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You can quit smoking with a little help. If you’re anxious about quitting, this website will take you through the stages of quitting smoking step-by-step. You will learn how to get ready, how to quit, and how to make sure that you don’t relapse. You will also learn tips that make quitting easier.

You are probably at the stage where part of you wants to quit smoking, but part of you doesn’t. Maybe you’re worried about withdrawal, or afraid that you’ll fail. Put those thoughts aside for now. Focus on why you want to quit, and that will give you the motivation to succeed.

The good news about smoking is that it doesn’t matter how much you’ve smoked, or how long you have smoked. If you quit now, your body will begin to repair itself and will take care of you even after years of neglect.

Nicotine Addiction

An average smoker gets about 200 hits of nicotine a day, and over 70,000 hits per year. Ten puffs per cigarette, times 20 cigarettes a day gives you about 200 hits of nicotine a day. That’s partly why smoking is so addictive. Your brain constantly waits for the next nicotine hit. Some studies have suggested that nicotine is as addictive as crack cocaine.

Nicotine Withdrawal Symptoms

- Irritability, Anxiety
- Difficulty concentrating
- Headaches
- Food cravings
- Cravings for cigarettes

What causes nicotine withdrawal? Smoking increases the number of nicotine receptors in your brain. When you stop smoking, those receptors continue to expect nicotine, and when they don’t get it, they begin to adjust. That adjustment process, is what causes cravings and withdrawal.

How Long Do Nicotine Withdrawal Symptoms Last?
Nicotine is out of your body 72 hours after you quit smoking. Nicotine withdrawal symptoms usually reach their peak 2 to 3 days after you quit, and are gone within 1 to 3 months. (1) **It takes at least 3 months for your brain chemistry to return to normal after you quit smoking.** (2) The last two symptoms to go usually are irritability and low energy.

Any effective smoking cessation program has to take into account this long adjustment period. It is why some doctors recommend weaning off nicotine slowly with nicotine replacement therapy.

**In summary, most people start to feel better after 1 week, and the symptoms are usually gone within 3 months.**

### How to Quit Smoking Plan (Step-By-Step)

A step by step plan to help you quit smoking. You will find guidelines, best practices, facts and tips to help you successfully reach your goal. The basic steps of quitting are the following:

1. **Make the Decision to Quit**
2. **Understand Your High-Risk Times**
3. **Stock Up on Supplies**
4. **Pick a Quit Date**
5. **Let People Know**
6. **Remove Smoking Reminders**
7. **Your Quit Date and the First 2 Weeks**
8. **Maintenance and Coping Strategies**

### Step 1: Make the Decision to Quit

Identify your reasons for quitting smoking. Quitting is challenging. You can rise to the challenge, but it helps if you have your goals in mind. Review your mental list as you approach your quit date.

**If you have tried to quit smoking before and failed, don’t let that be an obstacle.** The more times you try to quit, the greater your chance of success. Maybe you weren’t ready last time. Maybe you didn’t take the rights steps.
Step 2: Understand Your High-Risk Times

Smoking is more than just a physical addiction to nicotine. It is also a psychological addiction. Why do you smoke? Is it a break from your hectic day? Is it a moment of peace when you can be alone with your thoughts? Most people smoke for the same reasons’ alcoholics drink. It’s a chance to escape, relax, or reward yourself.

Anticipate your high-risk situations and plan for them. This will help you deal with them better. Here are some common triggers for smoking cravings:

- Drinking coffee
- Finishing a meal
- Driving your car
- Using the phone
- Stressful situations
- Drinking alcohol
- Social events

These are some strategies for dealing with your triggers:

- If you smoke with your morning coffee, plan to have your first coffee at work where you probably can’t smoke.
- If you smoke while driving, plan to take a different route. It will keep your mind occupied, so that you won’t be on autopilot.
- If you smoke after meals, plan to get up after a meal. Go for a walk, brush your teeth, do something.
- If you smoke when you’re on the phone, put one of those stress balls next to your phone to keep your hands occupied.
- Plan to keep yourself busy in the beginning. Too much unstructured time is not a good thing when it comes to smoking cessation.

What should you do if you slip? A slip is also a high-risk time. You don’t need to slip. Many people have quit without a slip. But if you do, it’s good to have a plan.

