Living Free From Tobacco
It’s Your Choice.
Tobacco Consultation Service

Most tobacco users want to stop using but for several reasons they may go back to tobacco. The most important thing is to never give up and to keep trying. This booklet is a great tool in helping you live a tobacco-free life.

Throughout this booklet, we will make many references to ‘tobacco use.’ This includes smoking cigarettes and cigars, using smokeless tobacco like chew, dip, snus, and the electronic cigarette.

Need Help Quitting?

The University of Michigan has a program for you.

The Tobacco Consultation Service (TCS) can help you quit using tobacco. TCS offers group and one-on-one treatment programs. Both the group and individual programs look at body, mind, and social reasons for tobacco use. We stress unlearning tobacco habits and do not try to scare people.

TCS tries to make quitting easier by helping you plan ahead when dealing with things that make you want to use tobacco. Our programs provide the support and skills you need to help you quit and stay quit.

• Groups are held once a week for seven weeks
• Each weekly meeting is ninety minutes long
• The first three weeks are spent getting ready to quit
• The fourth meeting is "quit week" and everyone quits together
• The last four sessions focus on staying quit
• Self-help materials are provided
• The use of nicotine replacement aids and/or Zyban and Chantix are encouraged and discussed
• The individual program allows you to meet one-on-one with a counselor for up to five, fifty minute sessions
• Follow-up support for one year is given for both group and individual counseling

The programs are free to all UM employees and UMHS patients with a doctor’s referral. A fee is required for all others. Sign-up is required. Please call 734-998-6222 to sign-up or for more information. You can also go to our website for group schedules and to read what others have said about quitting tobacco at www.mhealthy.umich.edu/tobacco.
Background on Cigarettes and Nicotine

Cigarettes and other tobacco products contain thousands of harmful chemicals. Nicotine is the substance that people become addicted to in tobacco. Even though nicotine does not cause cancer it can damage the heart and blood vessels in your body. Nicotine makes your blood pressure go up right away after using tobacco. It also makes the lining of your blood vessels stickier which increases your risk for a stroke and/or a heart attack. Nicotine also makes your heart pump faster. This can lead to heart disease, heart failure, or irregular heart beats.

Tobacco is not regulated. This means the government does not tell tobacco companies what can and cannot be put in the tobacco. For this reason, harmful and toxic chemicals are either added or are a part of tobacco processing. These chemicals enter your body when you smoke a cigarette or use other tobacco products.

Smoking a cigarette is the fastest way to get nicotine to your brain. This happens in 8-10 seconds. After you inhale, the nicotine vapor attaches to the tar in the tobacco and makes the vapors heavy enough to reach your lungs. Once in your lungs, the nicotine is absorbed in the tiny blood vessels and taken by the blood to the brain. Nicotine in smokeless tobacco is absorbed through the lining of the mouth. Nicotine hits the brain of a smokeless tobacco user in 5-10 minutes.

The nicotine connects to certain cells in your brain which causes chemicals called neurotransmitters to be released in your brain. The four main neurotransmitters are:

- **Serotonin**: Helps with your mood
- **Dopamine**: Makes that “feel good” sensation
- **Acetylcholine**: Helps you focus and pay attention better
- **Norephinephrine**: Controls your appetite and is a stimulant

The release of these chemicals is what makes it pleasurable to use tobacco and hard for people to quit. Nicotine replacement products contain nicotine
but the effects on the brain are much slower and free of the other 4,000 chemicals! They are much safer to use and can double your chances in quitting.

You may know someone who is 90 years old and smokes a pack-a-day but this is usually rare. Smoking is the leading cause of early death in the United States. Many organs of your body are affected by tobacco use. Most people know the lungs are affected by smoking but many do not know the liver, kidneys, heart, skin, brain, blood cells, eyes, mouth, throat, stomach and bladder can also be damaged by tobacco use. It is not natural for our organs to be surrounded by poisons. It is for this reason that you may have a higher chance for getting a tobacco-related illness or cancer.

Even though many people start out thinking they can stop anytime, nicotine addiction makes quitting tobacco hard. But you can do this and the good news is your body begins to heal right away.
Chemicals in Tobacco

There are over 4,000 chemicals found in tobacco, up to 60 of which have been found to cause cancer. Some of the more familiar chemicals are:

**Tar**
Tar is one of the cancer-causing chemicals found in tobacco. It stains your teeth, makes your fingers turn brown and coats everything it touches with a brownish-yellow film. Tar is present in all tobacco. In cigarettes, tar tends to increase as the cigarette burns down. This can mean that the last puff on a cigarette may contain as much as twice the amount of tar as the first puff. Tar in cigarette smoke paralyzes the cilia in the lungs, and can be the cause of lung diseases such as emphysema, chronic bronchitis, and lung cancer. **If you quit smoking, the cilia can grow back and can begin to clean your lungs of tar.**

**Carbon monoxide**
Carbon monoxide is a poisonous gas that is harmful to your body at high levels. It is produced from burning material, including tobacco products. Smoking increases the level of carbon monoxide in your body.

