Congratulations!
You are Ready to Become Free from Tobacco!

Here are some tested techniques that have helped many succeed:

1. Learn about yourself. Make **Three lists**:
    a. **Why do you want to quit?** Your reasons, could be the smell, the burn holes, health reasons, what ever is real for you.

MY REASONS

1. _____
2. _____
3. _____
4. _____

    b. **Understand your Habit: Triggers-Action (in this case having a cigarette)-Reward = Why do you smoke?** This is to identify triggers-the simple things that spark the idea of a cigarette (eg driving, on the phone, after eating). Then what is the reward you have linked to this action (eg relaxation, fill the time, pleasure of putting something in your mouth, etc). One way to do this is to keep a piece of paper and a pencil on your cigarette pack and write down why every time you pull one out.

	MY TRIGGERS	ACTION	REWARD
1.	_____	→	_____
2.	_____	→	_____
3.	_____	→	_____
4.	_____	→	_____

    c. **Possible healthy replacement ACTIONS for your triggers that might bring the same reward.** (eg going for a walk, cinnamon toothpicks, deep breathing)

MY HEALTHY REPLACEMENTS (ACTIONS to put in the → above)

1. _____
2. _____
3. _____
4. _____

    d. **How to use lists.** Later when you want a cigarette, you will pullout your reasons why you want to quit and read it, then look at why you want a cigarette from your triggers (you may find that you have a new one) and the the reward you are seeking and find healthy replacements to get the same or similar reward. Then do a new activity. Quitting smoking means making changes in your routine!

2. Requirements: **Willingness**
    a. Willing to Learn New Skills (primarily stress management)
    b. Be willing to be uncomfortable (temporary).
    c. Willingness to make changes in your daily routine.
3. Think of this as a **process** (in a process all experiences are learning experiences and steps to your goal).
4. Use the **local resources:** 1-800-NO-BUTTS (662-8887) 1-800-45NOFUME (Spanish)
    a. American Lung Association 545-6720, 8 sessions over 7 weeks.
    b. Center for Wellbeing 575-6043

compiled by Ben Brown 4/2012

Help with Triggers

There are 4 Main Reasons People Smoke: **Habit, Emotions, Social, and Addiction**. If you understand these you can often better design your freedom from tobacco plan. Many people are a combination of more then one of these reasons.

1. It has become a **Habit** (almost all) – linked to the sense of pleasure or reward and/or linked to other activities. This includes the drive to put something in your mouth and to do something with your hands or something to fill the time.
    a. If this is you, you may have many triggers for picking up a cigarette. Common triggers are a cup of coffee, after a meal or hanging out with someone.
    b. The triggers and replacements list above will help to show you how to work with this part of your habit.
    c. Tips from other patients:
        - learn a musical instrument that uses breath: harmonica (can carry with them), flute, kazoo, etc.
        - Cut a straw to about the size of a cigarette and use that to breath.
        - find something to do with your hands (magic tricks, cards, coins, etc).
        - Find something to do with your mouth: cinnamon toothpicks.
        - be creative use your imagination.
    d. Switch the link in your mind to something awful or painful instead of pleasurable.
2. To Manage **Stress, Loneliness, Boredom, or other Emotions**
    a. If this is you, you may use a tobacco break like a 'time out' from the world, a way to escape the demands of work, relationship, family, 'the world'. You may have tried to quit and re-started due to a stressful situation.
    b. Handling stress or these other feelings takes practice. Start with healthy methods you may know and just not have been doing or use the stress management handout.
    c. Tips from other patients: many really like the breath counting methods. **In**-one-two-three; **out**-one-two-three.
3. **Social** (becoming less common, except in those with alcohol or in recovery)
    a. If this is you, you may be using alcohol or may be in recovery, you likely hang out with a crowd that smokes (like at AA meetings, outside of bars, or at smoking breaks at work, smoking with your partner, friends, etc).
    b. The hardest part of this is that you will have to make changes in your friends to succeed. It may be that this change in friends is only temporary. Many have inspired others to become free from tobacco as well.
    c. Tips from others: They can go to smoke free meetings, have a no smoking rule in the house, may have to give up alcohol too.
4. **Addiction to Nicotine and/or addictive personality**
    a. If this is you, you may crave tobacco first thing in the morning, you may have a cigarette before food, you may have trouble on long flights. If so I highly recommend one of the nicotine replacements as part of your quit smoking plan. (below)

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Pharmacologic Options for Support <u>for Smoking Cessation</u>

Q: Why Bother with medications, aren't counseling or classes enough?
A: The best results for becoming free from tobacco addiction are with both classes and nicotine replacement (and/or meds). In groups, you can get up to 10 times the success with counseling and with pharmacologic support, whether it is right for you or not is a personal decision.

