

TOBACCO

HISTORY

Tobacco is a plant that comes from North America. Ever since Columbus and other explorers came, the use of tobacco has spread around the world. Early explorers were amazed to see American Indians who "drank smoke" from rolls of dried leaves which they set on fire. The Indians who agreed to travel to Europe took their tobacco with them. Sailors on the ships tried smoking and found they liked it. Nicotine, the active ingredient in tobacco, acts as a mild stimulant (it gave them energy and made them alert). It also had the opposite effect and calmed them down when they were anxious. The sailors also learned another fact about tobacco; after they had smoked it for awhile, they had to keep smoking several times a day or get a miserable craving that only tobacco could satisfy (FBP, 1991).

Today, a lot of people do not know that tobacco use had a religious meaning to the American Indians. The tobacco they used had more nicotine than cigarette tobacco. The Indians would smoke to get a powerful high. This was believed to be a way to communicate with the spirit world (FBP, 1991).

Smoking was not the only way to get an effect from tobacco. It could also be chewed or snorted up the nose in the form of snuff. However it was taken, tobacco was still addicting. Because of the steady demand for tobacco, it was quite valuable when there was not much of it around. In England in the 1600's, it became so valuable that it was traded for an equal weight of silver. Because it was addictive, many rich people became poor trying to support their habit. At about the same time, tobacco became a major item that was exchanged for African slaves. The price was about 500 pounds of tobacco for a slave taken by other Africans during raids on enemy tribes (FBP, 1991). Because tobacco was so addictive, it was able to drive people's behavior, making them do things they normally would not do in order to get tobacco.

Because tobacco is quite addictive, attempts have been made over the years to limit or stop its use. For example, the Sultan of Turkey made smoking punishable by death in 1633. Even though many people were executed, the habit was so powerful that smoking continued. About the same time, the Russian czar ordered whipping or slitting of the nostrils for using tobacco, but it did not stop demand for tobacco. This steady addictive demand for tobacco has become true for every nation which allowed its people to smoke tobacco (FBP, 1991).

Growing tobacco brought farmers a lot of money in early America. Even today America exports tobacco around the world. In earlier days, most tobacco was smoked in pipes and cigars, inhaled as snuff, or chewed. Cigarettes were available, but they were not used much until this century (FBP, 1991).

The huge rise in cigarette use was due to three things. One was that people began to complain about chewing and the related spitting of tobacco juice. This spitting was blamed for the spreading of tuberculosis. Two other things which promoted the development and spread of cigarettes were the development of milder tobacco that could be inhaled deeper without much coughing, and the invention of machines that could mass produce cigarettes. American cigarettes became popular around the world partly because of wide spread sales during the two world wars (FBP, 1991).

Today, the tobacco industry is a major economic force. In 1970 there were 583 billion cigarettes made. That was enough for each American adult to have 11 cigarettes a day (FBP, 1991). In

1985, the cigarette production rate was down to 575 billion cigarettes per year, or an average of nine cigarettes per day for every adult American (Carroll, 1989, p. 207). The percentage of Americans who smoke has dropped over the last 30 years, but it is still a large portion of the population. In 1955 some 54% of men smoked and 24% of women smoked. By 1965 nearly 30% of women were smoking, while the percentage of men smokers changed very little. About this time the U.S. Surgeon General told America about the dangers of cigarette smoking. This was not a popular move with the tobacco companies and they filed many lawsuits. However, the American public did hear the message. Since the Surgeon General took a stand against cigarettes, the percentage of smokers has steadily dropped. It appears that health education and a change in public attitude have been the main reasons for the decline in smoking. At present, about 30% of men and 24% of women smoke. Some others use snuff or chew tobacco. Many of these wish they could stop, but they find it very difficult (FBP, 1991).

Study Questions

- 1. Where did tobacco come from?**
- 2. What did the American Indians use tobacco for?**
- 3. How much did slave traders pay for one African slave?**
- 4. What three things caused the huge rise in cigarette use?**
- 5. In a 1985 study, how many cigarettes per day per adult American were produced?**
- 6. At present, about _____ of men and _____ of women smoke.**

LEGAL STATUS

Because it has been such a big farm product for so long and earning millions in taxes and income for farmers, tobacco has had good treatment under the law. This is despite its addictive and dangerous nature. Tobacco was one of the major reasons for the early settlement of America. Tobacco growing was encouraged in most of the original colonies. To this day, the government has programs to make sure the tobacco growers have a steady income. Tobacco products are heavily taxed, which is a source of revenue. Tobacco is also a major export item to other countries. In these ways, the tobacco industry benefits our nation (FBP, 1991).