The more carbon monoxide you have in your bloodstream, the less oxygen your blood can carry. This stresses your body, mainly your heart and brain. High levels of carbon monoxide can lead to confusion, collapse, unconsciousness, seizures, brain damage and death. **If you quit smoking, your carbon monoxide level will return to normal within 8-10 hours.**

**Nicotine**
Nicotine is NOT one of the cancer causing chemicals in tobacco, however it is very addictive. In concentrated form, nicotine is used to kill bugs. **If you quit using tobacco, peak physical withdrawal from nicotine will be over within an average of 72 hours, however it can be longer.**

Other toxic chemicals in tobacco include:
- Acetone – chemical used in fingernail polish remover
- Acetylene – fuel used in lighters
- Ammonia – chemical used for cleaning
- Formaldehyde – a chemical used to preserve dead tissue
- Lead – found in old paint products
- Methanol – wood alcohol
- Poisons such as Cyanide and Arsenic
Nicotine Addiction: The Physical, Psychological and Social Aspects of the Addiction

Physical Addiction:

- Nicotine is the chemical in tobacco that keeps you addicted. It is as addictive as cocaine.
- Nicotine releases chemicals in the brain which make you feel good within 8-10 seconds after inhaling.
- The pleasurable feelings from using tobacco make it hard to quit.

Signs of physical withdrawal include:

- Cravings for tobacco
- Anxiety about quitting
- Feeling irritable
- Restlessness
- Hard to think
- Headaches
- Sleepiness
- Upset stomach, or constipation or diarrhea
Social Addiction:
- When people in your social circle use tobacco, it might feel normal to also use tobacco. If you are someone who uses more when going out with friends or have regular “tobacco breaks” with co-workers you will need to have a plan in place to deal with these times. Have a backup plan before going out and ask a few close friends or family members to support your efforts in quitting.

Psychological Addiction:
- When we talk about psychological addiction we are talking about your thoughts and feelings that are tied to tobacco use activities.
- Using tobacco becomes part of your day-to-day activities, from your morning coffee, to after meals, work breaks, stressful events, driving, or relaxing.
- It can be a challenge to not use tobacco when you do these activities because doing them can “trigger” an urge.
- It is important to find new ways to do things to help ease urges. This is the perfect time to try new hobbies, start an exercise program, or explore new stress management techniques.

Remember - more people start using tobacco again due to emotional triggers than any other reason!
Giving up Tobacco . . .
Stages of Grief

For many people, quitting tobacco can bring feelings of grief — just like when we lose someone or something important. These are the five stages:

**Denial** — Denial is our mind’s first way of protecting us from a sudden change or loss. This means that though you know the value of quitting, you still don’t want to believe it. Some of the things you might say to yourself are:

- Quitting is easy; I can do it anytime.
- Cigarettes haven’t been proven harmful.
- I have too much stress now.
- Once I get past these health issues maybe I can think about quitting.

**Anger** — When we begin to accept a loss, we often feel anger. You might be angry about change and the loss of your “friend.” Some of the things you might feel are:

- “Why me? I’m mad it’s so hard. I’m mad things aren’t going my way.”
- Anger at non-users and ex-users or even family members and friends.

Remember that anger is part of the grief process. Don’t try to resist it. Accept it, safely vent it, and take some time to feel it. It will go away. Sometimes naming the feeling lowers the strength of your anger.

**Depression** — When we recognize and accept the loss of our “friend,” it’s natural to feel some sadness or feelings of giving up something important.

- Why can’t I have this one little habit?
- Tobacco is the only thing I have.

Don’t fight this stage or think it’s crazy to mourn the loss of tobacco. Accept it. Vent it. Take some time to just feel sad. Then move on and focus on the good of quitting.
**Bargaining** — This is the stage you might want to put off the quitting. You may just change brands, use only at home or only at work. You try to make deals and promises.

- If I just have one cigarette, I’ll get right back on track afterward and I won’t do it again.
- I’ll quit as long as my weight stays down.
- I can use tobacco on occasion, like when I go out drinking.

Everyone is tempted to bargain. It is a natural part of quitting and helps you move past it. Laugh it off and have a heart-to-heart talk with the “child” inside you. Make a pledge to be in control. If you give in to bargaining, tobacco is once again in control. Use the statement, “I am in control of my actions and life.”

**Acceptance** — A healthy person who has suffered a loss, in time, accepts that loss and goes on living life. In this stage, you finally work out your sense of loss or grief. You can get on with living your new healthier life.

- I’d still like to use tobacco sometimes but I choose not to.
- I am going to teach myself to like my new nonsmoking life. I’ll do it slowly and positively.

The key to moving through emotional recovery is your attitude toward quitting. Look at the stages above as part of your recovery process. Move through the stages with a sense of challenge, hope and excitement over what lies ahead. Avoid thinking you have given up something; rather look at what you have gained — your health, freedom, and control of you. Quitting tobacco is a gift you have given yourself, and to those around you.
Values Exercise

Being aware of your reasons to quit is important. Understanding your reasons can help you stay quit in the long-term. The following is a list of values. Please circle the three most important values to you. Then write a statement about why you want to quit based on that value. Such as:

I want to quit using chew because…

   *I want to see my grandchildren grow-up. (Family)*

   OR

I choose to quit smoking because …

   *I want to breathe free and not be dependent on anyone else to take care of me when I get older. (Health)*

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Preparing To Quit:

When preparing to quit you can boost your chance of staying quit by making a quit plan (see page 31).

