

Men who smoke.

Myth:

"I'm pretty fit, smoking won't affect me"

Fact:

Smoking reduces your fitness

Carbon monoxide in cigarette smoke attaches readily to the substance in the blood responsible for transporting oxygen to the cells (haemoglobin). This means the blood is less able to carry oxygen around the body. Reduced oxygen uptake results in less oxygen being available for working muscles, which in turn reduces endurance. During exercise smokers are more easily exhausted, suffer shortness of breath, have reduced endurance, are slower to react and have poorer visual judgement.¹

Myth:

"The chemicals in cigarettes are not dangerous, smoking can't cause me harm"

Fact:

"Nicotine, carbon monoxide and tar have harmful effects on the body"

Nicotine causes increased heart rate, which means the smoker's heart has to work much harder to produce the same effects as a non-smoker's heart. Nicotine also causes constriction of the blood vessels, resulting in reduced blood flow, and increased blood pressure.

Nicotine and carbon monoxide act on the blood, making it thicker and harder for the heart and blood vessels to transport around the body. These two chemicals also aggravate the lining of blood vessels. Damaged blood vessels mean the body's blood transport system is less efficient.

Carbon monoxide is associated with the development of coronary heart disease. It also contributes to the development of many cancers. Carbon monoxide and other chemicals in cigarette smoke paralyse the small hairs that line the airways. This means toxic substances, including some cancer causing chemicals, cannot be removed from the airway lining.

Tar is made up of a range of chemicals, some of which are known to cause cancer. Tar is also the substance in cigarettes, which yellows the teeth, hands and skin.¹

Myth:

"If I quit smoking I'll put on weight"

Fact:

You can quit and not gain weight.

Nicotine in cigarettes speeds up metabolism and suppresses appetite, so it is possible that quitters may experience a slight increase in weight. Unfortunately fear of gaining weight is enough to keep some smokers from quitting, even though there is no doubt that smoking is far more damaging than weight gain. Approximately half of all quitters gain less than two kilos and many don't put on any weight.

Try snacking on healthy foods like fruit, chewing sugarless gum or sipping water or tea rather than eating foods high in fat and sugar. If you find you are eating more to occupy your hands, try holding a glass of water, squeezing a ball or 'fiddling' with a pen.²

Take advantage of your improved endurance and breathing after quitting and exercise! Exercise boosts your metabolism and is the best way to keep fit and maintain a healthy body weight. Thirty minutes of moderate exercise (such as walking) most days of the week is recommended.³



Myth:

"Smoking and sex...they just compliment each other, right?"

Fact:

One of the most harmful things a man can do to his penis is light up a cigarette.

Impotence is more common among male smokers. Nicotine in cigarettes deteriorates blood vessels – including the tiny, fragile blood vessels in the penis. These blood vessels are necessary to sustain an erection.¹

Myth:
“Only women need to worry about smoking and pregnancy”

Fact:
It takes two sexually healthy people to make a baby

Males who smoke are more likely to have fertility problems. Sperm produced by a smoker is a different shape and less mobile than sperm produced by non-smokers. Male smokers produce less sperm and secretion of the male sex hormone testosterone is affected by the chemicals in tobacco smoke.¹

When a woman is pregnant, smoking by the father may result in a low-birth weight baby and a higher risk of the baby dying after birth. These effects may be due to the pregnant mother’s exposure to environmental tobacco smoke or from direct damage from the sperm.^{4,5}

Myth:
“Smoking helps me relax”

Fact:
Most smokers actually find the time they take to have a cigarette relaxing, not the cigarette itself

The physical effects of smoking are similar to the physical symptoms of stress. Chemicals in cigarette smoke increase heart rate and cause constriction of blood vessels. If a smoker is in a stressful situation, taking time out to have a cigarette may make him or her feel more relaxed. This relaxing effect is due to the ‘time out’ rather than the cigarette.¹

Myth:
“I’m not addicted to cigarettes!”

Fact:
Cigarettes are highly addictive

Nicotine is the drug in tobacco that causes addiction. Nicotine occurs naturally in the tobacco plant, and in large quantities is extremely poisonous. New smokers may experience the unpleasant toxic effects of nicotine, but soon become tolerant to these effects with continued tobacco consumption. Nicotine may be calming (if a smoker is stressed or anxious) or stimulating (if the smoker is relaxed). As the smoker becomes more and more tolerant to nicotine, consumption needs to be increased to achieve desired effects. A smoker might increase consumption by increasing the number of cigarettes smoked per day, taking deeper ‘drags’, or by squeezing the filter, thus blocking the holes that dilute cigarette smoke.¹

Myth:
“Cold turkey is the only way to quit”

Fact:
There are several different quitting methods. You just have to decide which is best for you

For most people going cold turkey is the most successful method. In fact, more than 90% of smokers who quit successfully do so on their own – cold turkey! Going cold turkey means stopping suddenly and completely.

Cutting down on the number of cigarettes smoked each day is another popular quitting method. If you choose to cut down, set your quit date around two weeks after you start cutting down.⁶

Nicotine replacement therapy (NRT) is available in Australia in the form of patches, gum, lozenge, sublingual tablet or inhaler. When patches are applied to the skin or gum is chewed, nicotine is released slowly into the bloodstream. NRT may be helpful for heavier smokers who are motivated to give up and who are likely to suffer nicotine withdrawal symptoms.

The Quitline is a confidential telephone based service where smokers can speak with a trained counsellor to get help to quit smoking. Call 13 QUIT (13 7848 - local call cost).

Myth:
“Quitting is impossible!”

Fact:
Quitting may be difficult, but it is possible!
 Some people quit cold turkey the first time and never look back. For others, quitting is a bit more difficult and it may take several attempts before being completely successful. It is important to remember that while you may ‘slip up’ and have a cigarette, which is no reason to give up on your quit attempt altogether. Remind yourself why you want to quit.

Myth:
“Quitting now won’t help me – the damage is already done”

Fact:
The benefits of quitting are almost immediate!

Two hours after quitting, nicotine is cleared from your system.

After six hours, your heart rate will slow down and your blood pressure will drop slightly.
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Within one or two days, carbon monoxide and nicotine are completely cleared from your body, your lungs will function better and endurance will improve.

After one month, your blood pressure returns to normal and exercising becomes much easier.

After three months, your lungs are able to clean themselves and blood flow improves.

One year after quitting smoking the risk of lung cancer is reduced, and the risk of heart disease is almost half that of someone who continues to smoke.⁶

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

References

- 1 Winstanley M, Woodward S and Walker N. *Tobacco in Australia: Facts and Issues* 1995. Melbourne, Victorian Smoking and Health Program, 1995.
- 2 Stanton R. *Eating for Peak Performance*. Maryborough, Australian Print Group, 1988.
- 3 Trevor Shilton, Health Promotion Director, National Heart Foundation (personal communication), 1999.
- 4 Royal College of Physicians. *Smoking and the Young: A Report of a Working Party of the Royal College of Physicians*. The Lavenham Press, 1992.
- 5 Davis DL. *Paternal smoking and fetal health* [letter]. *Lancet* 1991;337:123.
- 6 Health Promotion Services, Commonwealth Department of Health and Family Services and the Victorian Health Promotion Foundation. *It's Worth the Effort – Quit Manual*. Health Promotion Services, Health Department of Western Australia, 1998.