However, recent medical research shows that the costs to our country are much more than the benefits. The cost of individual addiction and health problems have been behind laws banning the sale of tobacco. By 1921, the year after alcohol was banned, 14 states had laws outlawing tobacco. The drug was so addictive that many people continued to smoke anyway. It was too hard to enforce the ban. By 1927, all of the state laws banning smoking were removed. Almost all states have laws against selling tobacco to minors, but most smokers started in their teenage years. In fact 60% of smokers started smoking by the age of 14. An anti-smoking group went to stores around the country and found that 70% of the stores sold cigarettes to kids under 14. One of the

reasons for teenage smoking is that tobacco is so easy for kids to buy. There are many reasons teenagers smoke. Some of these are peer pressure, wanting to seem adult, and much advertising aimed at young adults by cigarette companies (FBP, 1991). We will explore these reasons in more detail later.

Starting in 1966, each cigarette package had to have a health warning printed on it. Television and radio advertising of tobacco was banned in 1970. This had little effect on the percentage of smokers, but may have reduced the increase that might have occurred if TV and radio ads were permitted. It should be noted that billboard, newspaper, magazine, and sports-related advertising are still used. Most of this advertising is targeted at young people and uses attractive athletic models with white teeth. These advertisements of course do not show the truth. Tobacco use leads to stained teeth, shortness of breath, a bad smoky smell that others usually do not like, and more skin wrinkles (FBP, 1991).

A 1978 Surgeon General's report blamed cigarettes for 325,000 premature (early) deaths each year. In that same year, 54 million Americans smoked 615 billion cigarettes. In 1988 the Surgeon General told the public that nicotine is as addicting, if not more so, than cocaine and heroin. The most recent (1989) numbers put out by the Surgeon General blamed tobacco for 395,000 deaths each year. But even with that, tobacco companies have not lost a court case in which cigarettes were blamed for a health problem. The tobacco companies have won some 200 legal suits, claiming there is no proof that cancer is caused by cigarette smoking. These companies have a vested interest in keeping the public believing that smoking is not dangerous. The tobacco companies are continuing to maintain that there is no proof that cancer is caused by cigarettes and a new court case might change things in their favor. Anyone who started smoking after 1966, when the warning labels were added to tobacco packages, has less of a legal standing (chance in court) against the tobacco companies because he or she "took a known risk" (FBP, 1991).

The greatest change in legal standing has been in recent years. New laws against smoking in places where others must breathe the smoke have been passed. Many public and large private places have been divided into smoking and non-smoking areas. Smoking has been banned on many airline flights. Non-smokers have demanded the right to breathe clean air, and this appears to be the trend. In order to help smokers cope with being deprived of their drug for various amounts of time, a new chewing gum that has nicotine in it meets the needs of both the user and those who do not want to be affected; however, this gum is only available by prescription. It also has such high doses of nicotine that smokers can experience unpleasant side effects such as dizziness if the gum is used improperly. In the future, gum with a lower dose of nicotine might become available without a prescription. Those desiring nicotine could get it without offending others by smoking cigarettes around them. Legal nicotine gum would also reduce some of the medical problems caused by tobacco. However, selling nicotine over the counter is not now a legal way for the public to obtain nicotine (FBP, 1991).

A new product is on the market which has the same effect as nicotine gum. It is a patch which is worn on the skin, and is called a transdermal patch. The patch contains nicotine, and the nicotine is absorbed (passed) through the skin into the blood stream. It is used for those who wish to gradually cut down on the amount of nicotine that the body is getting. Like the nicotine gum, the patches are only sold with a doctor's prescription.

Our government's laws seem very strange. We have very strong laws against many dangerous drugs such as heroin and cocaine. Yet a product, tobacco, which contains the addictive drug, nicotine, and which is blamed for about 890 premature deaths a day by as reported by the Surgeon General, is allowed to be sold (FBP, 1991). In fact, every fourth death, or 25% of all deaths, in America is caused by cigarettes (Carroll, 1989, p. 206). Of all the common drugs such as alcohol, marijuana, cocaine, and barbiturates, nicotine causes the most deaths. Children's toys are

taken off of the market immediately if it is thought that they might pose a danger to even one child. Our laws are very strange, indeed.