- Throw away lighters, ashtrays, matches, cigarette/cigar cases, and all remaining tobacco.
- Check purses, pockets, drawers, cupboards, etc. for any tobacco products and throw away before your quit day.

Things to help with the hand-to-mouth link:

- Snack on crunchy foods like pretzels, frozen grapes, carrots, celery sticks
- Hold a worry stone(s) or beads
- Use a pen or pencil to click and move around in your hand
- Squeeze a hand grip or small ball
- Chew on a straw, toothpick or cinnamon stick

How to Cope with Tough Times

Not every tobacco user has the same triggers and some may be stronger than others. The following is a list of suggestions for specific triggers. Check those that apply to you.

- **Stress or Anger**
  - Ask yourself how using tobacco will change anything for the better.
  - Rethink your belief that tobacco use will calm you.
  - Do some deep breathing exercises.
  - Use positive statements, “I am strong” or “I can get through this.”
  - Remember tobacco use is not a good way to hurt someone else to get back at them. You only hurt yourself.

- **After Meals**
  - Get up from the table as soon as you are done eating.
  - Do something active such as take a walk, wash the dishes, play with kids or pets.
  - Brush your teeth or rinse with mouthwash.
Alcohol
- Find different ways to socialize with friends.
- If you choose to drink, change what you usually drink and put a limit on how much you are going to drink.
- You may consider avoiding alcohol the first 3 - 4 weeks after quitting.
- The goal is not to replace nicotine addiction with alcohol addiction. If you find yourself drinking more than before you quit, get help.

In the Car
- Change the environment in the car. Put your list of reasons to quit nearby. Make a quit kit (items could include chewing gum, sugar-free candy, toothpicks, a squeezer, straws, etc.) and have your quit kit ready to use.
- Clean car thoroughly (get car detailed if possible).
- Spray with deodorizer, get an air freshener or put dryer sheets under the seats to clear up the tobacco smoke smell.
- Remove the ashtray from the car.

At Work
- Take your break at a different time and avoid areas where others use tobacco.
- Do something during your break, such as take a walk, read, pay bills, or listen to music.
- Re-organize your office space if you can. Put up positive quotes and pictures of family, friends and grandchildren.
- Have a support person at work.
- Realize you don't need an excuse to take a break. You deserve one so take it!

Coffee
- Add some flavored creamer or use a different brand of coffee.
- Drink it out of a different cup or mug or have it at a coffee shop.
- Have it in a different location in your home.
- Drink hot tea, hot cocoa and/or 100% fruit juice in the morning.
Living with Other Tobacco Users
• Talk beforehand about where and when the other person will use tobacco. Create tobacco-free zones. Do not make demands or lecture. Thank them often.
• Ask the person(s) to keep their tobacco products with them and not leave anything (e.g., ashtrays or tobacco tins) lying around.

Morning Routine
• Sleep in a little longer.
• Change the routine of how you get ready for the day.
• Eat breakfast if you usually don’t.
• Have positive quotes or your list of reasons for quitting posted on your bathroom mirror.

In the Evening
• Get busy with a project.
• Read your list of reasons why you want to quit.
• Begin a new hobby or start volunteering.
• Start an exercise program. A brisk walk is perfect and free!

Parties/Socializing
• Have a plan in place before you go (tell someone that you are going with that you quit and to help you if you have a strong urge).
• Leave from time-to-time if you have to be in an environment where tobacco is being used.
• Enjoy not smelling like smoke, not having stains on your teeth and hands, and not having tobacco in your mouth.
• Realize a tobacco user is not having a better time just because he/she is using.

Boredom
• Always carry something to read (book, magazine, newspaper).
• Get busy with a new hobby.
• Make lists of “things to do” or write a letter.
How to increase your chances of quitting by 50%...use tobacco treatment medications

Combination Therapy
Depending on your individual health, tobacco use, and quit plan, some quit aids can be used together to best support you while you quit. Common combinations are the nicotine patch with nicotine gum /nicotine lozenge /nicotine inhaler or any nicotine replacement therapy product with Zyban. Consult your primary care physician or a Tobacco Treatment Specialist before you combine quit aids.

Nicotine Patch
The nicotine patch is a tool to help you quit tobacco by reducing your withdrawal from nicotine. The patch gives you nicotine at a lower, steadier dose than a cigarette or other tobacco products. The patch comes in dosages of 21mg, 14mg, and 7mg.

How to Use the Patch
1) Place the patch, sticky side down on a hairless place above the waist. Women should avoid placing the patch on breast tissue. Do not place the patch on your neck.
2) Place your hand on top of the patch for 10-15 seconds after applying to make sure it sticks.