The most important thing you can do is avoid all or nothing thinking. Don’t give up and let a slip turn into a major relapse.
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- Throw out the rest of the pack.
- You’re not a failure if you slip.
- The more times you try to quit, the greater your chance of success.
- Learn from your experience. What you could have done differently.
- Never forget your reasons for quitting in the first place.

**Step 3: Stock Up on Supplies**

Every smoker understands that smoking is also an oral addiction. When you quit smoking your brain will still crave the oral sensation of a cigarette. As part of your smoking cessation plan, stock up on oral substitutes like gum, raw vegetables, carrot sticks, hard candy, coffee stirrers, straws, etc.

If you’re planning to use nicotine replacement or smoking cessation drugs talk to your doctor at this point. Learn how to use them. Find out about potential side effects and what to look out for.

**Step 4: Pick a Quit Date**

A quit date is a personal commitment. It is important because it prepares your mind subconsciously. Pick a date within the next month. It doesn’t have to be a special day.

Avoid a day when you know you’ll be busy, tense, or have a special event that could be a trigger. Write down your quit date somewhere, and look at it every day. Let your determination build as you get closer.

If you are going to use smoking cessation medication like Zyban (Wellbutrin, bupropion) or Chantix (Champix, varenicline), your doctor may have suggested that you start using them now. Ask your doctor how far ahead of your quit date you should start taking your pills.

**Step 5: Let People Know**

Quitting is easier with support. Choose people who you think will be helpful. Tell them your plan and how they can help. Also tell them how they cannot help.

- Friends can help distract you.
- They can listen to you.
How Your Body Heals Itself After You Quit Smoking

- **20 MINUTES**: Your heart rate and blood pressure drop.
- **12 HOURS**: Carbon monoxide level in your blood drops back to normal. Sense of smell and taste begin to return to normal.
- **48 HOURS**: Damaged nerve endings begin to regenerate.
- **2 WEEKS TO 3 MONTHS**: Risk of heart attack begins to decrease. Circulation improves. Lung function increases.
- **1 TO 9 MONTHS**: Excess risk of coronary heart disease is half that of a continuing smoker.
- **1 YEAR**: Risk of cancer of the mouth, throat, esophagus and bladder are cut in half. Cervical cancer and stroke risk fall to that of a nonsmoker. Risk of coronary heart disease approaches that of a nonsmoker.
- **5 YEARS**: The risk of dying from lung cancer is about half that of a person who is still smoking.
- **10 YEARS**: The risk of cancer of the larynx (voice box) and pancreas decreases.

Ready to quit? Join a smoking cessation program today. Call the QuitLine at 800-784-8669 or visit its website at tnquitline.org.
Sharing your struggles makes them lighter.
✓ But explain that you want to keep your conversations light. Nothing serious that will add to your tension.

**Step 6: Remove All Smoking Reminders**

Smoking like any addiction is triggered by people, places, and things. For other addictions, the objects that are triggers are usually drug paraphernalia. In this case the paraphernalia include cigarettes, matches, lighters, and ashtrays. Get rid of all of them. Don't save anything “just in case.”

Freshen your environment at home, work, and in your car. The smell of cigarettes is definitely a trigger, especially in the beginning.

**Step 7: The First 2 Weeks**

The first two weeks are critical for your success. If you can get through the first two weeks your chance of success is much higher. Therefore, it is important to give yourself the best chance you can during these critical weeks.

The first two weeks are all about distractions, keeping busy, and being good to yourself. Keep busy with fun, low stress activities and avoid high stress ones.

**Stay Busy**
- Plan lots of dates with friends. Get out of the house. Go for walks, bike rides, or go to the gym. Go to a movie. Be good to yourself.
- Keep your hands busy. Some people like to use a pen, a straw or a coffee stirrer.
- Drink lots of water.
- Call the people who have offered to help. Everyone understands how difficult this is. People will be happy that you’re doing it. Don’t try to do it alone.
- If you just sit there with your cravings, you are giving them room to grow.
- Relax and breathe deeply.

**Avoid High Risk Situations**
- Don’t hang out with smokers. That’s like a crack addict hanging out with crack addicts. No matter how friendly and supportive your smoking friends are, they are still a high risk environment for at least the first several months.
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- Practice saying, “No thank you, I don’t smoke anymore.”
- Understand that you will encounter high risk situations that you haven’t thought of. If you find yourself triggered, plan to get up and leave quickly.
- A change of scenery can make all the difference.

