How to Quit Smoking

If you have decided to quit smoking and you don't know what to do, where to go, or who to ask for help, this information provides a guide that can help you quit smoking for GOOD. There is no one right way to quit smoking, but there are some key elements that can help kick the habit successfully.

If you a student at the University of Rochester, you can schedule an appointment to speak with your primary care provider (PCP) about quitting smoking. When you call to schedule an appointment, you will be offered an appointment with your PCP. Your PCP can help you assess your readiness to make this change and can then provide you with the support to help you move through the steps to quit. To schedule an appointment, call UHS at 275-2662.

STEP ONE: Making the Decision to Quit

What brings a person towards the decision to quit smoking? Researchers have been looking into it for years. One theory that has been used is the "Stages of Change Model." The model is based on research that shows that behavior changes related to smoking occur over a continuum. In other words, not all people are at the same point in the "getting ready to quit" scenario.

Here's an overview of the stages:

Pre-contemplation: This is the smoker who is not even thinking about quitting right now.

Contemplation: This is the smoker who is actively thinking about quitting but is not quite ready to make a serious attempt yet. This person may say, "Yes, I'm ready to quit, but the stress of finals is too much, or I don't want to gain weight, or I'm not sure if I can do it."

Preparation: Smokers in the preparation stage seriously intend to quit in the next month and often have tried to quit in the past 12 months. They usually have developed a plan.

Action: In this stage, the smoker has taken action to quit and is in the first 6 months of being smoke-free.

Maintenance: This is the period of 6 months to five years after quitting when the new non-smoker is actively engaged in taking steps to avoid smoking again.

Where do you fit in this model? If you are thinking about quitting, setting a date and deciding on a plan will move you into the preparation stage, the best place to start. If you have not already done so, you might want to complete the self-assessment tools on the UHS web site. Bringing your self-assessments with you when you see your PCP can be helpful in your conversations about quitting smoking.

STEP TWO: Setting the Date and Deciding on a Plan

Once a person has decided to quit smoking, it is time to pick the all-important "Quit Date." Make sure that it is pretty soon, preferably within the next month. Choosing a date too far in the future will make it easier to rationalize a way out of it; however, you need enough time to become prepared. Once prepared, it is then time to come up with a solid plan.

Here are some steps to help you prepare for your "Quit Date":

Pick the date. Mark it clearly on the calendar.

Tell friends & family your Quit Date. Ask for their support.

Get rid of cigarettes, lighters, & ashtrays. Stock up on hard candy, sugarless gum, cinnamon sticks, and carrot sticks.

Decide on a plan. What options does the University Health Service offer to help you? Are there community resources or online support services that best match your personal needs? If you need to sign up for any of these, do so NOW.

Consider nicotine replacement therapy (i.e. the patch, gum) or other medications. Medications have been proven to increase the success of quitting. Investigate your options and think about what will work best for you. If you are interested in using a medication, talk with your primary care provider. You may need to start using it before your "Quit Date." For more information about Nicotine Replacement Therapy, see Step 5.

Call a quit line or check out a web site designed to help you stay smoke-free, or contact your primary care provider for support and encouragement. Check “Additional Resources” on this web site for a list of web sites.

Practice saying, "No, thank you. I don't smoke."

Enlist the help of your support system. Tell others of your plan and ask for their support. Ask a friend to quit smoking with you. Consider joining Nicotine Anonymous or talking with a friend who has successfully quit.

Identify your triggers, those things that tempt you to light up a cigarette. Think about the times or rituals during the day when you normally smoke, such as with a cup of coffee in the morning, between classes, while studying, or at a bar. Figure out what you will do instead of smoking. You might skip the coffee, go for a walk, eat carrot sticks, suck on lollipops, or avoid large social gatherings. These temptations will lessen the longer you are smoke-free.

Speak with your primary care provider if you are concerned about weight gain, depression, or other common side effects of nicotine withdrawal. Exercise can decrease your chances of gaining weight while you quit smoking. Starting a workout routine before your "Quit Date" may help you continue it throughout the quitting process.

STEP THREE: What to Do When the Quit Date Comes

The all-important "Quit Date" has arrived, and even though you may be completely prepared, you are still stressed and need a guide of what you should do.

Here are some suggestions to help make your "Quit Date" more painless and much easier:

- Do not smoke. Stop smoking the night before.
- Keep active. Try walking, exercising, or doing other activities or hobbies.
- Drink lots of water and fruit juices.
- Start nicotine replacement therapy if you chose to do so.
- Continue following a self-help plan, using computer resources, talking with your primary care provider, etc.
- Call your support system or a quit line when you are tempted to light up.
- Avoid high-risk situations where the urge to smoke is strong.
- Reduce or avoid alcohol and/or caffeine. Alcohol and caffeine may be linked to smoking for you. It is important to break this connection.
How to Quit Smoking

USE THE 4 "A'S"

1. Avoid. Certain people and place can tempt you to smoke. Stay away for now. Later on, you'll be able to cope.
2. Alter. Switch to soft drinks or water instead of alcohol or coffee. Take a different route to school or work. Take a walk when you used to take a smoke break.
3. Alternatives. Use oral substitutes like sugarless gum, hard candy, or sunflower seeds.
4. Activities. Exercise or do hobbies that keep your hands busy (video games, needlework, woodworking, etc.) can help distract the urge to smoke.