Study Questions

- 1. Why do tobacco growers have a steady income?**
- 2. What percentage of smokers have started smoking by the age of 14?**
- 3. Starting in _____, each cigarette package had to have a health warning printed on it.**
- 4. In 1988, How many premature deaths were blamed on cigarette smoking by the Surgeon General?**
- 5. What has been the greatest change in legal standing in recent years regarding cigarette smoke?**
- 6. Which one of the common drugs in America causes the most deaths?**

PHYSICAL EFFECTS

The active ingredient in tobacco is the drug nicotine. It is poisonous in high enough doses and can be used as a natural insecticide (bug killer). Organic (natural) farmers often mix ground tobacco leaves in water, and then spray the water on plants they wish to protect. As a matter of fact, nicotine is so poisonous that if a cigar is placed in a glass of warm water and left overnight to soak, and if a person were to drink the water in the morning, there would be enough nicotine in the water to kill the person. In the wild, nicotine helps the tobacco plant keep harmful bugs away. In fact it is believed that most of the psychoactive (mind altering) chemicals found in plants are natural weapons within the plants to keep them from being eaten (FBP, 1991).

In humans nicotine is a stimulating (gives energy and alertness) chemical called an alkaloid that is addictive and is like cocaine in many ways. Tobacco users will increase their dose of nicotine to a level that is most comfortable for them. Then once addicted, the body tries to maintain a certain nicotine level in the blood. Smoking habits (how deeply a person puffs, how often they smoke, and how long the smoke is held) will change to keep the desired level of nicotine in the blood. Be careful when going to a different brand of cigarette that you do not start smoking more to make up for the missing nicotine (NIDA, 1985). If smokers switch to low nicotine cigarettes, they will likely smoke more cigarettes to get the same dose.

The first reaction of a new smoker is lightheadedness, dizziness, and some nausea. This can also happen to a regular smoker who gets an unusually high dose. But what they want is also there, that mild euphoria (good feeling) from the stimulant. Tobacco is classified as a stimulant like cocaine (FBP, 1991).

Tobacco causes the production of more saliva, especially if the tobacco is in the chewable form. Tobacco smoke paralyzes lung cilia, the tiny hairs that clean out the lungs. This prevents them from removing tars and other pollution from the lungs. The paralyzing of the cilia is dangerous because a one-pack-a-day smoker will take in a quart of tar a year. You can imagine what kind of

danger this poses to the lungs. During sleep when no smoking occurs, the cilia can be active, and the tars and other material are pushed toward the throat. This is why smokers tend to cough in the morning, but not as much later in the day (unless they exercise) (FBP, 1991). If a person keeps smoking over a long period of time, the cilia are destroyed and can not clean out the lungs (Carroll, 1989, p. 225-226). The lungs eventually start to disease once they cannot be cleaned out.

When tobacco burns, there are many chemicals produced that cause cancer, start tumors within the body, and damage cilia. Some of these are nitrosamines, vinyl chloride, formaldehyde, nitrogen oxides, hydrogen cyanide, ammonia, phenols, cresols, carboxylic acid, radioactive compounds, and metallic ions. One of the worst is carbon monoxide. The red blood cells link with this poisonous gas instead of with oxygen. This reduces the blood's ability to carry oxygen to all parts of the body (Carroll, 1989, p. 219).

Some of these materials and pollutants found in tobacco come from additions to the tobacco. These are artificial tobacco substitutes, tobacco stems, flavor extracts of tobacco and other plants, chemicals called "exogenous" enzymes (substances that can help certain chemical changes along), powdered cocoa flavoring, licorice, sugar, caramel, and freshness preserving chemicals known as glycols. The exact destructive nature of these additives is not known. No government agency has the authority to supervise tobacco making thus stopping these poisonous additives from getting into the tobacco. Some additives when they are burned become co-carcinogens: they increase the power of cancer-causing chemicals such as tobacco tars leading to cancer even quicker (Carroll, 1989, p. 209).

The senses of smell and taste are dulled when people smoke. When people stop smoking they often find they eat more, partly because of nervousness, but also because food tastes better (FBP, 1991).