My Favorites are wellbutrin, chantix, Tabex, Patch, Gum, and for some the Electronic or e-cigarette (I generally do not use the lozenge, inhaler, or nasal spray). Most have a 8-12 week stop time, but fine it's if you want to go a bit longer or shorter. Some studies have shown additional benefit from patches continued for 14 weeks.

1. If you are <u>very physically addicted to nicotine</u> (long term heavy smoker, first cigarette within a half hour of waking.)
    a. Wellbutrin or Chantix or Tabex (helps with cravings)
    and
    b. Patches (like methadone for smokers)
    And/or (yes I sometimes use all three)
    c. As needed acute craving nicotine replacement (gum or electronic cigarette). Patients who use this may start with a 14mg patch (not the 21mg) and add gum/e-cigarette as needed.
2. If you are <u>moderate addiction to nicotine</u> (1ppd low nicotine cigarettes or less and first cigarette after one hour of waking, no problem on long flights)
    a. Wellbutrin or Chantix or Tabex
    And/Or
    b. Patch or Gum or Electronic cigarette
3. If you are <u>minimal addiction to nicotine</u> (less then ½ ppd and want meds)
    a. Generally use either Wellbutrin, Chantix, or Tabex
    or
    b. Patch, Gum, or electronic cigarette

Patients that are private pay: The least expensive option I have found are Tabex (like an herbal Chantix. **<u>Tabex</u>** is available on-line and costs about $30 for the 25 day treatment course. Some patients also want to use the patch, gum, or electronic cigarette if you are a heavy nicotine user as above. Patients sometimes get a voucher for the patch if using 1-800-NOBUTTS call-in-program.

<u>How to Dose the Medications:</u>

1. **<u>Nicotine Replacement</u>** (for these options no prescription is needed unless using the voucher program)
    A. Patch (Nicoderm CQ, Nicotine Transdermal System)
    - >10Cigarettes a day
        - Step 1: 21 mg patch week 1 -> 6
        - Step 2: 14mg patch week 7 -> 8
        - Step 3: 7 mg patch week 9 -> 10 then stop
    - <10 Cigarettes a day
        - start at Step 2 and then go to step 3 then stop

B. Gum (Nicorette, Nicotine Gum)

- cigarette within ½ hour of waking (and >10 a day) consider starting with 4mg gum
- cigarette > ½ hour (or <10 cig a day) start with 2mg gum
- We recommend that you use a **chew and park method**: chew for a few seconds then tuck it away between your teeth and gums, wait a while then chew some more and then tuck it away again. If chewed like regular gum people often feel headaches and/or nausea.
- Dosing : use one piece of gum when you get a craving throughout the day. You will establish a stable range of pieces that you are needing a day after 4-7 days. Most people taper down the dose once or twice a week. To decrease you can either decrease amount of time chewed to 15 minutes (from 30 min) or decrease number of pieces chewed by one piece or add a non-nicotine gum in the mix .
- Most taper off of the gum over 10 – 12 weeks.

C. Electronic Cigarette (many brands, have patients check about refills pricing, not formally studied for smoking cessation, but many patient's have had good success.)

- use as needed for cravings like gum (described above).
- To cut down patients can either decrease the amount of times using or use a lower nicotine cartridge.
- Most taper off over 10-12 weeks.

2. **<u>Antidepressant-like meds</u>** (need a prescription)

A. Buproprion (Wellbutrin/Zyban)

- Best to start 2 or more weeks before quit date, can use for 8 to 14 weeks or longer.
- Use 150mg to 450mg a day. I usually start someone on Bupropion SR 150mg once a day for 4 days and then increase to twice a day.
- The SR is twice a day dosing and the regular is three times a day.

B. Nortriptyline similar efficacy to Buproprion, doubles quit rate (Cochrane review 2005) not FDA approved.

- 75-100mg a day (less expensive, but dry mouth common)

3. **Nicotine Receptor <u>Partial Agonist</u>**

A. Chantix

a. Start with 0.5mg in the morning for 3 days and then go up to twice a day for 4 days. Weeks 2 -12 increase the dose to 1mg twice a day.
b. Caution if you have a history of psychiatric issues (especially suicide), a cardiovascular condition, and also if you operate heavy equipment.

B. Tabex (Cytisine)

a. This is the herbal origin of Chantix and has been used in Europe for 40 years. Though it does not carry the cautions as above, I would still use with caution if any of the above issues present (Suicide history/CV risk)
b. You can purchase it on Amazon for approx $30 /100 tabs
c. How to take: The treatment proceeds according to the following scheme:
   - from the 1st to the 3rd day- 1 tablet every 2 hours (6 a day)
   - from the 4th to 12th day - 1 tablet every 2.5 hours (5 tablets daily);
   - from the 13th to 16th day - 1 tablet every 3 hours (4 tablets daily)
   - from the 21st to 25th day - 1-2 tablets daily

4. **Potentially useful while stopping:** drink lots of **water** for less constipation and take vitamin C and a B complex vitamin as those are often depleted by tobacco.

compiled by Ben Brown 4/2012