

SMOKING CESSATION

DEATH IN OLD AGE IS INEVITABLE,

BUT DEATH BEFORE OLD AGE IS NOT

Sir Richard Peto, 2006



THE RISK IS BIG

- *ABOUT HALF OF SMOKERS ARE KILLED
- *THOSE KILLED IN MIDDLE AGE LOSE 10, 20, 30 OR MORE GODD YEARS

www.deathsfromsmoking.net



STOPPING SMOKING WORKS

- *EVEN IN EARLY MIDDLE AGE (40y)
 THOSE WHO STOP, AVOID MOST OF
 THEIR RISK OF BEING KILLED BY
 TOBACCO
- *STOPPING BEFORE MIDDLE AGE WORKS EVEN BETTER



IMMIDIATE BENEFITS

*WITHIN 20 - 30 MINUTES:

*THE BLOOD PRESURE AND HEART RATE DROP TO THE REST VALUES

*THE SKIN TEMPERATURE (LEGS)
RAISES BY 2° C



SHORT-TERM BENEFITS

- *WITHIN 6 8 HOURS
- **★COHb LEVELS WILL DROP TO THE**NORMAL VALUES (< 1%)</p>
- ***WITHIN 72 HOURS**
- *PULMONARY FUNCTIONS WILL IMPROVE (1sec forced expiration)



MIDDLE-TERM BENEFITS

- ***WITHIN 2 MONTHS**
- *MALE SPERM DAMAGES CAUSED BY SMOKING WILL BE REPAIRED
- *WITHIN THE 1st TRIMESTER
- ★THE RISK OF PREGNANCY PROBLEMS AND FETAL BODY POOR DEVELOPMENT WILL DECREASE



MIDDLE-TERM BENEFITS

- ***WITHIN 1st YEAR**
- *THE BLOOD LIPID PROFILE WILL BE IMPROVED,
- **★THE PARAMETERS OF HEMO-**COAGULATION WILL BE IMPROVED
- *THE RISK OF AC. CARDIAC ISCHEMY and STROKE WILL BE DROPPED



LONG-TERM BENEFITS

- *WITHIN 5 YEARS
- *THE RISK OF CVD DEATH WILL BE SIMILAR AS FOR NEVER-SMOKERS
- *THE RISK OF SMOKING-RELATED CANCERS WILL START THE DECREASED TRENDS

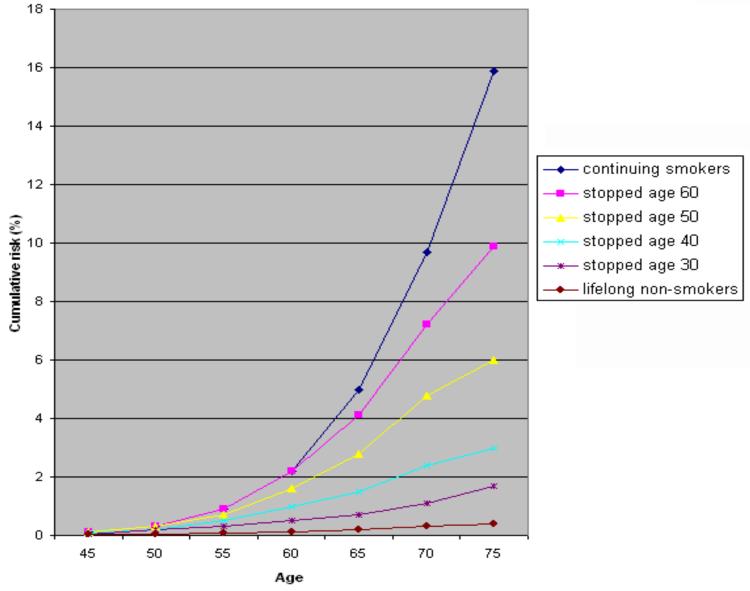


LONG-TERM BENEFITS

- ***WITHIN 10 20 YEARS**
- *THE RISKS OF SMOKING-RELATED CANCER'S DEATH WILL BE SUBSTANTIALLY DECREASED, ALMOST TO THE LEVELS FOR NEVER SMOKERS



Figure 3. Effects of stopping smoking at various ages on the cumulative risk (%) of death from lung cancer by age 75, calculated by combining results from the 1990 study with mortality rates for men in the UK in 1990





CONCLUSIONS

- *THE RISK IS BIG
- *STOPPING SMOKING WORKS:
 EFFECTIVE SUPPORT OF SMOKING
 CESSATION WILL CHANGE THE
 DEATH EPIDEMY WITHIN 10-20
 YEARS



SO...

