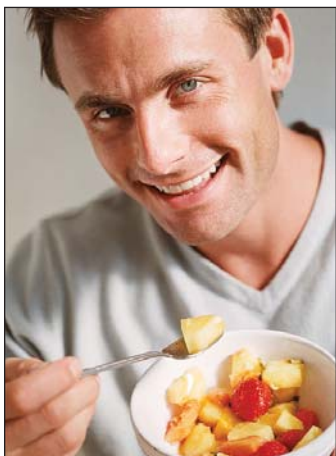
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United States Department of Health and Human Services (2000). You can quit smoking consumer guide. Retrieved March 9, 2005. From <http://www.cdc.gov/tobacco/quit/canquit.htm>.

Weight Control While Quitting

For some people, concern about gaining weight may be a major factor in deciding **not** to quit tobacco; for others it can be the main reason they go back to tobacco use. Don't let weight gain issues weaken your resolve. Focus on quitting tobacco, and use the following tips and information to strengthen your resolve and keep you from excess weight gain.

- Most people who gain weight while quitting tobacco gain less than 10 pounds. In fact, the average weight gain is about 5 pounds.
- Not everyone gains weight when quitting tobacco.
- What you gain from quitting tobacco far outweighs the drawbacks of adding a few pounds. You would have to gain a lot of weight to offset the health rewards of quitting.
- Remember that quitting tobacco makes you more attractive. Even if you gain weight, you'll have fewer wrinkles, fresher breath, and whiter teeth as a non-smoker.
- If appropriate, try nicotine gum or bupropion SR, which can delay weight gain associated with quitting. Consult your doctor first.
- Stock up on healthy snacks, and reach for these when you feel hungry: carrots, celery sticks, fresh fruit, fat-free popcorn, low-calorie beverages.
- It only takes 50 calories to satisfy a hunger



craving. Here are some snack examples for comparison: 1 cup raw vegetables (25 calories); 1 cup raw vegetables with low-calorie dressing (40 calories); 1 medium apple (80 calories), 1 medium baked apple with cinnamon and 1 teaspoon sugar (100 calories); 1 cup low-calorie cocoa (65 calories); 2 rice cakes (70

calories); 3 cups popped popcorn with 1 tablespoon parmesan cheese (100 calories).

- Read food labels, and note the percentage of calories from fat. Also note that many foods labeled low-fat are high in sugar. Compare labels, and choose foods low in fat and sugar.
- Chew sugar-free gum, or suck on sugar-free candy if you crave sweets. Better yet, have an orange or try a mango.
- Drink plenty of water. Drink water before meals and between meals.
- Exercise (walking is highly recommended and can be started at just 10 minutes a day; see <http://walkacrosstexas.tamu.edu> to get motivated to walk). Enjoy some form of physical activity in your day (e.g., try taking stairs, mowing, gardening, walking the dog, playing sports, shooting hoops, swimming, walking around the shopping mall, getting off the bus one stop early and walking, exercising with a friend at lunch hour, pushing a baby stroller, etc.). Not only does physical activity keep off the pounds, it can help you relax, reduce stress, and sleep better. Remember, muscle weighs more than fat—you may find your clothes fit looser even if you weigh more.



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Keeping a Record

Tools for identifying your tobacco triggers

The National Cancer Institute (NCI) and the American Lung Association have created tools to make keeping a record of tobacco use easier. Try one of these resources to help keep track of your tobacco use and identify your tobacco triggers.

- National Cancer Institute's *Craving Journal* can be copied from page 11 of the [Clearing the Air: Quit Smoking Today](#) booklet.¹ Make a copy of the journal page for as many days as you would like to keep a record. This journal will give you a place to write down the following information for every cigarette you smoke: date, time of day, where you were, what you were doing, who was with you, and your level of craving (1=just a little; 2=some; 3=a lot).

If you use other forms of tobacco, just substitute chew, dip, snuff, cigar, etc. for "cigarette number."

- American Lung Association's [Pack Tracks](#) can be copied from the "Module 2: Triggers" section of the on-line *Freedom from Smoking* program along with the [directions for use](#). You can also set up a free account online to have access to all the [Freedom from Smoking](#) materials. The *Pack Tracks* are sized to fit on a pack of cigarettes. (You'll need to set up a free account online to have access to the materials.) There are nine pack tracks on each page. Copy enough pack track cards to place one on each pack of cigarettes you will have over the next three days to two weeks (depending how long you plan to keep record). If you use other forms of tobacco, the pack tracks are a great size to put in your back pocket, wallet, purse, or on your car's dashboard or console. The *Pack Tracks* give you a place to write down and check off: 20 uses of tobacco per day, time of day, your felt need for the tobacco (? , yes, or YES), your mood at each use (identified by checking happy face, "blah" face, or unhappy face).

- If you identify your tobacco use with mostly happy faces, you most likely use tobacco to relax, feel good, and enjoy good times. Think about where and when you use tobacco and who is with you at these times.



- If you identify your tobacco use with mostly "blah" faces, you most likely use tobacco out of boredom or habit. Think about where and when you are when you use tobacco and check the "blah" face.



- If you identify your tobacco use with mostly unhappy faces, you most likely use tobacco when you are tense, angry, or upset. Think about why, when, and where you use tobacco under these circumstances.²



Sources:

1. National Cancer Institute & United States Department of Health and Human Services (2005). *Clearing the air: Quit smoking today*. Retrieved March 9, 2005. From http://www.smokefree.gov/pubs/clearing_the-air.pdf.
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Quitting Tobacco Tips

Dealing with withdrawal, cravings, and relapse when trying to quit tobacco – simply put – is hard. The following is a list of ideas pulled from many reputable resources that have helped other people trying to quit tobacco, and they may help you, too. Try the ones you think will work for you. If one does not work, try another. The idea here is to give you many options in the hope that you will be able to find what works for you...without having to go out and look up countless resources for a suggestion in the midst of a difficult time. So, take a few moments now to look through the ideas, and consider which ones you might find helpful as you're planning your quit tobacco process.

