

Tips for Quitting Smoking

Congratulations! Whether you are just beginning to think about quitting smoking or you are already on your way to kicking the habit, you are taking the steps to ensure that you live a longer and healthier life. The questions below address some of the most common concerns when it comes to quitting. Use this information to prepare yourself to quit, and follow the suggested steps to achieve your objectives along the way. Our tips can help you reach your goal of becoming tobacco-free.

Next, download our **Smoking Cessation Action Plan** to create your own personal program for quitting, identifying the factors that will motivate you and those that may stand in your way from complete success.

Why should I quit smoking?

Quitting smoking is one of the most important things you can do for yourself. Studies have shown that smoking can lead to colon and lung cancer, heart disease, respiratory diseases, early menopause, fertility problems (for both men and women), wrinkles, and gastric ulcers.

It is possible for a smoker who quits to reverse some of the damaging effects smoking has had on his/her body.

But the benefits of quitting go far beyond the smoker him/herself- those surrounding the person will be healthier too. Scientific studies show that second-hand smoke can be harmful to people at any age, and especially affects children. 50% of early childhood asthma cases can be attributed to second-hand smoke. Smoking while pregnant or nursing can expose the baby to harmful ingredients found in cigarettes, and increase a mother's chances of delivering a premature or underweight baby. Infants who are exposed to second-hand smoke are also more likely to die of Sudden Infant Death Syndrome (SIDS).

What withdrawal symptoms can I expect to encounter when I quit?

Nicotine is a powerful, addictive substance, and you are likely to struggle with withdrawal symptoms during the first five to seven days as you begin your journey to cigarette-free living. It is important to remember that nicotine withdrawal is **temporary**, and each person's experience is different based on how their body responds when nicotine is no longer entering the blood stream. You may experience many of the withdrawal symptoms listed below, or you may only experience a few.

Withdrawal symptoms usually peak **48 hours** after you have had your last cigarette, then diminish over time, and eventually subside within a few weeks. Your cravings for cigarettes, however, may not disappear for several months. You might be surprised to find you crave nicotine months or years after you've quit particularly when you are in situations where you used to smoke.

Common withdrawal symptoms include:

- Feeling tense
- Headaches
- Trouble sleeping
- Nausea
- Anxiety/depression
- Tobacco craving
- Increased hunger
- Desire to eat sweets
- Difficulty concentrating
- Coughing
- Constipation
- Diarrhea
- Stomach cramping
- Moodiness

Will I gain weight?

Weight gain is a frequent concern for people who are trying to quit smoking. It's important to remember that the health risks associated with smoking “outweigh” those associated with gaining “a few pounds.” Most people who are trying to quit smoking gain, on average, between 3 and 7 pounds. Weight gain during the smoking cessation process can be attributed to your body's new ability to taste and smell foods better, an increase in your consumption of sweet and or fatty foods, or the need to fulfill the “hand-to-mouth” action to which you are accustomed as a result of smoking. If you are concerned about weight gain, make an effort to drink lots of water and eat foods low in fat and sugar. Keep plenty of healthy snacks like fruits and vegetables on hand. Chewing sugarless gum can also discourage snacking when you are not really hungry. Increasing your exercise can also help prevent weight gain or help you lose those few pounds you gained during the quitting process.

What if I have a relapse?

Quitting smoking is a courageous and challenging effort that might require a great deal of energy, persistence and dedication. **If you do have a relapse, do not be too hard on yourself.** It takes many smokers several attempts before they successfully quit altogether. Look at a relapse as a learning experience and try to figure out what triggered you to resume smoking, so that you can avoid this trigger in the future. Stress and boredom are common causes of relapse. For many people, just being in situations once associated with smoking can trigger the urge to smoke. When faced with one of these “trigger” situations, such as having a drink, reading the paper, watching television, or finishing a meal, try to distract yourself with the suggestions provided in this pamphlet.

I think I want to quit. How do I get started?

There are many different approaches that you can use to help you quit smoking. The most common method is quitting “**cold turkey.**” This indicates a complete cessation of smoking and use of tobacco products at once. Alternatively, some take a **gradual approach** to quitting by gradually cutting down on the number of cigarettes smoked each day, until reaching a “quit date,” when all smoking stops.

Which approach works best? Are there risks associated with each?

The method used is a personal choice and will likely depend upon your needs and the severity of your nicotine addiction. Smokers who take the gradual approach run the risk of prolonging withdrawal symptoms and often unconsciously end up smoking more than they intended. If you choose to taper off cigarettes gradually, it is a good idea to taper off over a set period of time and then quit on a date chosen in advance. For example, if you smoke two packs of cigarettes a day, set a goal to gradually taper down until you only smoke a half a pack a day. When you reach your quit date, it's important that you quit completely.

