



Sue Ann Says: You *Can* Quit Smoking This Year

I know firsthand how hard it is to quit smoking. I smoked up to three packs a day for more than 10 years. It took tumbling down the stairs in my haste to get a cigarette before I could quit. As I hit each step, I promised God I'd quit smoking if I survived the fall. I came away with only a few bruises. God kept his promise, and I kept mine. I have been smoke-free for more than 20 years.

You don't have to topple down the stairs to successfully stop smoking. Doug Jorenby, PhD, clinical director at the UW Center for Tobacco Research and Intervention, told me that new medicines are now make quitting easier – but he emphasized that these treatments still require commitment.

“Quitting smoking is not just going to magically happen,” he said. “Once smokers make the decision to get cigarettes out of their life, they need to back it up with treatments – medicine and counseling – that we know are effective.”

Nicotine patches, gum, throat lozenges and inhalers have been in the market for a long time and have also shown good results. But Dr. Jorenby told me that some research has shown the effectiveness of these methods, known as nicotine replacement therapies, may decrease over time.

Laser treatments are currently hitting the market and showing success for quitting as well, but the newest drug is varenicline, marketed as Chantix™. Released last summer, this prescription drug has shown remarkable results thus far when combined with counseling and other behavioral changes, Dr. Jorenby said.

Here's how it works: Whether we smoke or not, we all have receptors for nicotine in our brain. When nicotine hits these receptors, it triggers a short-term feeling of pleasure. That's why nicotine is so addictive. When a smoker's body has been accustomed to that “high” and she is no longer getting it, she often feels withdrawn, becomes anxious and reaches for another cigarette.

Smokers begin taking Chantix one week before they quit smoking. The medication stimulates the nicotine receptors less than nicotine itself, but also blocks receptor sites, so smokers get less pleasure from a cigarette. This helps reduce cravings. And because the

nicotine receptor is getting some stimulation, it minimizes the withdrawal symptoms that lead to grabbing yet another “it’s only one” cigarette.

Dr. Jorenby mentioned many lifestyle choices that can help you quit smoking. He suggested drinking tea rather than coffee. Coffee is often associated with smoking a cigarette and can tempt a former smoker to light up. Also, a smoker’s body metabolizes caffeine much faster than that of a non-smoker. When you quit smoking, your three cup a day coffee habit can suddenly feel like six cups. “That caffeine overload makes people anxious and want a cigarette to calm down,” Dr. Jorenby explained.

He also recommended drinking plenty of water to help minimize the weight gain that can occur after you quit smoking. Water gives you a sense of fullness, so you are less likely to overeat. This is an especially important tip for women, who often begin smoking in their early 20s as a way to shed a few pounds. Drinking water also is a good way to keep your hands busy so you don’t reach for a cigarette.

Besides the newest medications and coping skills, Dr. Jorenby said that support from family and friends is the key to quit smoking for good, especially for women. What’s important is that you be honest with family and friends, telling them what will help you quit.

As you begin your journey to quit smoking, you may feel like you took a spill down the stairs. It is definitely not easy. I did it not only for myself, but for my family. As I see how dramatically my life has improved since I quit, I would not take back my promise for the world. I hope these tips help you on your path to quitting, because on the road to happiness it all begins with a healthy woman.

Yours in good health,

Sue Ann Thompson
Founder & President
Wisconsin Women’s Health Foundation

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