STAGES OF CHANGE

Please read the following information to help you determine which stage in the quit smoking process you are in:

Precontemplation:

You’re not necessarily intending to quit smoking, though you may want to. Perhaps you’re demoralized or disappointed by previous attempts, or you feel you lack willpower. Or you may simply be unaware of the hazards of your current behavior or the benefits of changing it. You tend to avoid information or news stories on the subject. Some people stay in this stage for years, until an external event such as an illness, pressure from family, or new regulations at work move them to the next stage.

Contemplation:

At this stage you’re evaluating the pros and cons of quitting smoking, but you may be ambivalent, unconvinced that the benefits outweigh the costs. You are reading more, trying to acquire more information.

Preparation:

You may already be making small steps, such as meeting with a smoking cessation specialist, asking your doctor for more information, or maybe cutting back on the number of cigarettes you smoke each day.

Action:

Now you have had it! You are ready to throw away the last pack of cigarettes and all smoking paraphernalia. You are ready to set a Q.U.I.T. date, and commitment to all the necessary steps to achieve your goal of Q.U.I.T. smoking.

Maintenance:

You have not smoked for 48 hours. You are ready to continue to concentrate on your efforts to make your change of not smoking a successful one. This usually takes up to six months of conscious effort – longer than most people expect. This is why follow-up appointments are so important!

It is important that you identify and accept where you are in the process of quitting smoking. Once you understand how you feel about making a change it will be easier for you to move from one stage to the next.

At what stage of change would you place yourself? Circle your stage below:

Precontemplation --- Contemplation --- Preparation --- Action --- Maintenance

Adapted from Stages of Change – Pat Scared, Prochaska, Ph.D. & C. DiClemente, Ph.D.
Figure 3. Some processes of change considered salient at each of the stages in the cycle of change.

Stages of Behavioral Change

At this time, my readiness to quit is ___________________
10 TIPS TO HELP YOU QUIT

1. Set a firm quit date.

2. Smoke-proof your home, car, workplace, etc. the day before your quit date (including ashtrays, butts, lighters and packs of cigarettes.)

3. Plan ahead for difficult situations and have two ways to cope with temptations before they happen (some ideas: walks, gum, toothpicks, deep breaths, hard candy, “time-out.”)

4. Anticipate cravings – since cravings typically last 1 to 2 minutes – encourage yourself to wait them out.

5. Use nicotine patches, gum, inhaler, nasal spray and/or Zyban – these double your chances of success.

6. Participate in smoke-free activities such as going to the movies or eating at non-smoking restaurants.

7. Tell others of your desire to quit ahead of time; tell them you may not be yourself for a while and ask them for their support.

8. Avoid or change situations (places, people, routines) you strongly associate with smoking for the first two critical weeks.

9. Reward yourself! Set aside the money you would have spent on cigarettes and buy something you will enjoy.

10. Encourage yourself not to smoke no matter what happens, even very difficult times. Plan new ways to deal with emotional and stressful situations. Start thinking of and calling yourself a non-smoker.
STAYING

TOBACCO-FREE
# Withdrawal Symptoms Information Sheet

Quitting tobacco use brings about a variety of physical and psychological withdrawal symptoms. Most of these symptoms decrease sharply during the first few days after quitting, followed by a continued but slower decline in symptoms during the 2nd and 3rd weeks after quitting. For some people, coping with withdrawal symptoms is like riding a roller coaster—there may be sharp turns, slow climbs, and unexpected plunges. **Most symptoms pass within 2 to 4 weeks after quitting.** Report new symptoms to your health-care provider, especially if severe. Consider the impact of recent medication changes.