**Talk to Yourself**
- Most cravings only last 10 - 20 minutes. Distract yourself, and the cravings will pass.
- When you think about using, talk to yourself and keep yourself busy.
- “I refuse to believe that smoking is more powerful than me.”
- “I won’t give smoking any more power over my life.”
- “I chose to be a non-smoker.”
- “One day at a time.”

**Step 8: Maintenance and Coping Strategies**

Quit smoking one day at a time. Don’t think about quitting forever. That can be overwhelming. Deal with right now, and the days will start to add up.

**Self-care**
Be good to yourself. This is probably the most important and undervalued coping strategy in quitting smoking. It is one of the most difficult things for anyone to do, especially someone with an addiction.

Your tendency will be to not reward yourself while you’re quitting. You’ll think that you don’t deserve it yet. You will think that you only deserve a reward once you have had a long stretch of not smoking. But that’s old thinking. This is your opportunity to learn better coping strategies.

How you can be good to yourself is different for everyone. Pursue new ways of rewarding yourself the same way you pursued your addiction. You are learning new thinking patterns that will be helpful in the rest of your life.

Don’t try to diet while quitting smoking. Too much deprivation is bound to backfire. Instead, try eating more fruits and vegetables.

**Celebrate Your Victories**
Quit for you Quit for two
Don’t focus on your struggles and ignore your successes. You probably tend to disqualify the positives and focus on the negatives. But don’t underestimate how far you have come. Reinforce your victories.

- Take the money you’ve saved and buy yourself a treat once a week. Or save the money for something bigger like a trip.
- Plan ahead for your milestones and make sure you recognize them with some celebration, big or small.
- Rewards don’t have to be financial. You could plan to get together with your friends and do something.

Stress Management

- Get plenty of rest and eat healthy. Lack of sleep and excessive sugar are known triggers.
- Use substitutes for oral cravings like gum, raw vegetables, carrot sticks, hard candy, coffee stirrers, straws.
- Stress is a big trigger for smoking.
- Relax by taking a few slow, deep breaths. Inhale through your nose and exhale through your mouth. Repeat it 5 times and see how you feel.

Maintenance

- When you have cravings, think of how strong you have been so far.
- Remember your reasons for quitting.
- Refuse to let your addiction win.
- Think of the benefits to your health, finances, and family.
- Remind yourself that there is no such thing as just one cigarette.
- Start to see yourself as a non-smoker. That is the ultimate payoff. You are freeing yourself from the control of your addiction.

Nicotine Replacement Therapy (NRT)

Nicotine replacement therapy (NRT) helps reduce nicotine withdrawal symptoms that many smokers say is their main reason for not quitting. Nicotine replacement therapy increases the rate of quitting by 50 to 70 percent (4).

Nicotine replacement therapy is not a substitute for coping strategies. It deals with the physical addiction to nicotine, but does not deal with the behavioral or psychological
addiction to smoking. So, some sort of smoking cessation program and strategy is still important.

**IMPORTANT:** What follows is general medical information, and is not tailored to the needs of a specific individual. Some people may not be able to use nicotine replacement therapy because of allergies or other conditions. You should always consult your physician when making decisions about your health.

*Which Nicotine Replacement Therapy?*

There are three broad categories of nicotine replacement therapy: nicotine that is absorbed through the skin, mouth, and airways. Here are some important points to help you decide:

**Nicotine Patch**

The nicotine patch is convenient because it provides long term relief from nicotine withdrawal, and you only have to think about it once a day.

The nicotine patch is the most studied type of nicotine replacement therapy, and significantly increases your chances of success by 50 to 70 percent.

**Nicotine Lozenges and Nicotine Gum**

Nicotine lozenges and nicotine gum provide short term relief from nicotine withdrawal symptoms. They also help deal with oral cravings that a nicotine patch cannot.

*The most effective smoking cessation combination is a nicotine patch for long term relief, and nicotine lozenges for breakthrough cravings. (5)*

The nicotine in lozenges and gum is absorbed through the inner surface of your mouth rather than through your stomach. Food and drinks can affect how the nicotine is absorbed. Therefore, you shouldn’t eat or drink for at least 15 minutes before using nicotine gum or lozenges, and you shouldn’t eat or drink while you are using them.