As you read these tips, remember, some of them may sound strange to you. Don't let that stop you from finding what works for you. In fact, when something doesn't work for you, try the "strange" suggestion and see what happens – sometimes the ideas we find the oddest are actually the ones we need to help us.



Coping Strategies

- Come to tough situations prepared for pauses in conversation. Prepare a list of interesting things you can talk about. Most importantly, have a ready and automatic response if you are offered a tobacco product.
- Never allow yourself to think that "one won't hurt," because it may.
- Concern yourself only with today – get through today without tobacco – tomorrow will take care of itself. Remember that symptoms associated with quitting are temporary. You will learn to live well and healthily without tobacco.
- Keep in mind that the urge to use tobacco usually only lasts 3–5 minutes. Use these and other tips to get you through the tough times.
- If you need to relieve frustration, throw darts; hit a pillow; exercise; mow the lawn or weed the flower bed; squeeze a ball; do dishes; listen to a relaxation tape or CD; throw something unbreakable; holler out loud (but not at someone); talk with someone; or write down your feelings.
- Avoid temptation by staying away from situations you associate with pleasurable smoking or tobacco use. Change your routine when you first start to quit. Instead of smoking after a meal, get up and go for a walk or brush your teeth. Instead of smoking while driving, try a new or favorite radio station; try a new or different route to work; or take the train or bus for a while. Instead of a coffee break, drink tea, or take a brisk walk. Eat breakfast in a different place.
- Anticipate future situations/crises that might make you want to smoke again, and remind yourself of your reasons to not give in. Put a list of your top five reasons to quit in places you'll see regularly (e.g., on the bathroom mirror, by the kitchen sink, in your wallet or purse, car, etc.).
- Learn to relax quickly and deeply. Relax all of your muscles. Picture a soothing, pleasant scene. Make yourself limp; visualize a soothing, pleasing situation; and get away from it all for a moment. Concentrate on that peaceful image and nothing else.
- Learn to relax quickly by taking deep breaths. Take deep, rhythmic breaths—similar to smoking—to relax; picture your lungs filling with clean air. Or take 10 slow, deep breaths and hold the last one; then breathe out slowly. Or take 10 deep breaths, and hold the last one while lighting a match; exhale slowly, and blow out the match; pretend it is a cigarette, and put it out in an ashtray.
- Go outside or to a different room when something in your surroundings triggers a craving.

- Think positive thoughts, and try to avoid negative ones.
- Write or talk about your feelings related to quitting.
- If you feel you're about to use tobacco, delay. Tell yourself you will wait 10 minutes. Even the most intense craving lasts only a few minutes...5–10 minutes at the most. The urge will pass whether you smoke or not. Often this simple trick of delaying will help you move beyond a strong urge.
- Review your reasons for quitting, and think of all the benefits to your health, your family, and your finances. Think of your most important reason for wanting to stop tobacco use. Say it out loud in front of the mirror.
- Tell yourself "no." Say it out loud. Practice doing this a few times, and listen to yourself. Some other things you can say to yourself might be, "I'm too strong to give in to smoking"; "I'm a nonsmoker now"; or "I don't want to let my friends and family down."
- Eat a balanced diet.
- Drink a lot of water and fruit juice (look for low sugar content and 100 percent juice). Curb your use of alcohol, caffeine, and other beverages you associate with smoking. Alcohol can also weaken your resolve about staying quit. Try non-alcoholic cocktails, if desired.
- Eat several small meals during the day instead of one or two large ones. This maintains constant blood sugar levels and helps prevent the urge to smoke. Avoid sugary or spicy foods that may trigger a desire for cigarettes.
- Keep oral substitutes handy: carrots, pickles, apples, celery, raisins, sunflower seeds, or sugar-free gum.
- Get plenty of rest. Take naps.
- If you are using medicine to help you quit, don't quit using it after a day or two. Stay with it according to directions and the advice of your health care provider.



Keeping Busy Strategies

- Spend as much free time as possible in places where smoking isn't allowed (especially the first

few days after you quit smoking, but also during rough times) – libraries, malls, department stores, museums, theaters, churches, etc. Later on you will be able to handle places with people using tobacco with more confidence.

- If you miss the feeling of having a cigarette in your hand, play with something else—a pencil, a paper clip, a coin, a marble, a water bottle, etc.
- If you miss the feeling of having something in your mouth, try toothpicks, cinnamon sticks, sugar-free lollipops, hard candy, gum, celery, or carrot sticks.
- Exercise. Take a long walk; walk the dog; go bike riding; try other physical activities (e.g., karate, yoga, bowling, hiking, tennis, swimming, softball).
- Try doing brief bursts of exercise (pushups, deep knee bends, walk up a flight of stairs, or touch your toes).
- Do activities around the home (gardening; cleaning out and organizing a closet, garage, or attic; painting; decorating; washing the car; organizing a yard sale; or cooking).
- Work on a hobby, or take up a new one. Play a musical instrument; start a collection; knit; sew; do woodworking; write; read; or do puzzles.
- Go to a movie.
- Clip coupons.
- Play cards.
- Do a puzzle or crossword.
- Get a manicure or pedicure.
- Brush your teeth and/or use mouthwash.
- Take a shower or bath.
- Wash your hands or the dishes.
- Light incense or a candle instead of a cigarette.

Reward Strategies

- Reward yourself. Plan to do something fun for doing your best.
- Plan a day full of pleasurable activities; then plan something enjoyable every day.
- Make a list of the money you'll save not smoking and a list of rewards you could purchase with that money. Be sure to reward yourself incrementally – don't wait until you are smoke-free for a month; reward yourself for getting through the first day, then the first week, etc. Celebrate your important milestones.