The effect of smoking on the cardiovascular system (the heart and blood vessels) is an increase in the heart rate and the blood pressure due to a tightening of small blood vessels. Smokers tend to have poor circulation in the hands and feet and skin temperature is lower due to less blood flow. Because of less blood flow to the skin, smokers tend to develop more wrinkles than non-smokers (FBP, 1991).

One organ affected by blood pressure problems is the penis. Nine out of ten men who complain of failure to achieve or maintain an erection are smokers. They often find they can perform better sexually after they quit smoking.

The tightening of blood vessels due to smoking increases the risk of heart attack, as the blood supply to the heart muscle is also reduced. The increase of blood pressure due to smoking tobacco doubles or triples the risk of a stroke (clogging of the blood supply to parts of the brain) and of a brain hemorrhage (when a blood vessel bursts in the brain) (FBP, 1991).

Recent evidence shows that the nicotine and carbon monoxide in tobacco smoke work together to cause arteriosclerosis (hardening of the arteries). Atherosclerosis is a narrowing of the walls of the arteries caused by fatty deposits in the blood vessels. So while the nicotine speeds up the heart making it work harder, the carbon monoxide cuts down the oxygen in the blood that all organs in the body need to stay healthy. This reduction of oxygen and the clogging of the body's arteries starves the heart muscle for oxygen. A smoker is 70% more likely to die from heart disease than a non-smoker (Carroll, 1989, p. 223-224). This is quite an increase in death rate.

There are many other problems that smoking causes the body. Respiratory diseases such as pneumonia and chest colds are much more common among smokers. This is most likely due to the cilia not working properly. Remember, these are the little hairs in the lungs which clean out

the inside of the lungs. Smoking clogs them up and overwhelms them, not allowing them to keep the lungs clean. Smoking also causes chronic bronchitis which is a cough and shortness of breath due to irritated and swollen air passages. Pulmonary emphysema can also be caused by smoking and involves scar tissue that has taken the place of healthy lung cells in the air sacs called alveoli. This scar tissue can not expand and contract like healthy lung cells, and so breathing becomes difficult. Although bronchitis is reversible, pulmonary emphysema is not, and it can lead to disability and even death (FBP, 1991). Bronchitis and pulmonary emphysema together are referred to as chronic obstructive lung disease (C.O.L.D.). C.O.L.D. is a slow progressive interruption of the airflow within the lungs. Cigarette smoking is the number one cause of this condition. People who have C.O.L.D. as a result of smoking, often spend years gasping for breath, never moving more than a few feet from a bottle of oxygen (Carroll, 1989, p. 225). The Marlborough Cowboy who used to advertise cigarettes some years ago was one of these people. He was chained to an oxygen bottle for the the remainder of his life. He now has since died.

In the U.S. 125,000 people each year die from lung cancer. In any other circumstance, this would be called a disaster! Smoking is one of the most important causes of death due to cancer. If a person is a smoker, they are 10 times more likely to get lung cancer. In detailed autopsies, nearly every smoker had something called "carcinoma in situ." This is a change in the form of the cells in the lung. Carcinoma in situ comes before full blown cancer (Carroll, 1989, p. 225).

Cancers of the mouth, throat, and esophagus are most often caused by a constant irritant such as smoke. Cancer of the kidney, pancreas, and bladder are also related to smoking. Lung cancer is even more deadly as it is almost always fatal (FBP, 1991). Oral cancer (cancer of the mouth) shows up at many more times the rate in tobacco chewers than in non-chewers. Chewing tobacco also leads to leukoplakis, the white patches that develop on the inside of the mouth of smokeless tobacco users. These patches can develop into tumors. Chewing tobacco also leads to gum disease (Carroll, 1989, p. 227). It is obviously not very safe to just chew tobacco, aside from being unpleasant for others to watch.

We have learned about some of the diseases that can happen to us if we smoke. Though tobacco can not be proven to directly cause these diseases (as tobacco companies say), it certainly appears to be a major contributing factor. In summary, some of the health hazards of smoking are:

- *p 249* Increased risk of heart disease.
- *p 249* Increased risk of arterosclerosis.
- *p 249* Increased risk of lung cancer.
- *p 249* Increased risk of chronic bronchitis.
- *p 249* Increased risk of pulmonary emphysema
- *p 249* Increased risk of mouth cancer if you chew tobacco.

With all of these "increased risks of" illnesses, do you want to continue smoking?