Most people find nicotine lozenges easier to use than nicotine gum. Nicotine gum can stick to dental work.

*How do you use nicotine lozenges?* Suck on a lozenge until it is fully dissolved, about 20 to 30 minutes. Do not bite or chew it like hard candy, and do not swallow it.
How do you use nicotine gum? Chew the gum slowly until you get a peppery taste or tingle in your mouth. Then hold it inside your cheek (park it) until the taste fades. Then chew it again to get the tingle back, and park it again.

Nicotine Inhalers and Nicotine Nasal Spray

Nicotine inhalers and nasal sprays are the fastest acting of all nicotine replacement methods. But because they work so quickly, they have a higher risk of becoming addictive.

Nicotine inhalers mimic the use of cigarettes, which can make them even more addictive.

Both nicotine inhalers and nasal sprays require a doctor’s prescription.

How Long Should You Use Nicotine Replacement Therapy?

The US Food and Drug Administration suggests the following. “Users of Nicotine Replacement Therapy (NRT) products should still use the product for the length of time indicated in the label - for example, 8, 10 or 12 weeks. However, if they feel they need to continue using the product for longer in order to quit, it is safe to do so in most cases.” (6)

The American Cancer Society notes that “The FDA has approved using the patch for a total of 3 to 5 months.” (7)

In other words, follow the instructions, but it is reasonable to use the patch for up to 5 months, if you have the approval of your health care professional.

In my experience, most people relapse when they taper down too quickly from the full strength 21 mg patch to the 14 mg patch.

Can You Get Too Much Nicotine (Nicotine Overdose and Nicotine Poisoning)?

Yes, if you use nicotine replacement therapy incorrectly. Speak to your health professional about the correct way to use it.

Here are some symptoms of nicotine overdose or nicotine poisoning:

- Agitation, restlessness, tremors
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- Headache
- Fast or irregular heartbeat
- Nausea, vomiting, abdominal pain, diarrhea
- Cold sweats, pale skin

If you experience any of these symptoms call your doctor. More serious symptoms of nicotine overdose or nicotine poisoning include:

- Disturbed vision or hearing
- Dizziness or faintness
- Rapid breathing
- Confusion
- Seizures

Call Poison Control and get emergency help if you suspect nicotine overdose or nicotine poisoning.

**How Safe is Nicotine Replacement Therapy?**

Nicotine replacement therapy is considered safe for smokers with a history of cardiovascular disease. It does not increase the risk of heart attacks and strokes in smokers with a history of cardiovascular disease. (4)

There is not enough evidence to be absolutely sure that nicotine replacement therapy is safe for pregnant women. (8) However, many physicians feel that nicotine replacement therapy is much safer than smoking.

**Smoking Cessation Medications**

There are prescription drugs that can help you quit. Some can be used along with nicotine replacement therapy. Most have to be started before your planned quit day, and all need a prescription.

**IMPORTANT**: This is general medical information, and is not tailored to the needs of a specific individual. You should always consult your physician when making decisions about your health.
**Zyban (Wellbutrin, bupropion)**

Zyban (Wellbutrin, bupropion) is a prescription antidepressant that was later discovered to reduce nicotine cravings and help people quit smoking. It does not contain nicotine. It acts on chemicals in the brain that cause nicotine cravings. Large scale studies have shown that Zyban is at least as effective as nicotine replacement therapy in smoking cessation. (9)

Zyban works best if you start it 1 to 2 weeks before you quit smoking. The usual dosage is 150 mg tablets once or twice per day. Your doctor may want to continue it for 8 to 12 weeks after you quit smoking to help reduce the chance of relapse.

**The most common side effects include:** dry mouth, trouble sleeping, agitation, irritability, indigestion, and headaches.

Antidepressants may increase the risk of suicide in persons younger than 25. When prescribed for smoking cessation, there have been four suicides per one million prescriptions and one case of suicidal ideation per ten thousand prescriptions. (10)

Zyban (Wellbutrin, bupropion) should not be taken if you have or have ever had the following:

- Seizures (Bupropion can cause or worsen seizures)
- Heavy alcohol use, or cirrhosis
- Serious head injury
- Bipolar (manic-depressive) illness
- Anorexia or bulimia
- If you’re taking sedatives or have recently taken an MAOI, (an older type of antidepressant).