Dos and Don’ts
• Do talk to your doctor before using the patch.
• Do follow the directions.
• Do put a new patch on and take the old patch off at the same time each day. If sleep disturbances occur, take the patch off 1-2 hours before bedtime, and put a new one on when you wake up.
• Do contact your doctor and stop using it if you develop a rash or skin blistering.
• Do place in a different location each day.
• Don’t use tobacco while using the patch.
• Don’t use the patch on red, irritated, burned or broken skin.
• Don’t wear the patch in the same place for at least seven days.
• Don’t place the patch on a tattoo or scars.
• Don’t let children or pets handle the patch at any time.
**Nicotine Gum**

Nicotine gum is not a chewing gum. It is a tool to help you quit tobacco by reducing your withdrawal symptoms. It comes in two dosages: 2mg or 4mg and most brands are sugar-free. Nicotine is absorbed through the lining of your mouth and gums and takes about ten minutes to reduce cravings.

**How to Use the Gum**

1) Chew the gum slowly until you feel a “peppery” taste.
2) Place the gum between your cheek and gum - hold it there - **Do not continue to chew it**.
3) After the “peppery” taste goes away, chew the gum slowly until the taste returns.
4) Place the gum back between your cheek and gum.
5) Each piece of gum is good for 20-30 minutes - then throw it away.

**Dos and Don’ts**

- Do talk to your doctor before using the gum.
- Do follow the directions.
- Do use the gum for intense cravings.
- Don’t use tobacco and use the gum.
- Don’t use the gum if you are used to chewing regular gum.
- Don’t eat or drink liquids (including water) 15 minutes before, during, or 15 minutes after you use nicotine gum.
- Don’t use more than 24 pieces per day.

**Nicotine Lozenge**

The nicotine lozenge is a medication to help you quit using tobacco by reducing your withdrawal symptoms. The nicotine lozenge comes in two dosages: 2mg or 4mg and most brands are sugar-free.

Nicotine is absorbed through the lining of your mouth and gums and typically it takes about ten minutes to reduce cravings.

**How to Use the Lozenge**

1) Place the lozenge between your cheek and gum.
2) Do not chew or suck the lozenge.
3) You may feel a warm or tingling sensation in the area around the lozenge.
4) Occasionally move the lozenge from one side to the other side of your mouth.
5) Try to minimize your swallowing.
6) Each lozenge will dissolve in 20-60 minutes.
**Dos and Don’ts**
- Do talk to your doctor before using the lozenge.
- Do follow the directions.
- Do use the lozenge for intense cravings.
- Don’t use tobacco and use the lozenge.
- Don’t use more than one lozenge at a time.
- Don’t suck or chew the lozenges.
- Don’t eat or drink liquids (including water) 15 minutes before, during, or 15 minutes after you use a nicotine lozenge.
- Don’t use more than 20 lozenges per day.

**Nicotine Inhaler**
The nicotine inhaler is a prescription medication designed to help you quit tobacco by reducing your withdrawal from nicotine. As you draw through the inhaler, nicotine is released to your mouth and throat. It takes about ten minutes for the nicotine to reduce cravings. The nicotine inhaler may be well suited for smokers who enjoy the hand to mouth action of smoking.

**How to Use the Inhaler**
1) Place a cartridge in the mouthpiece.
2) Place the inhaler in your mouth and point it toward the top of the mouth then draw on it like a straw. Remember the nicotine is released and absorbed in the mouth, not the lungs.
3) Continue drawing off and on for 15-20 minutes.
4) Each cartridge is good for 20 - 40 minutes.

**Dos and Don’ts**
- Do talk to your doctor before using the inhaler.
- Do follow the directions.
- Do draw on the inhaler until your urge has passed.
- Don’t use tobacco and use the inhaler.
- Don’t eat or drink liquids (including water) 15 minutes before, during, or 15 minutes after using the inhaler.
- Don’t let children or pets handle the nicotine cartridges at any time.
- Don’t use more than 16 cartridges per day.
- Don’t drag on the inhaler like a cigarette. Remember, most of the nicotine from the inhaler is absorbed in the mouth, not the lungs.
Nicotine Spray
Nicotine nasal spray is a prescription medication designed to help you quit tobacco by reducing your withdrawal from nicotine. A dose is one spray in each nostril. Nicotine is absorbed through the nasal passages. It takes about 3 -5 minutes for nicotine to reach your brain.

How to Use the Spray
1) Blow your nose if it is not clear.
2) Tilt your head back slightly.
3) Exhale all your air out of your lungs.
4) Insert tip of bottle into nostril – only as far as it is comfortable.
5) Spray once in each nostril. Do not inhale or sniff while spraying.
6) Count to 10 before inhaling through your nose.
7) If your nose runs, gently sniff to keep spray in nose - wait 2 or 3 minutes before blowing your nose.
8) In the first week of use you can expect to feel a hot, peppery feeling in the back of your throat or nose, sneezing, coughing, watery eyes and/or runny nose - these side effects should stop or lessen after a week. Call your doctor if they do not stop.

Dos and Don’ts
• Do talk to your doctor before you use the nasal spray.
• Do follow the directions carefully.
• Don’t use tobacco and use the nasal spray.
• Don’t use the nasal spray more than 5 times an hour or 40 times in 24 hours.