Study Questions

1. **Nicotine is poisonous in high enough doses and can be used as**
a _____.
2. **List the three effects on a new smoker or a regular smoker who got too high a dose of nicotine.**
3. **What class of drug is nicotine classified as?**

4. What does tobacco smoke do to cilia?
5. How much tar does a pack-a-day smoker take in each year?
6. One of the worst (chemicals in tobacco smoke) is _____.
_____. The red blood cells link with this poisonous
gas instead of oxygen.
7. What government agency oversees tobacco smoking?
8. What does smoking do to heart beat rate and blood pressure?
9. Why do smokers have more wrinkles?
10. How can smoking affect a man's sex life?
11. What does the increase in blood pressure due to smoking do to
the risk of having a stroke?
12. Recent evidence shows that _____ and _____
_____ in tobacco smoke work together in causing
arteriosclerosis.
13. A smoker is _____ more likely to die of a heart attack
than a non-smoker.
14. Can pulmonary emphysema be reversed?
15. What do the initials C.O.L.D. stand for and what do they
mean?
16. Carcinoma in situ comes before what?
17. _____ show up at many times the rate in
tobacco chewers than in non-chewers.
18. List some of the health hazards due to smoking.

SMOKING DANGERS DURING PREGNANCY

There is a strong danger to fetuses (unborn children) when pregnant women smoke or chew tobacco. Their babies suffer a higher rate of miscarriage, still birth, and premature birth. Their babies also have lower weights at birth. Because nicotine constricts (narrows) blood vessels, there could be a problem during pregnancy due to lower blood flow. Another problem during pregnancy is that of carbon monoxide found in cigarette smoke inhaled by the mother. This is a poison that prevents the normal carrying of oxygen by red blood cells. In a large dose, carbon monoxide can cause death, and at low doses it can kill sensitive brain cells (FBP, 1991).

After birth, some interesting things have been noted. From birth to about one month of age, some studies have shown that a baby born of a smoking mother may have increased tremors (shaking), have a poor response to sound, be very tense, and fidget (move around a lot) (FBP, 1991).

Some other studies have indicated that smoking during pregnancy may cause four-year olds to have decreased attention spans and poor responses on tests (Nicotine, 1991).

Study Questions

- 1. List four effects on fetuses due to their mother's smoking during pregnancy.**
- 2. List four effects on babies after birth due to their mother's smoking during pregnancy.**

TEENAGE SMOKING

As was mentioned earlier, there are many reasons a teenager will start to smoke. Teenagers are not really rebelling against their smoking parents, but they tend to follow older members of their family such a parent or an older brother or sister who are already smokers. If you are already a smoker and are telling your children not to smoke, they are much more likely to follow your example than listen to your words. Teenagers claim that they feel more "adult" and more important when they smoke. Smoking by teenagers may be their way of expressing that they are becoming adults. On the next page is a table which compares teenage smokers with nonsmokers. It illustrates some of the influences which may lead teenagers to smoke (Carroll, 1989, p. 212).

In Comparison with Nonsmokers, <u>Area of Influence</u> <u>Teen Smokers Are More Likely To:</u>	
Family intactness	- Live in a home with only one parent or where no parent is there
Parental influence	- Live in a home where one or both parents smoke
Sex of parental smoker	- Have a mother who smokes, more so than a father who smokes
Sibling influence	- Have an older brother or sister who smokes
Educational and Socioeconomic level	- Come from families in which neither parent attended college
Peer influence	- Have friends who smoke
Employment	- Have a job outside home, participates with adults at work
Educational aspiration	- Take other than college prep courses in high school
Psychoactive drug exper.	- Have had experience with other psychoactive substances that are abused
Intention for future behavior	- See themselves as being smokers five years in the future
Justification of smoking-effects	- Indicate that smoking has positive effects
Function of smoking	- Perceive smoking as a social behavior engaged in to be popular or to attract the opposite sex

(Carroll, 1989, p. 212)

Study Questions

1. Teenagers claim that they feel _____ and _____ when they smoke.

SOCIAL CONSEQUENCES

In addition to medical hazards, cigarette-caused fires is another major problem associated with smoking. In 1984, cigarette-caused fires killed 1,570 people and seriously injured another 7,000. Cigarettes caused about one-third of all residential (home) fires. It should be noted that alcohol is also involved in about half of these fires. Falling asleep with a lit cigarette is the usual cause (FBP, 1991).