*WHY SOME PEOPLE TAKE TOBACCO LEAVES, ROLL THEM IN PAPER, LIGH THEM and

* INHALE THE DANGEROUS SMOKE

***** ???



BECAUSE

- *SMOKING IS HIGHLY DEPENDENT DISEASE – Dg. F 17
- *BOTH PHARMACOLOGIC/PHYSICAL
- *AND BEHAVIORAL ADDICTION
- *DEVELOPED MOSTLY DURING CHILDHOOD



MECHANISMS OF ACTION

- *ACTIVATION OF "NICOTINIC"
 RECEPTORS
- *RELEASE OF NEUROTRANSMITTERS DOPAMINE, SEROTONINE
- *ACTIVATION OF SYMPATIC SYSTÉM and SUPRARENAL GLANS => ADRENALINE, NORADRENALINE, ACTH



SUBJECTIVE PERCEPTION

- *WELL BEING
- ***COPING THE STRESS**
- *SHORT-TIME INCREASING OF THE PERFORMANCE



RELEASE OF DOPAMINE

- *INITIATE MANY DAILY-LIFE EVENTS:
- SEX, FOOD,
- SUCCESS
- FRIENDLY ENVIRONMENT
- CHILDREN'S BEHAVIOR,
- -



SMOKERS ARE:

- *****AT THE BEGINNING:
- * UNHAPPY, UNSUCCESSFUL PEOPLE
- *LAZY PEOPLE

- *****LATER ON:
- * DEPENDENT PEOPLE



CRITERIA OF ADDICTION

- ***USING THE DRUG LONGER THAN EXPECTED**
- ***USING THE DRUG DESPITE OF**HEALTH PROBLEMS
- * THE MOST TIME A DAY IS SPENT BY EFFORT TO OBTAIN THE DRUG /or BY USING THE DRUG



CRITERIA - continue

- ***USER NEGLETS SOME ACTIVITIES**WHERE USING OF DRUG IS BANNED
- *SHORT-TERM ABSTINENCE RESULTS
 TO THE REPEATEDLY OCCURED
 RELAPSE



TOLERABILITY

- *THE SAME DOSE CAUSES LOWER EFFECTS =
- **★FOR THE SAME EFFECTS THE**INCREASED DOSE IS NECESSARY



WITHDRAWAL SYMPTOMS (WS)

- *EXCITABILITY, NERVOUS, STRESSED
- *ATTENTION DISABILITY
- *COGNITIVE PROBLEMS
- *DEPRESSION
- *ANXIETY



WITHDRAWAL SYMPTOMS

- *POORER WEIGHT CONTROL ->
 OVERWEIGHT
- *EXPECTORATION
- *CONSTIPATION



WS – TIMING

- *WITHIN 2 HOURS AFTER THE LAST CIGARETTE
- *WAVES WITH DIFFERENT FREQUENCY AND POWERTY
- *SEVERAL DAYS WEEKS MONTHS
 - YEARS



WS - CAUSES

- *LACK OF NICOTINE
- *LACK OF SOCIAL CONTACTS
- *CRAVING FOR SMOKING

- **★INCREASED FOOD INTAKE**
- *DECREASED BASAL METABOLISM



WITHDRAWAL SYMPTOMS

*ARE NOT HARMFUL FOR HEALTH

*ARE THE MANIFESTATION OF THE DRUG ELIMINATION

*ARE THE MOST FREQUENT CAUSE OF RELAPS



WHAT TO DO?