- Give yourself a financial incentive by putting the money you would have spent on tobacco products in a glass jar. For a pack-a-day smoker, this could be \$1,500 a year or more.
- Commit yourself in writing to a specific reward for a specific accomplishment. Write a contract (e.g., state your name, number of days you'll stay quit to fulfill the contract, exact time you will complete the contract, and a reward for completing it). Sign the contract, and have a friend or family member sign as a "witness" for accountability. Keep the contract. If it motivates you, write a negative consequence for not keeping the contract (e.g., cleaning the garage, buying lunch for the person who nags you the most about quitting tobacco, or deep cleaning your spouse's car).



Support Strategies

- Seek the company of non-smokers more often. Remember, most people don't smoke. So, if you must be in a place where smoking is allowed, for example at a party, try to be near non-smokers where you might not be as easily tempted.
- Call a supportive friend, family member, or quitline counselor.
- Join a club or support group.
- Have someone over or a family get-together.
- Get a "buddy." This "buddy" would be someone you could call on when you're going through a rough spot, or someone who would be willing to help motivate and encourage you in ways that work for you. You might want to have a "buddy" who is also trying to quit tobacco or a former tobacco user who can understand what you are going through.
- See your doctor or other health care provider for motivation and advice on quitting.

"Slip" Strategies

- If you "slip" and use tobacco, understand that it is a small setback and doesn't make you a smoker again. The difference between a "slip" and a total relapse is within your control. Don't say, "Well, I've blown it. I might as well smoke the rest of this pack." Get right back on your no-tobacco track, remembering that the ultimate goal is no tobacco, not one puff or pinch.
- If you "slip" and use tobacco, feel good about the time you went without tobacco. Try to identify what triggered you to use tobacco, and learn from the "slip" how to make your coping skills better.

Sources:

American Cancer Society (2005). Help for cravings and tough situations. Retrieved March 3, 2005. From http://www.cancer.org/docroot/PED/content/PED_10_13X_Help_for_Cravings.asp?sitearea=PED.

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American Lung Association (2004). Alternatives. Retrieved March 11, 2005. From <http://www.lungusa.org/site/pp.asp?c=dvLUK9O0E&b=39204>.

American Lung Association (2004). Contracts and rewards. Retrieved March 11, 2005. From <http://www.lungusa.org/site/pp.asp?c=dvLUK9O0E&b=39208>.

American Lung Association (2004). Social situations. Retrieved March 11, 2005. From <http://www.lungusa.org/site/pp.asp?c=dvLUK9O0E&b=39222>.

American Lung Association (2004). What to do when the cravings come. Retrieved March 11, 2005. From <http://www.lungusa.org/site/pp.asp?c=dvLUK9O0E&b=40325>.

University of Wisconsin Medical School: Center for Tobacco Research and Intervention (2004). Tips for quitting smoking. Retrieved March 7, 2005. From http://www.ctri.wisc.edu/Smokers/smokers_Quit_Tips.htm.

Methods for Quitting Tobacco

What's right for you?

There are three ways that people typically use to quit tobacco.

- cold turkey,
- nicotine fading, and
- tapering off.

Most people try to go “**cold turkey**,” which means they decide to give up tobacco abruptly and totally all at once. Going *cold turkey* has been very successful – put the tobacco in the trash can on your quit date; say goodbye, and be done with it – that’s cold turkey.

But, there is no right way for everyone. If going “cold turkey” doesn’t appeal to you, try the nicotine fading or tapering off methods described below.

Nicotine fading is for those who smoke cigarettes. It involves switching to a cigarette with a lower level of nicotine so you can bring your addiction to nicotine down before you quit smoking. Here’s how it works:

- If you’re smoking a high-nicotine brand, switch to a medium-nicotine brand.
- If you’re smoking a medium-nicotine brand, switch to a low-nicotine brand.
- If you’re smoking a low-nicotine brand, just switch to a different low-nicotine brand.¹

On the next page, you will find a list of cigarette brands by nicotine level, which we have obtained from the American Lung Association’s *Freedom from Smoking* website. If your brand is not listed, follow these guidelines:

- If it’s an unfiltered cigarette or if it’s filtered and does not contain the words “light” or “ultra light,” count it as a high-nicotine brand.
- If it’s a filtered cigarette and contains the word “light” or “mild,” assume it’s a medium-nicotine brand.

- If it’s a filtered cigarette and contains the words “ultra light,” assume it’s a low-nicotine brand.

If you decide to try nicotine fading, make sure you **do not**:

- switch from a high-nicotine brand directly to a low-nicotine brand,
- smoke more cigarettes than you normally do, or
- inhale more often or more deeply.¹

Tapering off works in a similar way to nicotine fading, but rather than reducing the nicotine level, you reduce the amount of nicotine you’re using. Tapering off can be used for all types of tobacco use since you just reduce the amount (e.g., fewer cigarettes or cigars, less chew or snuff, etc.). This method also helps you gradually reduce the amount of nicotine in your body, preparing you for your quit date when you will stop using tobacco completely.

Tapering off may look different for you than for another person depending on how much tobacco you use each day. Start gradually; then taper off as much as you can before your quit date, when you will quit tobacco for good.



Nicotine Fading

(Source: American Lung Association’s [Freedom from Smoking online program](#))

Start your nicotine fading by finding the cigarette brand on the following list that you are now smoking. If you’re smoking a high-nicotine cigarette, choose one of the low-nicotine brands to smoke this week. If you’re smoking a medium-nicotine cigarette, choose a low-nicotine brand to smoke this week. You will cut your daily nicotine dose by about 1/3 when you switch to a lower nicotine level. If you’re starting with a low-nicotine cigarette, switch to another low-nicotine brand for this week.