Zyban® (Wellbutrin; bupropion hydrochlorideSR)
Zyban is a prescription pill used to help people quit tobacco use. Over half the people who take Zyban report that cigarettes do not taste as good and the urge to smoke seems to go away or is lessened.

The most common side effect is trouble sleeping. Some people may have feelings of anxiety, dry mouth, rash, nausea, vomiting, dizziness, constipation, headaches, tremor, and loss of appetite. Many of these side effects go away after a week or two.
How to Use Zyban
1) Begin taking Zyban 7-10 days BEFORE your quit date.
2) Start by taking one pill (150 mg) a day for 3 – 6 days (as prescribed by your doctor).
3) Then take one pill (150 mg) twice a day for up to another 11 to 53 weeks.

Dos and Don’ts
• Do talk to your doctor before you use Zyban.
• Do follow the directions carefully.
• Do wait at least eight hours between doses.
• Do talk to your doctor if you use Zyban and nicotine replacement together.
• Don’t use Zyban if you have ever had a seizure or serious head injury.
• Don’t use Zyban if you are using a MAO anti-depressant.
• Don’t use Zyban if you have an active eating disorder.

Chantix® (Varenicline Tartrate)
Chantix is a prescription pill to help people quit tobacco use. It acts like nicotine and can reduce cravings for cigarettes and other tobacco products. Chantix blocks your brain's response to nicotine, so you do not have the same pleasure from using tobacco.

How to use Chantix
1) Begin taking Chantix 7-10 days BEFORE your quit date.
2) Begin taking one pill (0.5mg) a day for three days.
3) Then move up to one pill (0.5 mg) twice a day for four days.
4) Then one pill (1 mg) twice a day for an additional 11 weeks up to six months or as directed by your doctor.

Dos and Don’ts
• Do talk to your doctor before using Chantix.
• Do follow the directions.
• Do wait at least eight hours between taking dosages.
• Do contact your doctor if you have any changes in your mood, behavior, or anxiety.
• Do take each pill with a meal/snack and full glass of water.
• Don’t wait until bedtime to take the second pill. If you have vivid dreams, try taking the first pill early enough in the morning so you can take the second pill in the later part of the afternoon.
• Don’t continue to use tobacco while on Chantix after your quit date.
• Don’t combine Chantix with any nicotine replacement products.
Taking Care of You

Quitting tobacco is hard but it is also doable if you take care of you. If you take care of yourself, you will feel better, and the process of quitting will be easier.

Get enough sleep
Most people do not get enough sleep. Aim for at least 7-8 hours of sleep a night. Sleep in a darkened, cool room. Being tired can be a trigger to use tobacco. Also, being tired can lead to impulsive behavior, like thinking you can have “just one cigarette” or smoke “just today.”

Eat healthy foods
Like sleep, your body needs vitamins and minerals to feel good. Focus on eating five to seven servings of fruits AND vegetables each day.

Drink fluids (like water)
Often when we think we are hungry, we really are thirsty, so it is important to drink fluids. Unless your doctor has told you to limit fluids, try adding more liquids like water or juice to your daily activities.

Take your medications as prescribed by your doctor
It can be hard to remember to take a pill or several pills every day but your doctor has prescribed them for a reason. Taking your medications as directed by your doctor can help you feel better. If your medication(s) are causing you a lot of problems, make an appointment to talk with your doctor as there may be things she/he can do to help you feel better.

Get up and move
You don’t have to train for a marathon but your body will feel better if you get some exercise. If you have not been exercising, make sure you first talk with your doctor. Once you are given the OK, start slow. Exercise is good for your body and mind, so enjoy your time.

Do something extra for you
You do things for everyone else. While quitting tobacco is one of the best things you can do for you, take some time to do other things. Take a long, warm bath, buy flowers or that CD you have been wanting. Take a slow walk in the park or call an old friend. You are working hard. Remember to do something to reward yourself.
Involving Others

The following is a list of suggestions for the people in your life who want to help (or are trying to help) you quit tobacco. Show your list of reasons to quit to the people who care about you. Tell them the things you think will help you the most!

**Be patient** — I am trying to free myself from nicotine addiction. The quitting process may make me tense, anxious, and have sudden mood swings. This is because I am doing without something I have been used to having in my life. Please bear with me for as long as it takes!

**Be curious** — For years I have been using tobacco to pass the time, to reward myself, to relax, to calm myself, to wake-up, to help me think, and to get through stressful events. Now I am learning to cope without tobacco. Ask me how I am doing. Ask me what my life is like without nicotine. It is all very strange to me and I really want to talk about it.

**Be sensitive** — All day long I must deal with the urge to use tobacco. Sometimes it seems as if just about everything makes me think about using tobacco; waiting for the bus, talking on the phone, the end of a meal. I could really use your help to distract me from thinking about tobacco. Unless I mention it first, please do not bring up the subject of my being off tobacco.

**Be supportive** — I really need someone to root for me right now; someone to be on my side. I would enjoy special attention – like rewarding my first week without tobacco with a special treat while I am learning how to become a permanent ex-user.

**Be positive** — Sometimes I find it hard to remember all the good things that come with quitting. I like it when you notice the positive changes you see in me. It means a lot to know that you are proud of me or that I look better.

