



Quit It! How to stop smoking -- forever

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It's time for that daunting, self-inflicted promise: the New Year's Resolution. The annual unwavering tradition urges us to "turn over a new leaf," "face the music" and "Do It Now!" But deep in the doubtful recesses of our psyches grumbles the question: "Can I really do it? Can I honestly quit that nasty smoking habit once and for all?"

Although nicotine is one of the most difficult addictions to kick, the medical community tells us that now, more than ever, it can be done. In the last decade several innovative, multi-linear approaches have seen success with puffers wanting to stop. But before taking the plunge, you should know a few things.

First, there is a right time and a wrong time to try to kick the habit. "If someone is in the middle of a difficult divorce or had a recent death in the family, we recommend they wait a while before trying to quit," says [Sarah Levy](#), a public health professional with Smoking Cessation: Smokefree Program for Women. The program, started in 1995, ran 13 years with the Fairfield and Stratford Health Departments and was funded by the [Connecticut Department](#) of Health. For the last three years the program has been on hold for re-evaluation, but is expected to start again this spring.

The protocol for Levy and her staff of psychologists is to make sure it is the optimal time for applicants wanting to shake the habit. Former smoker [Pat Durner](#) remembers trying Smoking Cessation twice; the first time was a disaster.

"We failed miserably the first time," says Durner, 54, of herself and her partner, who was also trying to quit. "At the time we were trying to sell our house and living with my mother. We flunked the program, but were allowed to come back the next time the program was available. That time it clicked."

Durner, an office manager at a consulting firm in Fairfield, hasn't had a cigarette for 10 years. "It was the hardest thing I've ever done. While going through it, I was convinced I would never last and I would never smile again."

But for some, the time to quit may never be "right" and a stronger crutch is needed. Enter heavy duty meds such as Chantix (varenicline), which partially blocks the brain receptor sites from the nicotine pleasure jolt. Popping two of these pills a day means that when you light up you don't get that nicotine rush. It also eases nicotine withdrawal by curbing cravings for tobacco after quitting, and makes cigarettes taste bad while trying to quit. There's also Zyban (bupropion), an anti-depressant that reduces tobacco cravings and withdrawal symptoms. Both medications require a doctor's prescription.

"Chantix is not a magic bullet," says [Gretchen May-Fendo](#), the outpatient pulmonary coordinator at [Bridgeport Hospital](#) and facilitator in the hospital's 10-year old Quit Smart program. May-Fendo, a former smoker for 20 years, sees the benefit in nicotine replacements, such as patches, inhalers, lozenges and gum. "The patch provides a steady level of nicotine so you don't get as much of that instant hit from cigarettes. The biggest reason to get off cigarettes is because of illnesses caused by the chemicals in tobacco. If we get you to stop inhaling tobacco, that is the first step."

The Quit Smart program traditionally runs for four weeks in January -- timed intentionally for those brandishing their quit-smoking resolutions. May-Fendo says the success rate has been greater than 50 percent mainly because of the "warm chicken quitting" approach as opposed to "cold turkey."

"In the first two weeks we have people dose down on their nicotine by switching to brands with less nicotine. We try to get people to use cigarettes they don't like because they will have a tendency to smoke less the night before they quit."

No matter what the program, lack of commitment is the biggest challenge, according to May-Fendo. "You have to be able to say to yourself with conviction 'I'm going to be an ex-smoker.'"

That commitment means really changing the way you think, or behavior modification. The [Duke Center for Nicotine and Smoking Cessation Research](#) says nicotine addiction involves changes in genes, neurotransmission and the wiring of circuits in the brain. [Jill Bull](#), manager of addiction recovery at [Greenwich Hospital](#), says different coping skills can help change your behavior.

"If your normal morning routine is having coffee and a cigarette at the kitchen table, we suggest you have tea or some other beverage so there's no association with smoking. Try sitting someplace else -- if you usually sit on the right, sit on the left."

Craving cigarettes typically lasts up to about three minutes. Any way you look at it, if you light up, the craving goes away. If you don't light up, it still goes away. Bull suggests intoning a positive affirmation: "I can get through this."

Sidestepping the horror stories of dreaded diseases is another popular approach. "We don't focus on all the terrible things that happen if you continue to smoke -- women already know about that and feel guilty -- something we don't need to reinforce," Levy says. "The approach is more smoking cessation from the inside out."

Getting "inside" means a psychological look at what makes us smoke in the first place. Small, intimate group therapy sessions are a safe place to expose those tender vulnerabilities, a place where a host of problems are unveiled.

"We had one woman who didn't realize how angry she was at her husband who always controlled the TV remote," recalls Levy. "When she quit, she realized that it wasn't OK and she needed to deal with it. There's a lot of that kind of change."

Acupuncture and hypnosis also can help kill a puffer's cravings. Acupuncture helps break the cycle of compulsive thoughts and behaviors, while hypnosis induces a deep state of relaxation, laying out the groundwork for healthier behavior patterns.

Then there's the trendy but controversial e-cigarette, a look-like, feel-like placebo. The electronic cigarette is made up of a cartridge, an atomization chamber, a smart chip controller and a replaceable lithium battery. Instead of inhaling harsh tobacco, the smoker inhales automated water vapor. To date, e-cigarettes are not FDA approved.

If the New Year is the right time for you to stop smoking, remember: It's never too late to quit. Levy recalls treating a woman in her 70s who smoked her entire adult life. "When she finally stopped it gave her a sense of confidence. If she could do this, she could do all kinds of things."HL

5 Reasons to Quit Smoking

- **Heart Disease.** Coronary heart disease is the leading cause of death in the U.S., and the leading cause of death from smoking. Toxins in cigarette smoke cause plaque to form in the arteries, which leads to atherosclerosis, or hardening of the arteries.
- **Stroke.** The U.S. Department of Health says strokes are the third leading cause of death in the United States, killing upwards of 150,000 people each year. For smokers, the risk of stroke is nearly 2 1/2 times that of nonsmokers.
- **Lung Cancer.** The American Cancer Society estimates that there will be 219,440 new cases of lung cancer annually in the United States, and about 159,390 people die each year from the disease.

- COPD (Chronic Obstructive Pulmonary Disease). Tobacco use is the number one cause of COPD (which includes chronic bronchitis and emphysema). Quitting smoking is the best way to halt further damage. It's estimated that as many as 10 million Americans suffer from COPD, with upwards of 14 million others who may have it but are undiagnosed. In the United States, it was the fourth leading cause of death in 2000 and projections place it as the third leading cause by the year 2020.

- Oral Cancer. Oral cancer, or mouth cancer, is part of a specific group of cancers called oral and head and neck cancer. It's estimated that 70 to 80 percent of all cases of OHNC are due to tobacco use and heavy alcohol consumption.

Tips for quitting

- Plan to quit when there are no major stresses in your life.
- Consider joining a smoking cessation program in your town.
- Ask yourself just how destructive tobacco is. What are your risks when you light up, day after day, year after year.
- Own that you are addicted to nicotine, a dangerous drug.
- Think of the kids: Secondhand smoke causes lung cancer in adults and greatly increases the risk of respiratory illnesses in children. About 38,000 deaths per year can be attributed to secondhand smoke.