| High-Nicotine Brand | Medium-Nicotine Brand | Low-Nicotine Brand |
|---------------------|------------------------|---|
| Alpine | Belair | Benson & Hedges Ultra Lights |
| American | Benson & Hedges Lights | Bright 1 100's |
| Austin | Cambridge Lights | Carlton |
| Benson & Hedges | Camel Lights | Cost Cutter Ultra Lights |
| Best Buy | Capri | Doral Ultra Lights |
| Best Value | Century Lights | Famous Value Ultra Lights |
| Cambridge | Cost Cutter Lights | Gridlock Ultra Lights |
| Camel | Falcon Lights | Doral Ultra Lights |
| Century 25's | Famous Value Lights | Merit Ultra Lights |
| Chesterfield | Fiesta | Now |
| Convoy | Kent Golden Lights | Salem Ultra Lights |
| Cost Cutter | Kim | Triumph |
| Craven A | Kool Lights/Mild | True |
| Dunhill | L & M Lights | Vantage Ultra Lights |
| Ell Cutter | Lucky Strike Lights | Virginia Slims Ultra Lights |
| English Ovals | Magna | Winston Ultra Lights |
| Eve Sim Lights | Malibu Lights | |
| Famous Value | Marlboro Lights | |
| Gridlock | Merit | |
| Harley Davidson | More Lights | |
| Herbert Tareyton | Newport Lights | |
| Hi-Lite | No Frills | |
| Kent 100's | Old Gold Lights | |
| Kool | Pall Mall Lights | |
| L&M | Parliament Lights | |
| Lark | Pyramid Ultra Lights | |
| Lucky Strike | Raleigh Lights | |
| Malibu | Richland Lights | |
| Marlboro | Ritz | |
| Max | Royale Lights | |
| More | Salem Lights | |
| Newport | Saratoga | |
| Old Gold | Satin | |
| Pall Mall | Silva Thins | |
| Philip Morris | True 1 100's | |
| Players | Vantage | |
| P.M. Blues | Viceroy Lights | |
| Richland | Virginia Slim Lights | |
| Salem | Winston Lights | |
| Spring | | |
| Stride | | |
| Tall | | |
| Tareyton | | |
| | | <p>If your brand is not listed above, here is a general rule of thumb to follow: medium-nicotine brands are often labeled "lights" and low-nicotine brands are often labeled "ultra-lights."</p> |

Source:

1. American Lung Association (2004). Nicotine. Retrieved March 11, 2005. From <http://www.lungusa.org/site/pp.asp?c=dvLUK9O0E&b=39202>.

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Talking with Family & Friends What can I say?



“Many former smokers say a support network of family and friends was very important during their quit attempt.”² Still, well-intentioned friends and family often don’t know how to support you and can become more of a hazard than a help.

Talk with them. Tell them what is helpful to you as you quit. Read the section below, or go to the American Cancer Society link to [Helping a Smoker Quit: Do’s and Don’ts](#). Mark the items that you find most helpful, and share a copy with family and friends.

Get help from a “buddy.” Remember the old “buddy system” from your school days? Well, try it out as part of your quit plan. Choose someone who is currently going through the quit process or who is a former smoker or tobacco user, if possible. An especially helpful, supportive non-smoking friend is fine, too. Just try to choose someone outside your household.

Because your “buddy” knows what you’re trying to do and how you’re trying to do it, he/she is someone who can help during those times when members of your household are unable to understand, tense, in a bad mood, etc.¹

It can be hard for family members to handle the mood swings you may be having as well. Your “buddy” can be a help during these times. Use e-mail, or call them on the phone when needed. Ask them to provide you any information about things that have helped them in similar situations. Tell them what helps you most.



Trying to support a friend or family member as they try to quit tobacco? See [Being a True Support: How Do I Support Someone Trying to Quit Tobacco](#).

Source:

1. American Lung Association (2004). The buddy system. Retrieved March 11, 2005. From <http://www.lungusa.org/site/pp.asp?c=dvLUK9O0E&b=39203>.

What to Look for in a Cessation Program... and what to watch out for

Quit tobacco programs are designed to help individuals “recognize and cope with problems that come up during quitting and to provide support and encouragement in staying quit.”¹ Studies have shown that the most successful programs include either group or individual counseling. “There is also a strong association between the intensity of the counseling and the success rate. In general, the more intense the program, the greater the likelihood of success.”¹



What to Look for in a Quit Program

Based on the information above, the things to look for in a quit tobacco program are as follows:

- Find a program that includes group or individual counseling. Be sure that the leader of the group is trained in tobacco cessation. Ask about their training or professional degrees. Ask if they have a diploma or some sort of certificate of training completion for verification. Health educators or other health, medical, or counseling professionals will often offer these types of services.
- Also, look for a program of adequate intensity. Sessions should:
 - last at least 20–30 minutes,
 - last for at least two weeks, and
 - have at least four to seven total sessions.¹

A good tobacco cessation program should also cover the following topics:

- developing a quit plan,
- understanding and dealing with withdrawal symptoms,
- information about the harmful health effects of tobacco and the benefits of quitting,

- social support,
- weight control, and
- maintenance plan for staying quit.²

What to Watch Out for in a Quit Program

There are also some programs to watch out for. Not all programs are ethical. Be very careful of programs that do the following:

- Promise instant or easy success with little effort on your part. If it sounds too good to be true, it probably is.
- Claim high quit rates but follow participants for less than six months. Quit rates measured 6–12 months after the end of a program are considered the standard.
- Claim high quit rates but do not include those who dropped out of the program or with whom they could not get in touch or follow-up in the measurement.
- Use injections or pills, especially those that have “secret ingredients.” If you choose to use [medications](#), use only those that are FDA-approved, and talk with your health care provider about the best choice for you.
- Charge a high fee. Check with the Better Business Bureau if you have doubts.
- Are not willing to provide references from people who have taken the class.^{1,2}

Sources:

1. American Cancer Society (2005). Quitting smoking. Retrieved March 3, 2005. From http://www.cancer.org/docroot/PED/content/PED_10_13X_Guide_for_Quitting_Smoking.asp?sitearea=PED.
2. United States Department of Health and Human Services (1996). Out of ashes: Choosing a method to quit smoking. Available CDC Fax Information Service 1-800-232-1311.