- *KEEPING SMOKERS' RIGHTS:
- TO BE INFORMED ABOUT HAZARD
- TO BE AVOIDED FROM RISK SITUATIONS
- TO BE MOTIVATED TO DECISSION
- TO BE SUPPORTED IN THEIR EFFORT TO STOP SMOKE



WHAT IS THE BEST WAY?

- * THE "5A" PROGRAMME:
- 1. ASK
- 2. ADVICE
- 3. ASSESS
- 4. ASSIST
- 5. ARRANGE FOLLOW-UP



1. ASK EVERY PATIENT:

- * DO YOU SMOKE?
- * HOW MUCH CIGARETTES DAILY?
- * HOW MANY YEARS?
- * AT WHICH AGE DID YOU START?
- * AT WHICH MORNING TIME DO YOU LIGH YOUR FIRST CIGARETTE?
- * WOULD YOU LIKE TO STOP?
- * HAVE YOU SOME EXPERIENCES WITH STOPPING?



1A: CONGRATULATION

- *TO EVERYBODY WHO:
- *HAS NEVER SMOKE,
- *HAS STOPPED TO SMOKE:
- ASK HIM/HER ABOUT PROBLEMS,
- SUPPORT HIS/HER EFFORT TO BE NON-SMOKER



2. ADVICE

- *TO EVERY SMOKER TO STOP, because
- *FAMILY HISTORY (HEREDITARY VULNERABILITY)
- *SMOKER'S HEALTH HISTORY
- ***CURRENT HEALTH STATUS**
- *SOCIAL IMAGE, MODEL ROLE
- *HIS/HER CHILDREN HEALTH



ADVICE IS ESSENTIAL

- *PEOPLE KNOW THE SMOKING HAZARD IN GENERAL
- *PEOPLE FEEL PERSONAL IMMUNITY AGAINST THE DAMAGES
- *SUCH FEELINGS ARE FALSE, ERROR AND VERY DANGEROUS



SUPPORT OF ADVICE

- ***USE THE BOOKLETS, LEAFLETS,**PICTURES, ...
- *FOR TARGET POPULATION OF SMOKERS (CHILDREN, TEENAGERS, PREGNANT WOMEN, WORKERS, MINORS, SENIORS...)
- *RECOMMEND THE SPECIAL OFFICE



3. ASSESS THE LEVEL OF DEPENDENCE

- *FAGERSTROM'S QUESTIONNAIRE:
- *6 QUESTIONS
- *MAXIMUM 10 ,,BAD POINTS"
- *4 LEVELS OF DEPENDENCE
- *LOST OF AUTONOMY

*- THINKING ABOUT TREATMENT



4. ASSIST WITH THE START

- *HELP TO CHOICE THE STRONGEST MOTIVE
- *INICIATE TO CHOICE A DAY "D"
- *EVALUATE THE RISK SITUATIONS: ,,TO KILL TIME", ,,PLEASURE", ,,STRESS"



ASSIST - continue

- *CHOICE THE REPLACEMENT IN THE RISK SITUALIONS: WHAT TO DO WITHOUT CIGARETTE?
- *THE DIFFICULT AVAILABILITY
- *CHANGE THE ATTITUDES:
 CIGARETTE IS NOT A FRIEND, BUT
 THE WORST ENEMY



MEDICAL SUPPORT - NRT

***CHEWING GUMS:**

- NICORETTE – 2, 4 mg: RULES FOR RIGHT CHEWING

*PATCHES:

- NICORETTE 16 hours 5, 10, 15 mg
- NIQUITINE 24 hours 7, 14, 21 mg



NRT - continue

*INHALATORS

***SUBLINGUAL TABLETS**

★(NASAL SPREY)



SAFETY AND HAZARD

- *DECREASED WITHDRAWAL SY.
- ***SLOW RELEASE OF NICOTINE**WITHOUT VASOCONSTRICTION
- *CROSS PLACENTAL BARRIERE
- *ANTENATAL ACTIVATION nAChRs -> NEUROTERRATOGENIC EFFECTS
- *MULTIPLE CARCINOGENICITY