**Be understanding** — Each person has to quit in his or her own way. What worked for someone else may not work for me. Do not give me advice unless I ask. Please do NOT tell me how easy it was for someone else to quit! I will get there by following my own plan.
“Exercise for Success”

Add something in your life as you’re taking tobacco out of your life. Exercise can help you be tobacco free — research shows that people who exercise have a higher long-term success rate. Try walking if you’ve never worked out before or try for something gentle, like yoga.

Exercise also releases brain chemicals called endorphins. Endorphins are responsible for “good” feelings like happiness and a sense of well-being. You might also find:

• Less stress and tension
• Feeling less depressed and in a better mood
• Less cravings for nicotine
• Better sleep
• More confidence and drive
• Better physical shape
• Feeling more interest and positive outlook in your life
• Exercise can also help control weight, blood pressure, diabetes, and cholesterol

For information on classes offered please contact MHealthy at 734-647-7888 or www.mhealthy.umich.edu/exercise
Pregnancy and Smoking—
Now is the right time to quit

Fact: The baby is exposed to the same harmful chemicals as Mom.

Fact: The unborn baby is at higher risk of lower birth weight, being born before the due date and with poorer working organs than babies born to moms who do not smoke.

Fact: Babies born to a mom who smokes are twice as likely to die from SIDS (Sudden Infant Death Syndrome).

Fact: Babies born to moms who smoke are sick more often and are hospitalized more than babies born to moms who do not smoke.

Fact: Babies of smoking moms have poorer lung function than those who are born to moms who do not smoke.

Fact: After birth, babies have more ear infections and asthmatic bronchitis than those born to moms who do not smoke.

Fact: A child who has been exposed to one parent who smokes is 50% more likely to start smoking themselves someday. If both parents smoke they are 75% more likely to start smoking. Parents and grandparents play a large role in a child deciding to smoke.
What you can do:

- Stop smoking immediately. The less contact to smoke, the better for your baby.
- Cutting back is not enough. Cutting back continues to expose the unborn baby to harmful chemicals and limits the amount of oxygen your baby needs for proper growth. If you cut back, you may inhale more deeply and still give the same harmful exposure to the unborn baby.
- Get support. Make sure you have someone who you can talk to about your quitting process. Call Tobacco Consultation Service for support and quit tips at 734-998-6222.
- Change your behavior. For example, work on the way you react to stress, have something to chew on if you get an urge, take a walk after dinner, limit time with other smokers and ask them not to smoke around you.
- Make sure you have mommy time every day. Take a warm shower or bath, read a book, take a walk, call a friend, or go see a movie. Do what you need to do to take care of you.

Fast acting nicotine replacement such as the gum, lozenge, or inhaler can sometimes be used during pregnancy. Speak with your health care provider to determine if you are able to use this.

Should mothers who smoke breastfeed?

Mothers who smoke are encouraged to quit, however, breast milk remains the recommended food for a baby even if the mother smokes. Although nicotine may be present in the milk of a mother who smokes, there are no reports of adverse effects on the infant due to breastfeeding.
Concerns while smoking and breastfeeding:

• Research shows that the heaviest smokers tend to wean the earliest.
• Smokers have lower milk production.
• Complications with how your body releases milk may occur.
• Smoking lowers the levels of prolactin. The hormone prolactin must be present for milk to be made.

What can you do:

• Stop smoking immediately – much of the damage can be undone or prevented. If you can’t stop, cut down.
• Make sure to wear a ‘smoking jacket’ while smoking and remove this before holding/nursing your baby.
• Wash hands and face thoroughly before nursing.
• If you continue to smoke, smoke immediately after breastfeeding (not immediately before or during breastfeeding) to cut down on the amount of nicotine in your milk during nursing. You are encouraged to wait at least 90 minutes between smoking and nursing, to reduce the amount of nicotine in your breast milk.
• Don’t smoke inside the house or car, even when the baby is not there.
• Don’t expose your baby to second hand smoke from other smokers.
• Get support. Make sure you have someone who you can talk to about your quitting process. Call Tobacco Consultation Service for support in quitting or to stop from going back to smoking at 734-998-6222.
• Work to change the way you deal with stress.
• Make sure you have down time to take a bath, pamper yourself, go for a walk or take part in a hobby.
• Your doctor might be willing to discuss the option of using nicotine replacement if you cannot quit using activity changes alone.
Secondhand Smoke Exposure: What You Should Know

Fact: Secondhand smoke is the smoke from the burning end of a cigarette and exhaled smoke.

Fact: Secondhand smoke is considered a cancer causing agent by the Environmental Protection Agency (EPA).

Fact: If you smoke around children from birth to age five, they will have inhaled the same amount of smoke as over 100 packs of cigarettes.

Fact: Secondhand smoke exposure causes disease and early death in children and adults who do not smoke.

Fact: Secondhand smoke can lead to higher rates of ear infections, asthma attacks, bronchitis, and pneumonia in children.

Fact: Secondhand smoke can create other breathing problems such as coughing, more mucus, chest discomfort, and reduced lung function.