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Quitlines

Support at your fingertips

A great way to gain support without leaving the conveniences of home is to use a telephone quitline. In fact, **“quitlines have been proven to double your chances of successfully quitting.”**¹⁶ A quitline is a telephone number you call to get personal support, counseling, encouragement, etc. to help you through the tough spots and keep you quit. The advantage of using a quitline is its convenience. Most quitlines are available any time you choose to pick up the phone and call.

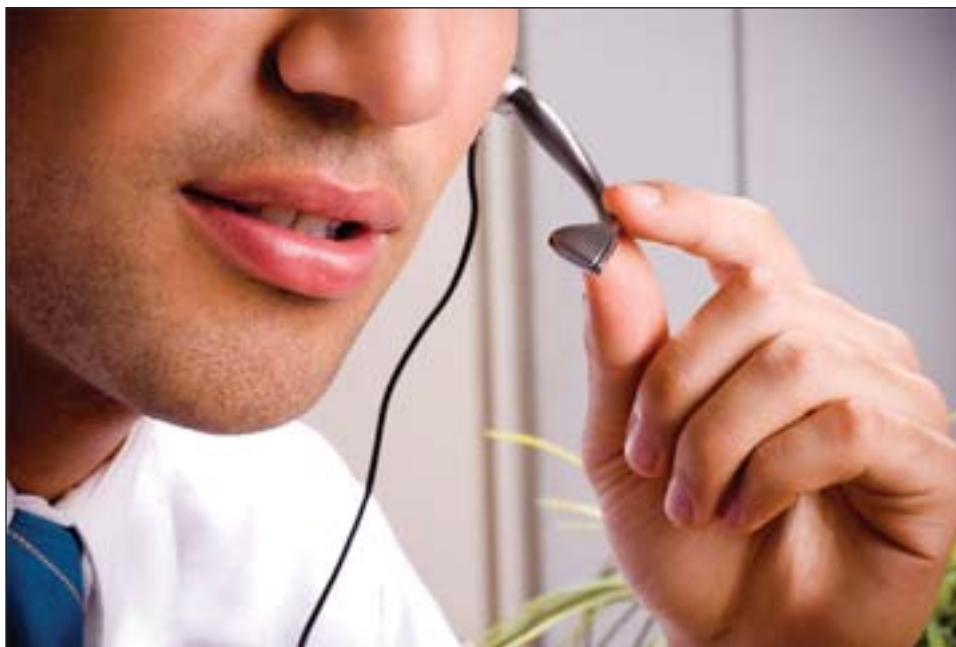
The United States Department of Health and Human Services (USDHHS) has created a national, toll-free quitline number that will route you to a state-sponsored quitline or to the National Cancer Institute’s quitline if a state-sponsored line is not available. The USDHHS number is 1-800-QUIT NOW (1-800-784-8669).

Other national quitlines available include:

- National Cancer Institute (mentioned above)
1-877-44U-QUIT (1-877-448-7848)
- American Cancer Society
1-877-YES-QUIT (1-877-937-7848)
- American Lung Association
1-800-LUNG-USA (1-800-586-4872)
- American Legacy Foundation: Great Start (for pregnant women) 1-866-667-8278

For more help in locating a quitline, try these locating services:

- American Cancer Society’s [Find a Quitline or Other Support](#).
- [North American Quitline Consortium’s Quitline Map](#) – Just click on your location for the nearest quitline information.



Being a True Support

How do I support someone trying to quit?

If you know someone who is trying to quit tobacco, being truly supportive can be hard. People who use tobacco and try to quit go through withdrawal symptoms. They may get irritable, angry, depressed, lack concentration, etc., which can make them not so enjoyable to be around. Don't give up on them. The worst of the withdrawal symptoms usually last two weeks, and the cravings usually lessen within three months. In the meantime, use the following tips as a guideline to help you be a true support. (The following ideas are adapted from American Cancer Society's fact sheet, [Helping a Smoker to Quit: Do's and Don'ts.](#))

- Respect that the quitter is in charge – not you. Listen to what he/she asks of you in terms of support, and try to honor that, even if he/she asks you not to do something that is suggested here. These are guidelines; people who quit are individuals who have their own support needs.
- Ask the person if he/she would like you to call, visit, or e-mail regularly to see how he/she is doing.
- Tell the person it is okay to call, visit, or e-mail you when they need some encouragement.
- Do **NOT** offer advice. Just ask how you can help with the plan or program they are using.
- Help the person get what they need to help them quit, such as picking up tobacco substitutes they like (e.g., straws or toothpicks to chew on, fresh vegetables cut up and refrigerator ready, sugar-free hard candy to suck on, etc.), or going to get their nicotine replacement medicine.
- Spend time with the person to help keep his/her mind off tobacco – go to the movies or take a walk to get past a craving.
- Help the person with a few chores, occasional child care, cooking, or anything else that may lighten the stress of quitting.
- Celebrate along the way. Quitting is hard, and it is a big deal. Praise the person, and help him/her

celebrate as they meet short-term goals, even if it is making it through one movie without having to go outside and smoke. These short-term goals can be major accomplishments for someone who has smoked regularly for years.

- Do **NOT** take any of the person's grumpy moods personally during his/her nicotine withdrawal. Remember, this period usually will pass in about two weeks.¹

If the person you care about fails to quit, don't give up your efforts to encourage and support:

- Praise him/her for trying to quit for whatever amount of time was possible (four days, three weeks, two months, etc).
- Encourage him/her to quit again. Don't say "If you try again." Say, "When you try again." Studies have shown that most people who don't succeed in quitting are ready to try again in the near future.
- Remember, the person may try to quit many times before quitting for good. Trying to quit five to seven times is not uncommon. Encourage him/her to learn from each attempt. Things a person learns from a failed attempt can help him/her in the future.¹

If you use tobacco, you can still be supportive of the person trying to quit:

- Smoke or use other tobacco products outside, always away from the person quitting.
- Keep your tobacco products, matches, lighters, etc. out of sight; they may be a trigger for the person trying to quit.
- Don't ever offer the person tobacco, even in jest.¹

Source:

1. American Cancer Society (2005). Helping a smoker quit: Do's and don'ts. Retrieved March 3, 2005. From http://www.cancer.org/docroot/PED/content/PED_10_3x_Help_Someone_Quit.asp?sitearea=PED.