Many smokers started in order to look "cool" or perhaps to seem grown up and mature. Today, smoking is more often than not seen as unattractive. The clothing and furniture of smokers tends to get burn holes, and smells of smoke. The smell often bothers others. It can cause arguments if you do not respect other people's right to clean air. Worse, a person who may be interested in you sexually can be turned off by yellow, stained teeth and the smelly breath of a smoker. It has been said that kissing a smoker is like licking a dirty ashtray (FBP, 1991).

Study Questions

- 1. In 1984, cigarette-related fires killed _____ people and seriously injured _____.**

ADDICTIVE POTENTIAL

Although nicotine produces a brief "high," this "high" is fairly mild. People trapped in the addiction to nicotine are not so much into it for the pleasure as to avoid the nasty withdrawal effects. Tobacco withdrawal effects include irritability, cravings (strong urges) to smoke, more waking up during sleep, increased eating, decreased heart rate, and more confusion. Studies of mental abilities during withdrawal show that the response speed of people regularly became worse within the first 24 hours of quitting. It improved a bit over nine days but did not return to normal during this time. After starting smoking again, response speed returned to normal levels. The craving and mental effects of quitting can last for weeks, even for months, and some people report cravings years after quitting smoking. A lot of men who have quit both heroin and tobacco have said that tobacco is the harder habit to break because the withdrawal symptoms last much longer (FBP, 1991).

Another part of the addiction is to the behavior of smoking and not just the nicotine. This is the same thing as a narcotics addict filling a needle with saline solution and injecting it because this behavior has been chained to injecting heroin. The habit of such things as lighting up, "taking a drag," holding a cigarette, are all something to do to combat boredom or reduce tension. Ending these habits and finding other things to do is part of the problem that smokers must solve when quitting (FBP, 1991).

Study Questions

- 1. The addiction to nicotine is not so much for the pleasure as to avoid _____.**
- 2. List six effects due to tobacco withdrawal.**
- 3. What do ex-heroin users say about quitting smoking as**

compared to quitting heroin and why?

4. Another part of the addiction is not to nicotine, but to the
_____.

FACTORS IN SMOKING BEHAVIOR

Smokers can be classified by one or more of the following factors which control their smoking behavior. The original motives that caused them to start smoking are replaced by powerful psychological and physical factors. The smoker may not realize that one or more of these factors are now controlling them and their smoking. Many of these factors have already been covered as a part of earlier discussions. Understanding these factors can help you to "kick the habit." They can be summarized as follows (Carroll, 1989, p. 213):

1. Smokers who need stimulation. This person "gets a lift" from smoking. Because nicotine is a stimulant, a smoker is temporarily perked up by it. The person may feel that it helps them to get going. They would probably need to start brisk walking or moderate exercise to help them break their urge to smoke (Carroll, 1989, p. 214).
2. Handling - Oral gratification. This person needs to hold, handle, or chew something. A cigarette helps to fill this need. He or she would need to chew gum or a toothpick to help satisfy this need. Possibly playing with a coin might help as well (Carroll, 1989, p. 214).
3. Pleasurable relaxation. Many smokers smoke for this reason. They get a sense of contentment, achievement, and satisfaction. To replace cigarettes, they may be able to use eating, social activities, and physical activities in moderation as replacements (Carroll, 1989, p. 214).
4. Crutch - tension relief. Smokers may use cigarettes to try to handle stress and anger. When they smoke, they feel more relaxed and comfortable. These people may be able to stop smoking if there are no current problems in their life. If problems come up, they are more likely to start smoking. The same kinds of substitutes mentioned in point three may also be useful to help this type of individual to stop smoking (Carroll, 1989, p. 218).
5. Craving caused by smoking or the psychological and physical addiction resulting from nicotine use. We have already studied about the addictive qualities of nicotine. We have seen the results of attempting to break the nicotine addiction: restlessness, irritability, confusion, and other symptoms are the results. These feelings come from physical changes in the body caused by the nicotine it has become used to, and the body reacts strongly to the nicotine's absence if the person tries to quit. As will be discussed in the section on quitting, the recommended way for this type of person to quit is to go "cold turkey" (Carroll, 1989, p. 219).
6. Smoking resulting from force of habit. This type of smoker is driven by habit or doing the same thing at the same time every day. Their first cigarette may be with their first cup of coffee or when they wake up. They smoke out of habit, not because they get satisfaction from smoking; they do it because they "always" have done it that way. To break the habit, the smoker needs to change the way cigarettes are smoked or

the circumstances under which they smoke. Sometimes before smoking, asking the question, "Do I really want this cigarette?" may help focus on the act of smoking itself (Carroll, 1989, p. 219).