<table>
<thead>
<tr>
<th>SYMPTOM</th>
<th>CAUSE</th>
<th>DURATION</th>
<th>RELIEF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chest tightness</td>
<td>Tightness is likely due to tension created by the body's need for nicotine or may be caused by sore muscles from coughing.</td>
<td>A few days</td>
<td>• Use relaxation techniques&lt;br&gt;• Try deep breathing&lt;br&gt;• Use of NRT may help</td>
</tr>
<tr>
<td>Constipation, stomach pain, gas</td>
<td>Intestinal movement decreases for a brief period.</td>
<td>1–2 weeks</td>
<td>• Drink plenty of fluids&lt;br&gt;• Add fruits, vegetables, and whole-grain cereals to diet</td>
</tr>
<tr>
<td>Cough, dry throat, nasal drip</td>
<td>The body is getting rid of mucus, which has blocked airways and restricted breathing.</td>
<td>A few days</td>
<td>• Drink plenty of fluids&lt;br&gt;• Avoid additional stress during first few weeks</td>
</tr>
<tr>
<td>Craving for a cigarette</td>
<td>Nicotine is a strongly addictive drug, and withdrawal causes cravings.</td>
<td>Frequent for 2–3 days; can happen for months or years</td>
<td>• Wait out the urge, which lasts only a few minutes&lt;br&gt;• Distract yourself&lt;br&gt;• Exercise (take walks)&lt;br&gt;• Use of NRT may help</td>
</tr>
<tr>
<td>Depressed mood</td>
<td>It is normal to feel sad for a period of time after you first quit smoking. Many people have a strong urge to smoke when they feel depressed.</td>
<td>1–2 weeks</td>
<td>• Increase pleasurable activities&lt;br&gt;• Talk with your clinician about changes in your mood when quitting&lt;br&gt;• Get extra support from friends and family</td>
</tr>
<tr>
<td>Difficulty concentrating</td>
<td>The body needs time to adjust to not having constant stimulation from nicotine.</td>
<td>A few weeks</td>
<td>• Plan workload accordingly&lt;br&gt;• Avoid additional stress during first few weeks</td>
</tr>
<tr>
<td>Dizziness</td>
<td>The body is getting extra oxygen.</td>
<td>1–2 days</td>
<td>• Use extra caution&lt;br&gt;• Change positions slowly</td>
</tr>
<tr>
<td>Fatigue</td>
<td>Nicotine is a stimulant.</td>
<td>2–4 weeks</td>
<td>• Take naps&lt;br&gt;• Do not push yourself&lt;br&gt;• Use of NRT may help&lt;br&gt;• Drink water or low-calorie liquids&lt;br&gt;• Be prepared with low-calorie snacks</td>
</tr>
<tr>
<td>Hunger</td>
<td>Cravings for a cigarette can be confused with hunger pangs; sensation may result from oral cravings or the desire for something in the mouth.</td>
<td>Up to several weeks</td>
<td>• Limit caffeine intake, the effects of which will increase with quitting smoking&lt;br&gt;• Use relaxation techniques&lt;br&gt;• Take walks&lt;br&gt;• Try hot baths&lt;br&gt;• Use relaxation techniques</td>
</tr>
<tr>
<td>Insomnia</td>
<td>Nicotine affects brain wave function and influences sleep patterns; coughing and dreams about smoking are common.</td>
<td>1 week</td>
<td>• Limit caffeine intake, the effects of which will increase with quitting smoking&lt;br&gt;• Use relaxation techniques&lt;br&gt;• Take walks&lt;br&gt;• Try hot baths&lt;br&gt;• Use relaxation techniques</td>
</tr>
<tr>
<td>Irritability</td>
<td>The body's craving for nicotine can produce irritability.</td>
<td>2–4 weeks</td>
<td>• Limit caffeine intake, the effects of which will increase with quitting smoking&lt;br&gt;• Use relaxation techniques&lt;br&gt;• Take walks&lt;br&gt;• Try hot baths&lt;br&gt;• Use relaxation techniques</td>
</tr>
</tbody>
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Adapted from materials from the National Cancer Institute.