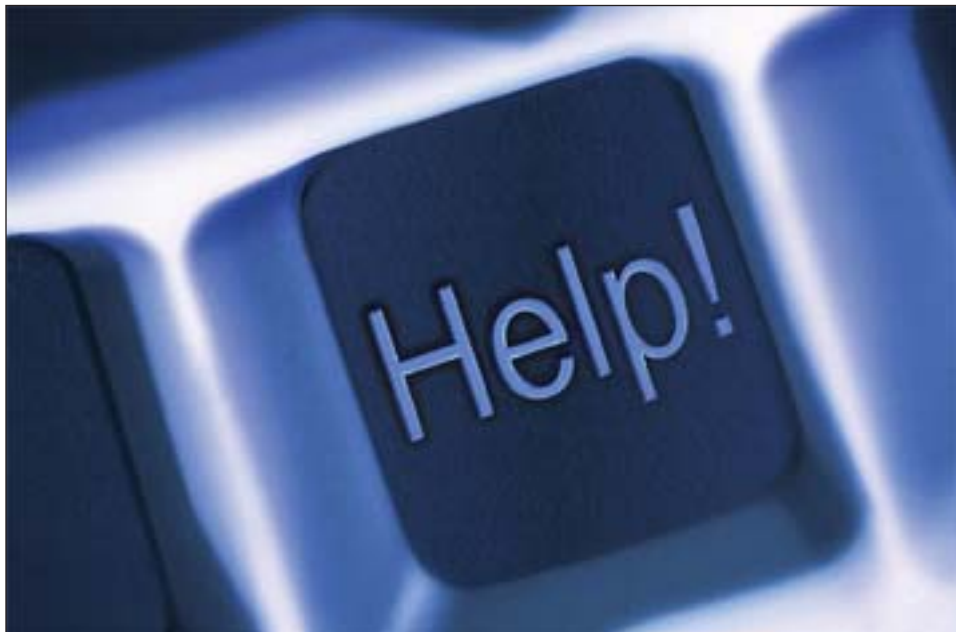


Self-Help Resources

Self-help programs and materials can be an easy-to-follow way of keeping your motivation high without leaving the comforts of home. The following programs and materials are a good place to start:

- [Clearing the Air: Quit Smoking Today](#). Available from the National Cancer Institute.
- [Freedom from Smoking On-Line](#). Available from American Lung Association.
- [I Quit: What to Do When You're Sick of Smoking, Chewing, or Dipping](#). A guide for young people available from the Centers for Disease Control (CDC).
- [Pathways to Freedom: Winning the Fight against Tobacco](#). A guide specially designed to address African American individuals.
- [How to Quit](#). A listing of more reputable quit tobacco resources you can access from home.

Ask your health care providers for other reputable resources, or contact your health insurance company, local hospital, or local health clinic to see if they offer other self-help programs and materials.



Resource Guide

Programs, websites...designed to help you quit

There are many wonderful resources available to meet individual needs. Some are for adults, some for teens, some for those looking for a group program, and others for those wanting private or individualized help. We're highlighting a few of these resources and/or places to turn for more help.

Contacts

If you want to quit smoking and need help, contact one of the following organizations:

- American Cancer Society (ACS)
Phone: 1-800-ACS-2345
Website: www.cancer.org
- American Heart Association (AHA)
Phone: 1-800-AHA-USA-1 (1-800-242-8721)
Website: www.amhrt.org
- American Lung Association (ALA)
Phone: 1-800-586-4872 (1-800-LUNG-USA)
Website: www.lungusa.org
- Centers for Disease Control and Prevention (CDC), Office on Smoking & Health
Phone: 1-800-784-8669 (1-800-QUIT-NOW);
TTY 1-800-332-8615.
Website: www.cdc.gov/tobacco
- National Cancer Institute, Cancer Information Service
Phone: 1-800-4-CANCER or 800-422-6237
Website: www.cancer.gov
- U.S. Department of Health and Human Services, Smokefree.gov
Phone: 1-877-44U-QUIT (1-877-448-7848)
Online materials, including info on state quitlines:
www.smokefree.gov

Books & Audio Books

- *Fresh Start: 21 Days to Stop Smoking*. Created by the American Cancer Society, this book (also available in audiocassette) is based on the American Cancer Society's Fresh Start Smoking Cessation Program

(see below) and designed for face-to-face group classes. Contact your local library, bookstore, or online bookstore for availability.

- *7 Steps to a Smoke-Free Life* by Edwin B. Fisher. In association with the American Lung Association, this book (also available on audiocassette) is based on their Freedom from Smoking Program and leads you through the 7 steps/modules:
 1. Understanding your habit
 2. Building your motivation to quit
 3. Developing your quit plan
 4. Preparing for your quit day
 5. Quitting
 6. Fighting temptations (the first two weeks)
 7. Staying focused (the first six months).

Contact your local library, bookstore, or online bookstore for availability.

- *Quit & Stay Quit: A Personal Program to Stop Smoking* by Terry A. Rustin, M.D. Contact your local library, bookstore, or online bookstore for availability.



Face-to-Face Programs & Support

- *Fresh Start Smoking Cessation Program*. Created by the American Cancer Society, this is a four-week (meets once per week), face-to-face, group program. Available to adults and teens (with parental permission). Call your local ACS to see if this course is available in your area.
- *Freedom from Smoking*. Created by the American Lung Association, this is a six-week, face-to-face, group program. There is usually a fee to cover expenses of materials and facility only, if necessary. This fee is also considered an incentive to

participate, since people who invest their money in something tend to be more committed to it or feel more obligated to participate and make the most of their investment. Call your local ALA to see if this course is available in your area. This program can also be accessed online for free to anyone who wants to register and go through the course on their own (see below).