Fact: Secondhand smoke exposure can cause heart disease and lung cancer in non-smokers.

Fact: Breathing secondhand smoke has immediate harmful effects on the heart and blood vessels and increases the risk of heart attack. People who already have heart disease are at especially high risk.

Fact: Secondhand smoke can cause Sudden Infant Death Syndrome (SIDS).

Fact: There is no risk-free level of secondhand smoke exposure. Even brief exposure can be dangerous.

What you can do:

• Quit Smoking. If you cannot quit:
  o Don’t smoke inside the house or in the car. Make this a rule you and all others follow.
  o Wear a ‘smoking jacket’ while smoking and remove it before coming inside the house or touching children or other non-smokers.
  o Wash your hands and face after smoking.
Other Tobacco Products

Cigars: Did you know?

• Cigars have the same deadly, cancer causing chemicals found in cigarettes and are not safer.
• Cigars have more nicotine than cigarettes.
• Smoking cigars increases the risk of death from mouth, lung, lip, tongue, throat, esophagus and larynx (voice box) cancer.
• The risk of lung cancer death for cigar smokers is not as high as it is for cigarette smokers, however the risk of lung cancer for cigar smokers is three times higher than people who have never smoked.
• It is impossible for you to not inhale some of the smoke from a cigar. You may not inhale as deeply as a cigarette smoker but you are in fact inhaling!
• For those who deeply inhale cigar smoke there is a greater chance for cancer of the pancreas and bladder.
• Cigars burn for a long time and give off more secondhand smoke.
• Cigar secondhand smoke contains the same toxins and cancer-causing agents as cigarette smoke but in higher amounts.

What you can do to help you quit:

• Know your triggers and plan ahead to deal with these urges.
• Set a quit date and use the skills listed on pages 18-20.
• If you smoke cigars at social times, such as when playing golf, or drinking, tell a friend you are quitting, and ask him or her to be your support person.
  • Keep your mouth busy at these times, for example, using toothpicks, licorice, or your nicotine inhaler.
• Use nicotine replacement, a support system, or non-nicotine medications to help you with your quit attempt (see pages 13-17).
Smokeless Tobacco (Chew/Dip/Snus): Did you know?

- Smokeless tobacco contains 28 cancer-causing agents.
- Smokeless tobacco increases the chances of getting cancer of the mouth, lips, gum and esophagus because it stays in direct contact with the fragile lining of these areas.
- Gum disease, tooth decay and mouth sores are more common with smokeless tobacco use.
- Smokeless tobacco delivers more nicotine than cigarettes.
- One tobacco pouch can equal the same amount of nicotine as four packs of cigarettes.

What you can do to help you quit:

- Know your triggers and plan ahead to deal with them.
- Set a quit date and use the helpful ideas listed on pages 18-20.
- If you use smokeless tobacco when playing sports or at work with your co-workers plan ahead by telling someone you are quitting.
- Bring something else to use or keep your mouth busy such as toothpicks, licorice, hard candy, gum or nicotine lozenges.
- Use nicotine replacement, a support system or non-nicotine medications to help you with your quit attempt (see pages 13-17).

Hookah Pipe (Water pipe): Did you know?

- Hookah smoke contains cancer causing agents and other harmful chemicals known to cause heart disease and other tobacco related diseases.
- It is not safer to smoke through a hookah! Though the smoke produced by the hookah passes through water, it still contains high levels of deadly compounds, such as carbon monoxide, heavy metals, and cancer causing agents.
- Water pipe tobacco contains the addictive drug nicotine and is as toxic as cigarette smoke.
- Water pipe smokers use frequent puffing, deep breaths in, and spend more time smoking than cigarette smokers - a hookah smoker may take in higher amounts of toxins than cigarette smokers.
• A person who smokes for an-hour-long session can breathe in 100–200 TIMES the amount of smoke inhaled from a single cigarette.
• Hookah smokers are at risk for the same kinds of diseases that are also caused by cigarette smoking.
• The charcoal used to burn the hookah tobacco increases health risks by producing high levels of carbon monoxide, heavy metals, and cancer-causing chemicals.
• Sharing a hookah may increase the risk of spreading tuberculosis and other diseases/illnesses such as herpes or hepatitis, flu and the common cold.

\[\textbf{What you can do to help you quit:}\]
• Know your triggers and set a quit date.
• Don’t put yourself at risk by going to hookah bars or cafes.
• Educate yourself about the dangers of the hookah pipe.
• Try new stress management skills such as yoga, listen to music, get a massage or take a walk with a friend.

\[\textbf{Electronic Cigarette: Did you know?}\]
• The electronic cigarette is not proven to be a safe alternative to smoking.
• Testing by the Food & Drug Administration (FDA) found chemicals that can cause cancer and other toxic chemicals in electronic cigarette cartridges.
• Due to lack of regulation and inconsistent quality control the levels of nicotine and other chemicals in electronic cigarettes may be unreliable and different from package instructions.
Pipe Smoking: Did you know?
- Pipe smoking increases the risk of heart disease, chronic lung disease, and cancer of the mouth, lip, and throat.
- Although pipe smokers typically inhale less, their risk for lung cancer is several times higher than a non-smoker.
- Secondhand pipe smoke contains the same toxins and cancer-causing agents as cigarette smoke.
- Pipe smokers may have a harder time with emotional triggers when quitting such as, feelings of missing out on relaxation, or a loss of something to bring to your mouth.
- The tobacco in a pipe burns at a lower temperature and gives off more carbon monoxide (a deadly poisonous gas) than cigarette smoke.