USE THE 5 "D'S"

1. DELAY a minute or two and the urge will pass.
2. DRINK water to fight off cravings.
3. DO something else to DISTRACT yourself. Walk, call a friend, clean a closet, etc.
4. DEEP BREATHE. It will relax you. Close your eyes and take ten slow deep breaths.
5. DISCUSS your thoughts and feelings with someone close to you.

STEP FOUR: Getting Support

Now that the quit process has begun, times are going to be tough and temptation will be running high. Support is readily available for people trying to quit smoking, and there are many resources that can be used to help make quitting more feasible and less stressful.

Family and Friends: Many former smokers say that they key of their support network was their family and friends. Find people you can confide in, those who want you to quit and will be there for you when the times are tough. If some of these people are smokers, ask them not to smoke around you.

Your Primary Care Provider (PCP): Talk to your PCP about your plan to quit smoking. Make an appointment and bring a list of questions. Your PCP will want to help you quit smoking. Full-time students at the University of Rochester can schedule an appointment with their PCP by calling 275-2662.

Some questions you could ask may include:
1. How can you help me be successful at quitting?
2. What medication do you think would be best for me and how should I take it?
3. What should I do if I need more help?
4. What is smoking withdrawal like? How can I get information on withdrawal?

Be prepared to be asked questions. Be completely honest. It may help fill out the Tobacco Use History - Self-Assessment, which is on the UHS web site, and bring it with you to your appointment to discuss your questions with your PCP. Your provider can help assess your stage of readiness.

Quit Lines: Quit Lines are telephone-based supports to help stop smoking. The trained smoking counselors can help plan a quit method that fits your specific wants and needs. It has been shown that people who use telephone counseling stop smoking at twice the rate of quitters who do not use this form of help. With guidance from a counselor, quitters can avoid common mistakes and slip-ups that may hinder the quit process.

STEP FIVE: Consider Nicotine Replacement Therapy.

For many smokers, an effective quit method will include a combination of support from others, a change in daily habits, and the use of nicotine substitutes. When smokers try to cut back or quit, the absence of nicotine in their body leads to withdrawal symptoms. Nicotine substitutes treat the withdrawal symptoms that almost 90% of all smokers say is the reason that they cannot quit smoking. These substitutes reduce the symptoms of nicotine withdrawal during the quit process.

Nicotine replacement offers several advantages. Nicotine replacement is a cleaner form of nicotine. It avoids the thousands of poisons and tar that are found in cigarette smoke. Nicotine replacement delivers a smaller dose of nicotine into the body. Nicotine replacement therapy has been proven to double your chances of quitting smoking for good!

Talk with your PCP which nicotine replacement therapy may best suit your needs. Factors to consider include how much you smoke, whether you need oral or hand stimulation, cost, and the overall speed and effectiveness of each method. It would be worthwhile to check if your insurance company covers the cost.

The most common forms of nicotine replacement therapy are listed below. For more information, check “Stop Smoking Medications” on the UHS web site.

Nicotine Patch (transdermal nicotine systems) provide a measured dose of nicotine through a patch placed on the skin. As the dosage of nicotine is lowered over the course of a few weeks, your body becomes less dependent upon nicotine.

Nicotine Gum (nicotine polacrilex) is fast-acting. Nicotine is absorbed through the mucous membranes of the mouth.

Nicotine Lozenge: This over-the-counter nicotine-containing lozenge that benefits a smoker trying to quit by providing constant oral stimulation in an easy-to-control dose.

Nicotine Nasal Sprays deliver nicotine immediately to the bloodstream as it is absorbed through the nose. Nicotine sprays require a doctor's prescription.

Nicotine Inhaler is a plastic tube with a nicotine cartridge inside. When you puff on the inhaler, a nicotine vapor is released primarily to the mouth rather than the lungs. The inhaler is available by prescription only.

Oral Medicine: Bupropion, or more commonly marketed as Zyban®, is a prescription antidepressant in an extended-release form that reduces the symptoms of nicotine withdrawal. This medicine affects chemicals in the brain that are related to nicotine craving. Zyban® requires a prescription.

Web Sites: There are web sites designed to help people who are trying to quit. Check “Additional Resources” for a list of web sites.

From HEALTH TOPICS on the UHS Web site
www.rochester.edu/uhs