- *Nicotine Anonymous*. Like Alcoholics Anonymous, some communities offer a Nicotine Anonymous program following similar quit philosophies. There is no fee to attend. Ask your health care provider if they know of a Nicotine Anonymous program in your area, or use the contact line or website at 1-877-TRY-NICA (1-877-879-6422) or www.nicotine-anonymous.org.

Prenatal/Infant/Young Child Resources

- *Breathe Smart from the Start*. Created by the American Lung Association, the *Breathe Smart from the Start* program provides free environmental tobacco smoke information to mothers and expectant mothers. The program targets clinics and local organizations that work with teen mothers and families with children ages 6 and under. Materials are also available in Spanish. To find out if the Healthy Beginnings Program is offered in your area, contact: Ronneal Mathews at 214-631-5864 Ext. 213 (Dallas), or Stephanie Deal at 915-532-6776 (El Paso).
- *Great Start*. www.americanlegacy.org/2110.aspx - A program with a toll-free national quit line 1-866-667-8278 (1-866-66-START), providing free counseling to pregnant smokers.

Quitline Resources

- *Breaking away from the Pack*. These self-help materials are available to those who qualify (18 years or older) and want to participate in phone counseling through the American Cancer Society's quitline at 1-877-937-7848. The 3 *Breaking away from the Pack* booklets focus on:
 - setting a quit date,
 - getting through the initial withdrawal, and
 - staying quit how to's.

Tools for Teens

- *ASPIRE*. www.mdanderson.org/departments/aspire/ - This interactive website for teens was designed by the MD Anderson Cancer Center and University of Texas Health Science Center at

Houston to help teens quit smoking or make the wise decision to never start.

- *Not On Tobacco (N-O-T)*. N-O-T is the American Lung Association's school-based voluntary program designed to help high school students quit smoking. The program includes a 10-session curriculum and booster sessions conducted by facilitators. N-O-T facilitators are identified through a set of selection criteria, and training emphasizes nicotine addiction, curriculum content and implementation, as well as group process.

N-O-T is gender-sensitive, separating participants by gender, and tailors content and delivery to the adolescent population. N-O-T emphasizes daily life management skills such as stress management and healthy lifestyle behaviors such as nutrition and exercise. It also offers awards and incentives to the teens and facilitators, and includes evaluation and mental health referral protocols. For information on how to obtain this program, contact ALA at 1-800-LUNG-USA.

- *Worth It!* www.worthit.org - This website is targeted to Texas teens and is supported by the Texas Department of State Health Services. Resources for quitting smoking and smokeless tobacco are provided, as well as a class locator, answers to frequently asked questions, and a link to Quitnet (another option for support for those who want to quit tobacco).

Web-based Programs & Support

- *Clearing the Air: Quit Smoking Today*. www.smokefree.gov/pubs/clearing_the_air.pdf Available from the National Cancer Institute, this booklet offers steps to take you through the quitting process.
- *Committed Quitters*. www.committedquitters.com/ - This is web-based, individualized stop smoking program is provided by the makers of NicoDerm CQ, Nicorette, and Commit.
- *Freedom from Smoking Online*. www.ffsonline.org/ - Available from American Lung Association, this is a free program that is well-worth registering for. It is a comprehensive quit smoking program that takes you through seven modules and provides hands-on experiences to help you get through



the quit process. The *Freedom from Smoking* online program also offers social support and numerous self-help resources. It is based on a successful program history originally used in a group program setting.

- *I Quit: What to do when you're sick of smoking, chewing, or dipping.* Available by calling the Centers for Disease Control Information Center at 1-800-232-1311. This booklet is for smokers as well as those who use chewing tobacco and snuff.
- *Joe Chemo.* www.joechemo.org/ - This website was designed by individuals and private groups with the assistance of the Centers for Disease Control, American Council on Science and Health, Tobacco Education Clearinghouse of California, California Department of Health, and other health organizations and institutions. The site offers quit smoking tips as well as an excellent list of resource links at www.joechemo.org/links.htm. The site also has fun features like e-cards and tobacco IQ tests, etc.
- *Quitnet.* www.quitnet.com/ - This website is operated in association with Boston University School of Public Health. It offers free cessation support 24/7, plus resources, professional counseling, social support, anniversary reminders, e-mails, clubs, medication information, etc. For a fee, you can sign up for premium services that offer personalized, tailor-made services and support, as well as discounts on medications and rewards.

- *Smokefree.gov.* www.smokefree.gov/ - This online guide to smoking sponsored by the National Cancer Institute, Centers for Disease Control, National Institutes of Health, and U.S. Department of Health & Human Services offers how-to-quit materials as well as telephone support and instant messaging services for those trying to quit.

Worksite & Community Events and Materials

- *Great American Smokeout.* This event is the third Thursday in November of each year. For information about resources to encourage the Great American Smokeout in your community or worksite, see the American Cancer Society website at www.cancer.org/docroot/PED/content/PED_10_5_Great_American_Smokeout_History.asp?sitearea=PED.
- *Kick Butts Day.* Kick Butts Day is the Campaign for Tobacco Free Kid's annual celebration of youth leadership and activism sponsored by the American Lung Association. For more information or to order an activity guide, see www.kickbuttsday.org/.
- *World No Tobacco Day.* This is a worldwide event held May 31st of each year to draw attention to the impact of tobacco use on public health and to reduce individual tobacco dependence. For more information on World No Tobacco Day or to receive an activity kit, see www.who.int/tobacco/en/.

A Quick Reference to Quit Tobacco Medications

Varenicline (brand name Chantix). Intended to reduce the pleasure of nicotine use by blocking the rewarding effects of nicotine and reducing some of the withdrawal symptoms.

Bupropion (brand names Zyban or Wellbutrin, now also available generically). Designed to help reduce nicotine cravings; can also relieve symptoms of depression in some people.

Nicotine gum (available over-the-counter [OTC]). Recommended for people who want something to turn to when experiencing urges to use tobacco. It releases nicotine into the mouth to relieve cravings. Individuals can chew 20–30 pieces per day for 6–8 weeks.

