

The Arthritis Newsletter: Winter 2015

Smoking: When It's Good to be a Quitter

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In the face of overwhelming evidence that smoking is a major contributor to cardiovascular disease, people continue to smoke cigarettes. The main reason for this is that tobacco is addictive and difficult to quit, though many who continue to smoke maintain that it is a relaxing act in a world full of stress. Whatever elaborate reasons or justifications people have for continuing to smoke, there is no doubt that quitting is a more than worthy goal; for arthritis patients, quitting will likely maintain and extend your years of healthy life.

The reasons for quitting smoking are about stopping or reversing the physical effects on your body. Smokers are more likely to suffer heart attacks and strokes due to the multiple chemical effects of smoking on the circulatory system. Dangerous plaques can build up in the arteries, increasing the potential for blockages, leading to heart attacks or strokes. Respiratory risks include lung cancer and chronic obstructive pulmonary disease, both of which are often fatal. There is also an increased risk of osteoporosis, which among older patients can lead to serious bone fractures. Overall, the adverse effects of smoking on someone with arthritis are extreme and severe, and only get worse the longer you smoke.

There are three common ways to stop smoking: cold turkey [abrupt cessation], using nicotine replacement or using prescription medication. Cold turkey or simply stopping and never smoking again, is rare because it is so difficult. If quitting cold turkey were easy, there wouldn't be hundreds of stop smoking websites or strategies. If you are one who can be successful stopping in this way, good on you, but few are successful with this method and other ways are necessary.

Nicotine replacement therapies work on the principle that your body still wants nicotine but without the scores of other chemicals present in tobacco smoke. Replacements include nicotine gum or lozenges, the nicotine patch and nicotine inhalers. The theory is that by reducing the amount of nicotine taken into the body, eventually the dependency will reduce to zero. This sounds good in theory, but it really doesn't solve the problem because it doesn't necessarily eliminate dependency on nicotine.

There are at least two medications that are commonly prescribed for smoking cessation: Bupropion (Zyban or Wellbutrin) and Champix (Chantix in the USA). Bupropion is an anti-depressant that also is a stop smoking aid. It works by chemically blocking the urge to smoke, and while many have been successful in stopping smoking, there are potential side effects to consider before beginning the drug. Champix works by eliminating both the craving for tobacco and whatever pleasurable affects that smoking provides. Again, there are potentially serious side effects with Champix, so make sure to be fully informed before trying it.

For those serious about quitting, and you have to be fully committed to stopping or else you won't, there are many, many websites with good information and support.

- www.smokershelpline.ca
- www.quitnow.ca
- <http://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/what-we-cover/drug-coverage/bc-smoking-cessation-program>

In the end, you have to understand the risks to your health caused by smoking, the potential benefits to stopping and the many supports that exist to help you quit. Quitting smoking isn't easy, but for your cardiovascular health, it is the greatest gift you can give yourself.