What you can do to help you quit:
- Set a quit date and get to know your triggers.
- Have a plan of what you are going to do to help you deal with cravings and urges.
- Try other things to relax like go for a walk, listen to music, or get involved with a hobby.

American Spirit: Did you know?
- Many people are fooled into believing this tobacco is safer because it is organic and has no additives.
- The Santa Fe Natural Tobacco Company states that their tobacco is not safer than other tobacco – to quote them - “No additives in our tobacco does NOT mean a safer cigarette.” - Santa Fe Tobacco Company.
- American Spirit tobacco is not grown by Native Americans. The company that markets American Spirit is R.J. Reynolds, the world’s second largest tobacco company (after Philip Morris).
- American Spirit tobacco contains more nicotine per cigarette than other brands.

Rolling Your Own: Did you know?
- The belief that rolled cigarettes are “safer” has no truth to it. In fact they tend to be more dangerous because they are smoked without a filter.
- Self-rolled cigarettes may have a lower number of chemicals overall than cigarettes but they still contain thousands of chemicals, tar, nicotine and carbon monoxide.
- They also have higher levels of tar and nicotine than in packaged tobacco.
Where Can You Get More Help?

American Cancer Society, www.cancer.org (1-800-227-2345)

American Heart Association, www.americanheart.org (1-800-242-8721)

American Legacy Foundation, www.americanlegacy.org

American Lung Association, www.lungusa.org (1-866-784-8937)

BecomeanEX, www.becomeanex.org

Mayo Clinic Nicotine Dependence Center, www.mayoclinic.org/stop-smoking

Michigan Department of Community Health, www.michigan.gov/tobacco

Michigan Quit Line, 1-800-784-8669

National Cancer Institute, www.cancer.gov/cancertopics/smoking (1-877-44U-QUIT)

National Network of Tobacco Cessation Quitlines, www.smokefree.gov


QuitNet Online Smoking Cessation, www.quitnet.com

Quit Support, www.quitsmokingsupport.com

Tobacco Consultation Service, (734-998-6222) www.mhealthy.umich.edu/tobacco

Try to Stop, www.trytostop.org

U.S. Public Health Service, www.surgeongeneral.gov/tobacco (1-800-QUITNOW)
My Personal Quit Plan

My Motivations To Quit Using Tobacco:
1. 
2. 
3. 

Quit Aids and Medications I Will Use:

The Most Difficult Times After Quitting Tobacco Will Be:

Things I Can Do Other Than Use Tobacco:
Go for a walk, drink a glass of water. . .

People I Can Call For Support:
Family/Friends:

Co-workers:

Others:

1-800-QUIT-NOW (1-800-784-8669)
The University of Michigan is a Smoke-Free Environment

The University of Michigan health system and campuses are smoke-free environments, both indoors and outdoors. We ask that you not smoke on any U-M grounds, buildings or facilities. Thank you for helping to maintain our smoke-free environment during your visit. Your cooperation is appreciated. For more information on the smoke-free initiative please visit www.smokefree.umich.edu.

Tobacco Consultation Service

Track what you are smoking now. Place (1) card in your cigarette pack. Record each cigarette BEFORE you smoke. Notice how strongly you NEED to smoke and what your MOOD felt like during the urge. When you finish recording a pack, review your results. Do you see any patterns? Start thinking about how you will make it through those moments without cigarettes. Keep track for 2 packs by cutting out the above cards and tracking all 20 cigarettes (cigarettes 11-20 are printed on the back side).

Card 1

<table>
<thead>
<tr>
<th>#</th>
<th>Time</th>
<th>Need</th>
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Card 2

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<th>#</th>
<th>Time</th>
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The card below is a useful prompt as you quit tobacco. Before your quit date, take time to write down your reasons to quit and a few notes on your plan to stay quit. Keep this card close to you – in your wallet, purse, or pocket – and review it during difficult moments when you may want to use tobacco.

<table>
<thead>
<tr>
<th>My Motivators</th>
<th>REMEMBER: Tobacco cravings go away in 5-10 minutes WHETHER YOU USE TOBACCO OR NOT</th>
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</thead>
<tbody>
<tr>
<td>My Plan</td>
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<tr>
<td>Need more help? Call:</td>
<td>Have you tried the 4 D’s?</td>
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<tr>
<td>• A Buddy</td>
<td>Deep Breathe Drink Water Do Something Delay</td>
</tr>
<tr>
<td>• TCS @ 734-998-6222</td>
<td></td>
</tr>
<tr>
<td>• Michigan QuitLine @ 1-800-QUIT-NOW</td>
<td></td>
</tr>
</tbody>
</table>

The table shows a 20-day quit plan with columns for time, need, mood, and additional notes.