Which one or more than one of the above factors influence you? The next section on quitting will describe several techniques which may help you to stop smoking.

Study Questions

- 1. List the six factors which may be unknowingly controlling a smoker.**

QUITTING

Quitting the tobacco addiction is not easy. Some people seem to just make up their minds to quit and never have a problem. However, most smokers have a more serious problem. Even if they do stop for long periods, they still experience cravings for cigarettes or tobacco for months or even years later. These cravings return especially after eating, when they are around other smokers, or in times of stress or boredom (FBP, 1991). One report says that these cravings get fewer and farther between with time. The first six months after quitting is the danger time. Cravings will last much longer than the actual withdrawal from the nicotine. Stress makes the entire withdrawal process even harder.

As is the case in quitting other drug habits, success in quitting smoking involves motivation, confidence, coping skills, and social support. There are a number of aids and programs that have been found useful by many ex-smokers. Some ways to quit by yourself include setting a target date to quit and building up your confidence that you can quit at that time. When that date arrives, throw away all your cigarettes and matches to make it harder to restart. Quitting along with a friend is often helpful, and pride and competition can become a motivator (adds drive). To manage stress, take up an exercise such as jogging or lifting weights. This will make you feel better and help your lungs clean out faster. Do not expect too much at once. Figure out how much money you save by not smoking, and after a while, use the money to buy yourself a treat for good behavior. Think of smoking as something disgusting and something to avoid. Make a list of reasons to quit such as health, increased energy, money, being attractive to others, setting an example, and feeling pride in proving your inner strength. If you start to slip, look at your list for support (FBP, 1991).

Quitting cold turkey has worked for many people. It is the method recommended by the American Cancer Society. Others find that cutting down first before quitting helps as well. Cutting down can be done by smoking only half a cigarette, changing brands, using a filter, inhaling less, setting a daily quota, or delaying each time you light up. Many have found that by cutting back to half a pack a day for at least a two week period, two good things happen. The first is that saying "no" to cigarettes becomes a habit. The second thing that happens is that withdrawal symptoms from half a pack a day are not as bad as from higher doses (FBP, 1991). For some people, use of nicotine gum or the transdermal patch may be the answer for them to gradually break their body's dependence on nicotine.

Other hints include putting a rubber band around your pack as a reminder to quit. You can also put your cigarettes in a hard-to-get spot. Some find that smoking with your other hand helps break the habit because your movements are more conscious and less habitual. Another way to make smoking more conscious is to keep a record of each time you light up, and what you are doing (FBP, 1991).

Because much of the tobacco habit has to do with the action or behavior involved with smoking, a person must find some substitute for these behaviors. You can chew sugarless gum or toothpicks, draw pictures, drink water, exercise, start new hobbies, or even drum your fingers (FBP, 1991). Find something else to do with your hands and keep your mouth occupied in other ways than with a cigarette.

Most people who quit will slip and start smoking again. If this happens to you, do not feel like a failure. Nicotine is a powerful addiction. It may take many attempts at quitting before you finally make it. Learn from your slip. Do not do the same thing that made you slip the last time, and resolve to quit again. But be careful to keep your slip from turning into full time smoking. Believe that you can succeed, millions of people have. (FBP, 1991).

Study Questions

- 1. At what three times might the craving (strong urge) for a cigarette return?**
- 2. The first ___ months after quitting is the danger time. Cravings will last much longer than the actual withdrawal from the nicotine.**
- 3. List four elements that are involved in the successful quitting of smoking?**
- 4. What might a list of reasons to quit smoking look like?**
- 5. What method of quitting smoking is recommended by the American cancer Society?**
- 6. What are two good things that happen when a person cuts back to only half a pack a day for two weeks before quitting completely.**
- 7. Why does smoking with your other hand help you break the smoking habit?**
- 8. What are some of the things that can be done to break the action of smoking?**
- 9. In stopping smoking, believe that you can _____.**

References:

Carroll, Charles R. (1989). Modern Society. Dubuque: Wm. Brown Pub.

Federal Bureau of Prisons Programs. (1991) Drug Education Lecture Series, Chapter 9; Tobacco.