Nicotine inhaler (available by prescription). Nicotine is released into the body when individuals “puff” small doses through this product, which looks similar to a cigarette. Unlike cigarettes, there is no harmful carbon monoxide. Treatment with an inhaler usually lasts 8–12 weeks.

Nicotine nasal spray (available by prescription). This product allows you to spray nicotine into the nose. Recommended use is up to 2 sprays an hour for as many as 3 months.

Nicotine patch (available by prescription or OTC). Patches are designed to provide a steady stream of nicotine throughout the skin over a designated time (usually 16–24 hours depending on the product). The patch is designed to give you enough nicotine to ease cravings but not enough to be addictive. Treatment using the patch is usually 6–8 weeks.

Nicotine lozenges (available OTC). The nicotine lozenges, like nicotine gums, release nicotine into the mouth. If you have your first tobacco of the day within 30 minutes of awaking, the 4 mg dose is recommended; otherwise, the 2 mg dose is recommended. Individuals can use 6–12 lozenges per day. Treatment usually lasts 8–12 weeks.



Note: All of these products can have side effects. Seeing your health care provider is important for determining appropriate dosages and duration or use for your individual needs.^{1,2}

Sources:

1. University of Wisconsin Medical School: Center for Tobacco Research and Intervention (2008). FDA-approved medications to help patients quit smoking. Retrieved September 24, 2008. From http://www.ctri.wisc.edu/Smokers/smokers_FDA_Approved.Medications.htm.
2. Michigan Surgeon General (2008). Nicotine replacement [on-line]. Retrieved September 23, 2008. From http://www.michigan.gov/surgeongeneral/0,1607,7-216-33084_33091_33416---,00.html

Tobacco Cessation Medications

The right choice for you?

The U.S. Food and Drug Administration (FDA) has currently approved seven medications to help you quit using tobacco products:

- Varenicline – available by prescription
- Bupropion SR – available by prescription
- Nicotine gum – available over-the-counter
- Nicotine inhaler – available by prescription
- Nicotine nasal spray – available by prescription
- Nicotine patch – available by prescription and over-the counter
- Nicotine lozenges - available over-the-counter.^{1,2}

Varenicline (brand name Chantix) is a non-nicotine medication intended to help smokers quit in two ways – by blocking some of the rewarding effects of nicotine (the addictive drug in tobacco products) and at the same time tackling the withdrawal most people feel after they quit. **Note:** The FDA and manufacturer on January 17, 2008, added a warning for healthcare providers to use caution prescribing Chantix for patients with pre-existing psychiatric conditions and to monitor all patients using Chantix for psychological symptoms.²

Bupropion (brand names Zyban and Wellbutrin) is a non-nicotine medication that helps reduce cravings and can relieve symptoms of depression for some people.^{1,3} **Note:** On May 2, 2007, the FDA proposed new warnings about suicidal thinking and behavior with the use of antidepressants.⁴ Be sure to discuss potential side effects and risks with your doctor before starting any medication. See the medication guides for [Chantix](#) and [Zyban](#) for more information.

The other medications listed above are known as **nicotine replacement therapy** (NRT) products because they deliver small, safe amounts of nicotine to the body to try to help you with nicotine cravings and through nicotine withdrawal symptoms (e.g., irritability, difficulty concentrating, feelings of depression, difficulty sleeping, increased appetite

cravings, headaches, etc.).⁵ The most effective time to start nicotine replacement therapy is at the beginning of an attempt to quit.² So, if you and your doctor find NRT is right for you, get

prepared by getting your medication and keeping it on hand for your quit date through the appropriate length of treatment (see below for more information).

Talk with your health care provider (doctor, dentist, or pharmacist). If you are pregnant or thinking of becoming pregnant, you should not use nicotine replacement medications. If you have heart disease or other circulatory disease, eating disorder, or are a heavy drinker, these medications may or may not be safe for you depending on your individual circumstances—talk with your doctor.

If medication is an appropriate choice...

- Your provider may recommend one or some combination of these medications as part of your quit tobacco plan. He/she will make recommendations based on your individual needs, which may differ according to how much and what type(s) of tobacco you use.
- It is crucial that you use these medications correctly. Read the instructions, and talk with your health care provider. Start out using enough medicine. Use the full dosage suggested in the instructions or by your doctor. Don't skip or forget to use your nicotine replacement medication(s) after you first quit tobacco.⁶



- Use the medication for an appropriate length of time. Often, it will be recommended that you continue to use the medication for a designated length of time (e.g., 8–12 weeks)⁷ even if you think you don't need it anymore. Be patient, and stick with it. If you slip and use tobacco, don't stop using your medication unless advised by your doctor to do so.



- Wait at least ½ hour after using the gum, lozenge, or inhaler before eating or drinking anything acidic. Acidic food items (e.g., tomatoes and tomato sauces, oranges, lemons, grapefruit, orange juice, grapefruit juice, coffee, soda, etc.) can keep these nicotine products from working.⁶
- Gradually taper off the medication. Don't stop completely until you are ready. You can set up a plan with your health care provider. Keep some of the medication with you after you stop using it. This backup package may help you be ready for an emergency situation.
- **DO NOT** use nicotine replacement products if you plan to continue to smoke or use other tobacco products. The combined dose of nicotine could be dangerous to your health. Having a slip where you smoke one or two cigarettes is not dangerous (don't quit using your medication if this happens), but continuing your old patterns of tobacco use with these medications could be dangerous.⁸

Remember, there is no single pill to cure smoking,³ but these medications may very well increase your chances for quitting tobacco.

Note: For ideas on how to save money on your medications, see the *HealthHints* issue, [Saving Money on Medication](#).

Sources:

1. United States Department of Health and Human Services (2000). You can quit smoking consumer guide. Retrieved March 9, 2005. From <http://www.cdc.gov/tobacco/quit/canquit.htm>.
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