

## Getting ready to quit.

### A QUIT PLAN

#### Set a quit date

Set a date to quit and stop completely on that day. Choose a day when you have no events that may make it difficult to avoid smoking, such as a party. It's also a good idea not to try and quit just before a stressful event, such as a job interview or exam.

#### See your doctor

See your doctor before quitting if you are taking medication. Chemicals in cigarettes change the way some medications work.<sup>1,2</sup> We know that stopping smoking can be stressful. So if you have suffered from depression, anxiety or other mental illness, ask your doctor's advice before quitting.

#### Use Nicotine Replacement Therapies (NRT)

Using NRT (patches, gum, lozenge, sublingual tablet or inhaler) is a smart move. Research shows that using NRT can double your chances of successfully quitting.<sup>3</sup>

See the fact sheet 'Nicotine Dependence and Withdrawal', it has a question test that will help you assess your level of addiction to the nicotine in tobacco and select the most appropriate NRT.

#### Plan your strategies

If you have quit before, think about the strategies that worked well for you. What were the high-risk situations where you smoked and how can you plan to avoid them? It's ok to excuse yourself to go to the bathroom or to get a drink of water. A firm but friendly "No thanks, I'm quitting smoking" is also ok.

#### A support network

Tell your friends, family and work mates that you are going to quit. Their encouragement will be helpful, especially during the first two weeks of quitting.

### Facts

Preparation is the key to successfully quitting smoking, so developing a quit plan is essential. Here are some key things to consider in developing your own quit plan.

#### Call the Quitline 13 QUIT (13 7848)

The Quitline 13 QUIT (13 7848) is a confidential telephone based service primarily designed to help smokers quit smoking. The Quitline can also provide assistance to the family and friends of smokers and others requesting information about smoking. If you are not fluent in English an interpreter service is available.

By calling the Quitline (for the cost of a local call) you can:

- Be sent a free Quit Pack
- Get help to plan your quit attempt
- Take advantage of talking to specially trained Quitline advisers
- Take part in the free call-back and follow-up service

#### Know your triggers

What are the behaviours, eg consuming alcohol, coffee or food, or feelings such as anxiety or boredom that trigger you to crave for a cigarette? Knowing some of your triggers helps you to plan ahead and manage these situations. Keep a diary to find out your triggers are.



### The nicotine and caffeine link

As your body is removing nicotine you absorb more caffeine. This means it is helpful to reduce your intake of tea, coffee and cola drinks by half.<sup>4</sup> Read the labels on chocolate bars and energy drinks as some of these also contain caffeine. An increase in caffeine levels may add to your feelings of restlessness or insomnia.

### Limiting alcohol

For people quitting smoking it's a good idea to avoid alcohol during the first two weeks.<sup>5</sup> Alcohol tends to lower ones inhibitions, making it more difficult to maintain the determination not to smoke. It's also a common habit to combine a drink and a cigarette, so having a drink with friends who smoke may trigger cravings. Instead of meeting for drinks you could suggest an alternative such as the cinema or an outing to another smoke-free place eg. a restaurant, the theatre, a bowling alley etc.

### Smoke-free zones

Making your car and home a smoke-free zone can increase your chances of quitting successfully.

### Plan rewards

A pack a day smoker spends about \$70 per week or over \$3500 per year on cigarettes. The money that you've saved on cigarettes can be spent on rewards – anything from a lottery ticket to a holiday. Do what works for you.

### A reality check

The benefits that you have to gain as a non-smoker outweigh the short-term difficulties of quitting. Becoming a non-smoker is a process and takes time. Many people make several attempts to quit before they are successful.<sup>7</sup> With each attempt they learn more about themselves and how their body and mind react to going without cigarettes.



### How are you going to quit?

#### Stopping completely

This means you set a quit date and stop smoking from that day. Many former smokers say that stopping completely on their quit day was more successful than cutting down the number of cigarettes they smoked in the lead up to their quit date. Setting a quit date for about one to two weeks in advance helps you plan your quitting attempt.

#### Cutting down

Some people think that by cutting down the number of cigarettes they smoke in a day they are improving their health. Research shows that smokers who cut down the number of cigarettes they smoke, draw on each cigarette faster, harder and deeper.<sup>8</sup> By drawing more heavily on a cigarette, the inhaled smoke, tar and other particles may be hotter and travel at higher speed. This means that the inhaled smoke, tar and particles travel deeper into the airways and this may increase the risk of some forms of lung cancer.

If you do choose this method it is important to cut down to no cigarettes at all within the two weeks. Remember though, that gradually cutting down to no cigarettes is not as successful as stopping completely and using medications to help you quit.

#### Medications that help you quit

Using nicotine replacement therapies (NRT) – gum, lozenges, sublingual tablets or inhalers – is a smart move. Research shows that using NRT can double your chance of successfully quitting.<sup>3</sup> NRT replaces some of the nicotine from cigarettes, and helps to reduce the withdrawal symptoms when stopping smoking. NRT does not contain any of the toxic substances in tobacco smoke such as carbon monoxide or tar and is available without a prescription from your local pharmacy.

Bupropion is a medication sold in Australia under the trade name of 'Zyban'. You need to visit your doctor for an assessment for a prescription, as this medication is not suitable for everyone. You start taking the tablets about one week before you stop smoking and the Bupropion helps to take away the cravings for cigarettes. This is currently the only medication for quitting smoking that is available on the Pharmaceutical Benefits Scheme.

## A final note

Quitting is a process, not an event. The more prepared and motivated you are, the more likely that you will succeed. Developing a quit plan is essential. No quit attempt is a failure because each time you quit, you learn more about what happens when you go without nicotine. Remember, most smokers have tried to quit several times before they finally succeed.

## References

1. Gowan J, Roller L. (1999) Prescription problems. *The Australian Journal of Pharmacy*; 80: 1058-64.
2. American Psychiatric Association. (1996) Practice guidelines for the treatment of patients with nicotine dependence. *American Journal of Psychiatry*, 153:10, October Supplement.
3. Silagy C, Lancaster T, Stead L, Mant D, Fowler G. (2003) Nicotine replacement therapy for smoking cessation (Cochrane Review). In: *The Cochrane Library*, Issue 2. Oxford: Update Software
4. Swanson JA, Lee JW, et al. (1997) The impact of caffeine use on tobacco cessation and withdrawal. *Addictive Behaviours*. 22(1): 55-68.
5. Garvey AJ, Bliss RW, Hitchcock JL et al. (1993) Predictors of smoking relapse among self-quitters: A Report of the Normative Aging Study. *Addictive Behaviours*. (17): 367-377.
6. Centre for Epidemiology and Research, NSW Department of Health. (2003) *NSW Adult Health Survey 2002*. NSW Public Health Bull. 14(S-4).
7. Fiore MC, Bailey WC, Cohen SJ, et al. (2000) *Treating Tobacco Use and Dependence. Clinical Practice Guideline*. Rockville, MD: US Department of Health and Human Services, Public Health Service. June.
8. Harris JE, Thun MJ, Mondul AM, Calle EE. (2004) Cigarette tar yields in relation to mortality from lung cancer in the cancer prevention study II prospective cohort, 1982-8. *British Medical Journal* 328.