**Combining Zyban (Wellbutrin, bupropion) and Nicotine Replacement Therapy**

Combining Zyban and nicotine replacement therapy, is usually more effective than either treatment alone. (11) Both medications work in different ways. Zyban reduces cravings by working on brain chemistry, and nicotine replacement therapy works by gradually weaning your body off nicotine.

Zyban combined with nicotine replacement therapy can slightly increase your blood pressure. Therefore, monitoring of blood pressure is recommended in these cases. (12)
Chantix (Champix, varenicline)

Varenicline is a prescription medication that can reduce cravings and increase your chances of success.

How Does Chantix (Champix) Work?

Chantix is a partial nicotine agonist. It partially stimulates the nicotine receptors in the brain so you get a mild effect as if you were smoking, but at the same time it blocks the receptors from giving the full effect of smoking. This lessens the pleasure you get from smoking, and reduces nicotine withdrawal. Chantix (Champix, varenicline) should be started a week before your quit day.

Side Effects of Chantix (Champix)

Chantix (Champix, varenicline) significantly increases the risk of depressed mood, thoughts of suicide, and attempted suicide. One study looked at all serious side effects between 1998 and 2010 in the FDA's Adverse Event Reporting System (AERS). It concluded “Varenicline shows a substantial, statistically significant increased risk of reported depression and suicidal/self-injurious behavior. The findings for varenicline, render it unsuitable for first-line use in smoking cessation.” (13)

Electronic Cigarettes

One of the main concerns with electronic cigarettes is that they mimic the use of regular cigarettes. If part of your reason for quitting smoking is that you don’t want to be controlled by your nicotine addiction, then electronic cigarettes would not be a good choice.

Studies have also shown that the vapor from electronic cigarettes has potentially harmful toxins. (14)

Reasons to Quit Smoking: Some Things You Probably Don’t Know About Smoking

Here are just a few smoking facts. Not a long list, but some key facts about the dangers of smoking.

Smoking causes more deaths each year than all of the following causes combined: (15)

- Alcohol abuse
- Illegal drug use
- Murders
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Motor vehicle accidents
AIDS and HIV

If you are recovering from drug or alcohol abuse, it doesn’t make sense to have worked hard for your recovery, and then drop dead from smoking.

Both the founders of Alcoholics Anonymous, Dr. Bob and Bill W. dropped dead from smoking. Smoking statistics tend to feel impersonal. But if you’re in recovery, that makes it up close and personal.

Smoking kills 6 million people each year worldwide. (16) In the United States, smoking kills more than 480,000 people each year. (17) That is the equivalent of two jumbo jets crashing every day with no survivors. (The number of passengers in two jumbo jets crashing every day for one year: 500 * 2 * 365 = 365,000.)

More smokers die of heart disease and stroke rather than lung cancer. This is why people often underestimate how deadly smoking is. Perhaps your grandfather smoked his whole life and never died of lung cancer. Most smokers die of heart disease or stroke.

Smoking causes type 2 diabetes. Smokers are 30 – 40 percent more likely to develop diabetes. (17)

Those are just a few of the diseases caused by smoking. There is not an organ or system in your body that is not affected by the dangers of smoking. The full list of smoking diseases is too long and depressing.

Here are some reasons why people quit smoking:

✓ Are you worried about your health?
✓ Do you resent being controlled by your addiction?
✓ Do you know someone who has had health problems because of smoking?
✓ Are you trying to be a positive role model for your family?
✓ Do you want to save money?
✓ Smoking costs $2,500 to $5,000 a year. That’s the price of a good vacation.

Second Hand Smoke Facts
Second hand smoke causes the same kinds of deaths as smoking. (18) There is no safe level of second-hand smoke. Here are just two of the consequences of living with a smoker or working in a smoking environment.

Nonsmokers exposed to second hand smoke at home or at work are at higher risk of the following:(17)

- 25 – 30 percent more likely to develop heart disease and stroke
- 20 – 30 percent more likely to develop lung cancer

**Children and Second-Hand Smoke**

Second hand smoke has been proven to damage children’s health and increase the risk of the following:(19)

- Asthma, pneumonia, and bronchitis
- Ear infections and the need for ear tubes
- Sudden Infant Death Syndrome (SIDS)

**Isn’t time you said - enough?**