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IT'S WHAT YOU PUT IN YOUR MOUTH

Many people, particularly young women, develop a nicotine dependency in order to lose weight or control their weight. When people quit smoking, some gain between 5 to 10 pounds. Nicotine slightly increases the body's metabolic rate; however, the rate is only slight (31-69 calories in 8 hours). Smokers may also find increased oral cravings and eat more.

Suggestions:
- If you feel like eating try:
  - Raw vegetables
  - Fruits
  - Popcorn
- You can also chew on:
  - Straws
  - Gum
  - Lollipops
- Try exercising a few days per week:
  - Walking
  - Aerobics
  - Dancing
  - Jogging
  - Biking
  - Roller

If you have any questions or concerns, call me, Sue Ash, Health Service Nutritionist, at: 874-5954

Sincerely,

Sue Ash, M.S., R.D., L.D.N.
Medications to help QUIT!

Nicotine Replacement Therapy (NRT):

NRT: This method provides nicotine in a safe form so the body doesn't endure nicotine withdrawal while a person adapts to not smoking.

Nicotine withdrawal symptoms:

- Irritability
- Difficulty concentrating
- Feelings of depression
- Difficulty sleeping
- Increased appetite cravings
- Headache

These symptoms often start just a few hours after the last cigarette. The first 72 hours of quitting are the hardest, but symptoms may persist for weeks. Smokers have learned that a cigarette will relieve these symptoms in a few moments, but taking nicotine in another form can suppress withdrawal.

NRT products only provide nicotine. They contain none of the carcinogens or toxic gases found in cigarette smoke.

How do I use NRT?

- Follow the advice of a general practitioner, nurse or pharmacist.
- Decide which type of NRT best suits you.
- Set a start date. Stop smoking and start NRT right away.
- You should use NRT regularly at first, not “every now and then.”
- Use NRT for at least 8 to 12 weeks to have the best chance of stopping smoking.
- The dose of NRT is typically reduced during the later stages of treatment, and then stopped altogether.
- Some experts advise using combinations of NRT medicines for some people. For example, a person might use a patch for baseline comfort supplemented by the gum or the inhaler to suppress urges as they arise.
NRT may not be suitable if you're pregnant or have heart disease:

- **Pregnancy**: while the use of replacement products during pregnancy is not risk-free, it's much less dangerous to you and your baby than smoking. If you're pregnant or planning to become pregnant and want to stop smoking, talk to your healthcare professional before deciding on a course of action. Most professionals will recommend trying other ways to change your behavior before suggesting a nicotine replacement product.

- **Heart disease**: NRT has been shown to be safe in most people with heart disease. However, if you've recently had heart problems, such as an irregular or rapid heartbeat, or chest pain, consult your doctor before using nicotine replacement products.

What about smoking while using NRT?

It's not unusual for people who are trying to stop smoking with NRT to still give in to an occasional cigarette. Most successful quitters have two to three relapses before they quit smoking for life. (A relapse is a return to the behavior you are trying to eliminate.)

Combining the nicotine from the NRT with the nicotine from cigarettes is a concern. If someone is smoking only a few cigarettes while trying to quit, it makes sense to continue the NRT and resolve how to avoid each of the last few remaining cigarettes. But if the person is smoking as much (or nearly as much) on NRT as off of it, they should stop the NRT and prepare better before trying to quit smoking again.

What about withdrawal from NRT?

Most of the time people who use NRT to stop smoking gradually reduce or stop NRT medicine as prescribed without any difficulty. Some people keep using the gum, nasal spray or inhaler for a long time. Using NRT is always preferable to using tobacco products. If the choice is between an NRT product and a tobacco product, the person should keep using NRT. If a person feels that gradually stopping NRT is very hard, he or she should speak with a doctor.