Either option can be supplemented with over the counter smoking cessation aids or prescription medications for a short time after your quit date to help you manage your cravings and/or withdrawal symptoms, if recommended by your doctor. Additional treatments, such as hypnosis or acupuncture or enrollment in a support group can also be helpful. Your doctor can provide you with more information regarding these products and services.

Remember: Your success depends on your readiness to quit and the severity of your addiction. Regardless of the approach you choose to take, you must be mentally prepared, so that you can anticipate and conquer situations that will be challenging for you.

Use the following checklist and action plan form to get started. Both can help you create a customized plan just right for you. Simply check only those that you'd like to try.

Charting My Course to Quitting

Circle the objectives that you would like to achieve, and then check each step as you accomplish it.

Objective	Steps to Get There
<p>Decide why I want to quit</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Write down on a wallet sized card all of the reasons why I want to quit. Some examples are: <ul style="list-style-type: none"> ▪ I want to get pregnant. ▪ I want to live to see my grandchildren grow up. ▪ I don't want to expose my baby to second-hand smoke. ▪ I want to save money. ▪ I don't want premature wrinkles. ▪ I want to be able to walk up a flight of stairs without losing my breath. ▪ I'm tired of my clothes smelling like smoke. <input type="checkbox"/> Carry the card with me, in a place where I usually keep my cigarettes. <input type="checkbox"/> Take the card out to look at it when an urge hits.
<p>Ask my doctor or healthcare provider for help</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Ask my doctor to recommend prescription nicotine replacement products or over the counter medications that can help relieve my withdrawal symptoms and/or cravings. <input type="checkbox"/> Purchase these smoking cessation aids to have on hand, so that I can begin using them on my quit date.
<p>I choose to take the gradual approach to quitting. I will taper down the number of cigarettes smoked per day, and then stop smoking cigarettes completely.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Use a calendar or notebook to record the number of cigarettes I smoke per day, decreasing the amount over a specified period until I am down to the number of cigarettes/day that will prepare me for Quit Date. <input type="checkbox"/> Specify a date when I quit completely, my "Quit Date."
<p>Setting a Quit Date (whether you quit cold turkey or use the gradual approach)</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Pick a date that has meaning to me, like my birthday or a holiday. Avoid trying to quit during stressful periods like the winter holidays. <input type="checkbox"/> Mark the date on my calendar. <input type="checkbox"/> Tell my friends, family, co-workers and my doctor about my intentions to quit.
<p>Postpone my first cigarette of the day</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Postpone my first cigarette of the day by 1 hour. If I usually smoke my first cigarette of the day at 8:00 a.m., I will wait to smoke until 9:00 a.m. <input type="checkbox"/> Continue to postpone my first cigarette of the day so that I gradually increase the number of hours before I have my first cigarette.
<p>Decrease the amount of each cigarette I smoke.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Smoke only half of each cigarette. <input type="checkbox"/> Blow smoke out before inhaling into my lungs.
<p>Make smoking less pleasurable.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Switch the brand or type of cigarettes I smoke (i.e. If I

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Objective	Steps to Get There
	smoke regular cigarettes usually, I will switch to lights or low-nicotine types).
Make smoking inconvenient and/or awkward	<input type="checkbox"/> Establish a set of rules and follow them (i.e. I will not smoke in my house or car. This will force me to go outside to smoke, even in bad weather or darkness). <input type="checkbox"/> Change the hand I use to hold my cigarette. If I smoke with my right hand, I will switch to my left.
Identify situations, feelings, and actions when I typically have an urge to smoke	<input type="checkbox"/> Keep a journal and write down how I feel, what I am doing, and where I am when I get a craving for a cigarette. <input type="checkbox"/> Create distractions for myself when I am in these situations. I might call a friend, take a walk or a shower. <input type="checkbox"/> Practice deep breathing: Inhale deeply and slowly; then blow the air out slowly through my lips, like I would blow cigarette smoke, until my craving subsides.
Set up a support system	<input type="checkbox"/> Find a “buddy” to quit with (i.e. a co-worker with whom I usually share my cigarette break). The two of us can use each other for support and encouragement. <input type="checkbox"/> Ask someone I trust to be my support person. I will call on this person when I am feeling discouraged or when I need help overcoming a craving. <input type="checkbox"/> Enlist the help of an acquaintance or co-worker who has successfully quit smoking. I will ask how this person handled cravings and set-backs.
Join a smoking cessation class, support group, or sign up for an online program	<input type="checkbox"/> Visit www.HillPhysicians.com for a list of smoking cessation links and information. <input type="checkbox"/> Call (855) 644-4764 or email health@hpmg.com for a list of classes and support groups in my area.

The Big Day – My Quit Date

When your quit date arrives, will you be ready? Circle the objectives that you would like to achieve, and then check each step as you accomplish it.

