WHAT TO DO DURING A RELAPSE:

- Don’t let one slip ruin your quit streak. Throw out the rest of the pack to get back on track right away.
- Consider exactly what the trigger was. Create a plan for how you will cope if the situation arises again in the future.
- Think critically about the steps you took before relapsing. What worked? What didn’t work? What would make your next quit effort more successful?

RESOURCES:

Free Health Education Sessions
If you’re thinking about quitting, we offer one-on-one tobacco cessation counseling sessions to help get you on your way! Call 617.927.6134 to set up an appointment.

For help to quit smoking other substances:
Contact our substance abuse treatment program 617.927.6202.

MA Smoker’s Helpline
800.879.8678, Spanish: 800.833.5256

Nicotine Anonymous
877.879.6422

American Lung Association
www.lung.org

BREAK THE HABIT:

- Instead of: Lighting up after a meal
  - Try: Snacking on a piece of fruit or a small square of chocolate. The sugar gives an instant mood boost.

- Instead of: Smoking while drinking
  - Try: Snacking on nuts or chips or chew on a straw to get the oral fixation. Try switching to non-alcoholic drinks.

- Instead of: Smoking socially, at work or with friends
  - Try: Letting your social circles know you’re trying to quit. Ask them not to smoke while you’re on a coffee break. Try socializing with more non-smokers.

START WITH A QUIT PLAN:

S = Set a quit date.
T = Tell family, friends, and co-workers that you plan to quit.
A = Anticipate and plan for the challenges you’ll face while quitting.
R = Remove cigarettes and other tobacco products from your home, car, and work.
T = Talk to your doctor about getting help to quit.
SMOKING IS SMOKING NO MATTER THE SUBSTANCE.

FAST FACTS ABOUT QUITTING:
- The single most important improvement a person can make to their health
- Save money—an average pack in MA costs $8.30
- Immune system will improve and you’ll get sick less often
- Fewer wrinkles make you look younger
- No more worries about bad breath or smelling like smoke
- Don’t get discouraged. It takes most smokers as many as 8 quit attempts before they are able to quit for good
- Using medication can double your chances of a successful quit effort

LGBT SMOKING FACTS:
- In Massachusetts alone, 28% of LGBT adults smoke, as compared to 15% of non-LGBT identified adults
- LGBT adolescents smoke at higher rates than non-LGBT adolescents, 45% of females and 35% of males.
- Factors like stress, higher rates of drug and alcohol use, and direct targeting by the tobacco industry are all causes for the higher rates in the LGBT community.

TIMELINE AFTER QUITTING:
- 20 minutes: heart rate drops to normal level
- 12 hours: The CO₂ level in blood drops to normal
- 2 weeks to 3 months: Risk of heart disease drops, lung function increases
- 1 to 9 months: Coughing and shortness of breath decreases
- 1 year: Added risk of coronary disease drops to half of a non-smoker’s
- 5 to 15 years: Risk of stroke equal to non-smokers. Risk of cancer of the mouth, throat, or esophagus is half that of a smoker’s.
- 10 years: Your risk of dying from lung cancer or risk of getting bladder cancer is half that of a smoker’s. Your risk of getting cervical cancer or cancer of the larynx, kidney or pancreas also decreases.
- 15 years: Risk of coronary disease is the same as a non-smoker’s

COMMON NICOTINE REPLACEMENT THERAPIES (NRTS):
- **Patches**
  - **Dosage:** Nicotrol: 15 mg, 10 mg, 5 mg. 1 patch every 16 hours
    Nicoderm CQ: 21 mg, 14 mg, 7 mg. 1 patch every 24 hours.
  - **How it works:** Patch provides steady, low-dose of nicotine to body. Three steps/dosage depending on quit timeline and level of cravings.
  - **Notes:** Can be combined with: gum, lozenge, nasal spray, inhaler, and Buproprion (Wellbutrin).
  - **Treatment timeline:** 8 weeks

- **Gum**
  - **Dosage:** Nicorette: 2 mg or 4 mg, 1 piece every 1-2 hours.
    Chew less gum as weeks progress
  - **How it works:** “Chew and park” every five minutes up to half an hour. Chew piece and park between upper gums and cheek. Membranes lining mouth will absorb nicotine.
  - **Notes:** Can be combined with: patch, nasal spray, inhaler, and Buproprion (Wellbutrin)
  - **Treatment timeline:** 8-12 weeks

- **Lozenge**
  - **Dosage:** Commit: 2 mg or 4 mg, 1 lozenge every 1-2 hours.
    Decrease frequency of lozenges as weeks progress
  - **How it works:** Hold lozenge between gum and cheek, and let it dissolve. Do not chew, suck, or swallow lozenge.
    Membranes lining mouth will absorb nicotine.
  - **Notes:** Can be combined with: patch, nasal spray, inhaler, and Buproprion (Wellbutrin)
  - **Treatment timeline:** 10-12 weeks

- **Lozenge**
  - **Dosage:** Varenicline (Chantix)
    - **How it works:** Blocks the effects of nicotine on the brain, helps lessen withdrawal symptoms.
    - **Notes:** Prescription required. Cannot be combined with other NRTs.
    - **Treatment timeline:** Up to 12 weeks

NON-NICOTINE MEDICATION
- **Buproprion (Wellbutrin)**
  - **Dosage:** Depends on individual and timeline
  - **How it works:** Reduces the urge to smoke, helps lessen withdrawal symptoms.
  - **Notes:** Prescription required. Can be combined with the patch.
  - **Treatment timeline:** 7-12 weeks