In the United States, 6 delivery systems are available for NRT:

- **Nicotine transdermal patches** - Nicotrol Patch, Nicoderm CQ Patch, Habitrol Transdermal System (generic-store brand).
- **Nicotine chewing gum** - Nicorette Gum
- **Nicotine lozenge** - Nicotine Polacrilex
➤ Prescription nicotine inhalers - Nicotrol Inhaler
➤ Prescription nicotine nasal spray - Nicotrol Nasal Spray
➤ Prescription tablets- Zyban® (bupropion hydrochloride) sustained-release tablets

Choosing an NRT product

NRT comes in different forms to suit individual needs. Choosing the best one for you will depend on what aspect of stopping you are finding hardest to deal with. Some people miss handling cigarettes so an inhalator may be best. Others want to avoid cravings so a patch or gum could be the right option. Some smokers want to be able to choose when to dose themselves with nicotine - the lozenge and nasal spray offer that instant control. Talk through all the options with a health care professional to find a form you'll like using.

NON PRESCRIPTION PRODUCTS TO HELP YOU QUIT SMOKING

Non prescription NRT are used to:
• Reduce withdrawal symptoms, including nicotine craving that are associated with quitting smoking.

Ask Your Doctor Before Use if You:

• Are less than 18 years of age.
• Have heart disease, recent heart attack or irregular heartbeat. Nicotine can increase your heart rate.
• Have high blood pressure not controlled with medication. Nicotine can increase blood pressure.
• Take prescription medicine for depression or asthma. Your prescription dose may need to be adjusted.
• Are allergic to adhesive tape or have skin problems, because you are more likely to get rashes (applies to the patches).
• Have a stomach ulcer or diabetes (applies to the gum).
• Have kidney or liver problems (applies to lozenges).
• Have hyperthyroidism (applies to lozenges).
• Have a history of peptic and gastritis ulcers (applies to lozenges).
NICOTROL PATCH

Action
- The NICOTROL® Patch provides a constant low dose of nicotine delivered over approximately 16 hours that is absorbed through your skin while you are awake and need it. The patch will help you to stop smoking by reducing nicotine withdrawal symptoms such as nicotine cravings, nervousness and irritability.

Strengths
- 5mg, 10mg and 15mg

Cost
- 7 Patches- 5mg ~ $15.62
- 7 Patches- 10mg ~$17.57
- 7 Patches- 15mg ~$18.45

Dosing
- This patch is not recommended if you smoke less than 10 cigarettes per day.
- If you smoke greater than 10 cigarettes per day:
  - Apply the 15mg patch once a day for 6 weeks
  - Apply the 10 mg patch once a day for the next 2 weeks
  - Then apply the 5mg patch once a day for the next 2 weeks
How to Apply

- Take a fresh patch out of its packaging and remove the protective liner from the adhesive. Save the wrapper for later disposal of the used patch.
- Apply the patch (in the morning) to a dry, hairless area of skin on the front or side of your chest, upper arm, or hip. Do not apply to areas where you have cuts, calluses, scars, burns, or irritation.
- Press the patch firmly onto your skin for about 10 seconds, making sure that the edges are sticking well.
- Wash your hands. Any nicotine sticking to your hands could get into your eyes or nose, causing irritation.
- After 16 hours (around bedtime), remove the patch.
- Fold the used patch in half, place it back in its own wrapper, and throw it in a trash container that cannot be reached by children or pets.
- The next morning, apply a fresh patch to a different spot on your body. To reduce the chances of irritation, do not return to a previously used spot for at least a week.

Counseling Tips

- Do NOT smoke while using the patch.
- Water will not harm the nicotine patch. You may keep wearing your patch while bathing, showering, swimming or using a hot tub.
- If your patch does fall off, dispose of it carefully and apply a new patch.
- Do NOT trim or cut the patch.

Side Effects

- Redness or itching of the skin where the patch was applied *, headache, anxiety, upset stomach and dizziness.

* If itching occurs once the patch is removed you can apply a thin layer of hydrocortisone cream to relieve the itching.