Objective	Steps to Get There
Go public	<input type="checkbox"/> Tell my friends, family, co-workers, and doctor that today will be my first day as a non-smoker.
Remember my “trigger” situations	<input type="checkbox"/> Be aware of situations that might trigger an urge to smoke. <input type="checkbox"/> Use my distraction techniques when I am in a situation when I would usually smoke (i.e. when I have a cup of coffee, after a meal, at a party, during my lunch break)
Stay away from other smokers for awhile	<input type="checkbox"/> Politely limit contact with friends and family members who smoke. <input type="checkbox"/> Avoid situations where people are smoking until I am confident that I won't give in to temptation.
Don't even think about having “one puff”	<input type="checkbox"/> Not let myself have even one puff of a cigarette. <input type="checkbox"/> Approach how I quit by taking it one day at a time or one hour at a time, if I have to.
Erase any reminder of being a smoker	<input type="checkbox"/> Go to my dentist and get my teeth cleaned. <input type="checkbox"/> Get my clothes, car, and drapes cleaned. <input type="checkbox"/> Throw away my ashtrays, lighters and left over cigarettes.
Set up a reward system	<input type="checkbox"/> Choose and give myself rewards when I reach small milestones. <input type="checkbox"/> Put the money I used to spend on cigarettes in a jar and buy myself something special.
Take deep breaths or practice relaxation	<input type="checkbox"/> Practice deep breathing exercises so I can use my smoke-free lungs. <input type="checkbox"/> Listen to a relaxation CD or podcast.
Keep a positive outlook	Remind myself of all the things I gain by not smoking, including: <ul style="list-style-type: none"> <input type="checkbox"/> I don't smell like cigarettes, sound like a smoker or feel like a smoker. <input type="checkbox"/> I am saving money that I can use to pay for other items, services, or activities that I enjoy. <input type="checkbox"/> I can breathe better when I am physically active. <input type="checkbox"/> Carry and use the card I created to remind myself why I wanted to quit.

Staying Quit	
Use the following tips and sample action plan for change to help you “stay quit.” Circle the objectives that you would like to achieve, and then check each step as you accomplish it.	
Objective	Steps to Get There
Use my reward system	<input type="checkbox"/> Reward myself for small accomplishments. <input type="checkbox"/> Treat myself to a movie, that book, CD, or DVD I’ve wanted, or some other affordable luxury on my one-week anniversary as a non-smoker. <input type="checkbox"/> Set up more rewards for myself as I approach my one-month anniversary and each month that follows.
Get moving	<input type="checkbox"/> Start an exercise program, as simple as walking with friends or joining a local gym or recreation center.
Stay away from other smokers for awhile.	<input type="checkbox"/> Politely limit contact with friends and family members who smoke. <input type="checkbox"/> Avoid situations where people are smoking until I am confident that I won’t give in to temptation.
Never give up!	<input type="checkbox"/> Remember that staying quit is a life-long process. <input type="checkbox"/> Not get down on myself if I have a relapse. <input type="checkbox"/> Remember that healthier habits take a long time to develop, but will grow stronger with time. <input type="checkbox"/> Remember that most ex-smokers make several quit attempts before they are successful. <input type="checkbox"/> Remind myself how good it feels to be cigarette free and that I am doing something that will improve my health and the health of those around me.

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Resources

See our online health center devoted to **Tobacco Cessation**, which includes links to local and online programs, classes, along with a complete list of resources at www.HillPhysicians.com.

Hill HealthE-newsletter. Free monthly health and wellness news and information emails. Subscribe today at www.hillphysicians.com/subscribe.

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My Action Plan for Change

Whatever your goal – whether to lose weight, quit smoking or achieve balance in your life – experts recommend taking small, manageable steps toward your goal for lasting success. Use the action plan below to chart your path to smoking cessation.

I am going to quit smoking: Cold Turkey Gradually Other: _____

If I choose to quit gradually:

I will decrease the number of cigarettes I smoke per day over a _____ -week period until I am down to _____ cigarettes/day. My “Quit Date” (to completely stop smoking) is: _____

If I choose to quit “cold turkey,” my Quit Date is: _____

I want to quit smoking because: _____

My support person is: _____ **Phone #:** _____

I will reward myself by: _____

I will talk to my doctor about: The Nicotine Patch Nicotine Gum Nicotine Inhaler
 Nicotine nasal spray Prescription Medicine Other _____

Potential challenges I anticipate are: _____

I will use the following strategies to overcome my challenges: _____

If I feel like smoking a cigarette, I will do one of these activities instead:

- Chew gum Take a walk Other exercise Eat a healthy snack
- Call my support person Take deep slow breaths Practice relaxation (i.e. meditation)
- Other: _____

My confidence level is:

If you **believe** that you can make the changes you need to quit smoking, then you will succeed. Rate your belief that you will succeed in changing your habits on a scale from 1-10, with 10 being the highest confidence in success.

Low 1 2 3 4 5 6 7 8 9 10 High

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