NICOTIN IS A COMPLEETE CARCINOGEN

* PARTIALLY METABOLITES TO NNK => INITIATOR OF CARCINOGENICITY

*REVASCULARISATION OF CARCINOMA/METASTASES TISSUES => HIGHER PROGRESSION



BUPROPION

*ANTIDEPRESSIVE DRUGS: ZYBAN, WELLBUTRINE

***COMBINATION WITH NRT**



VARENICLINE - CHAMPIX

***AGONIST OF NICOTINE:**

*-> RELEASE OF DOPAMINE ->

*-> CIGARETTE IS NOT SOURCE OF PLEASURE

AFTER UNSUCCESSFUL ATTEMPT(s), ONE WEEK BEFORE STOPPING



CONTRAINDICATIONS

*PREGNANCY AND LACTATION – NO EXPERIENCES YET

*CHILDREN, ADOLESCENTS – NO EXPERIENCES YET



NEW RECOMMENDATION

- *TO EXCLUSE PERSONS WITH PSYCHIATRIC DISORDERS
- *NEUROPSYCHOLOGICAL
 OBSERVATION OF VARENICLINE
 USERS
- *CARDIOVASCULAR EVENTS



VACCINATION

*AFTER UNSUCCESSFUL ATTEMPTS: THE HIGH-MOLECULAR COMPLEX

* OF NICOTINE + ANTIBODIES = >

*IMPOSSIBILITY TO REACH THE BRAIN



FIRST RESULTS:

- *5 DOSES of 400 ug
- *IN ONE MONTH INTERVALS
- *BIVALENT VACCINE



NEXT RESEARCH

- ***OPTIMAL TIME-SCHEDULE**
- ***OPTIMAL DOSES** with the respect to
- *GENETIC POLYMORPHISM of CYP2A6
- *QUICK RELEASE OF NICOTIN
- *COMBINATION
- *NEW TREATMENT
- **★NEW** (safe sources of) ADDICTION



RELAPS

- *TO TRY "ONLY ONE" PUFF
- *COFEE, VINE
- *FRIENDS
- *SEEK THE MORE PLEASURE
- ***STRESS**



5. ARRANGE FOLOW-UP

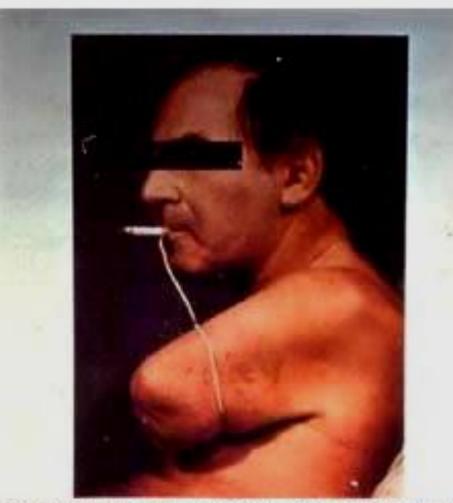
- *RELAPS MAY BE STRESSFUL FOR SMOKER
- *REPEATED ENHANCE OF SMOKER'S RECENT MOTIVATION TO STOP
- *BETTER ARRANGEMENT



CONCLUSION

- * THE RISK IS BIG
- * STOPPING SMOKING WORKS
- * THE EARLIER START OF STOPPING, =>
- * THE BETTER RESULTS
- FOR SMOKER
- FOR SMOKER'S RELATIVES
- FOR THE WHOLE SOCIETY
- * NOT FOR THE TOBACCO COMPANIES





Self mutilation by smoking—this patient had all four limbs amputated for a Buerger's type of arteritis. His cigarette holder was made out of a coat hanger by one of his friends on the ward.



MY RECOMMENDATION

- ***FOR NO SMOKERS:**
- *DO NOT START TO SMOKE
- *DO NOT ALLOW TO BE A VICTIM OF REGARDLESS SMOKERS



MY RECOMMENDATION

- * FOR SMOKERS:
- * DO RESPECT THE NO-SMOKERS' RIGHTS
 TO BREATHE THE CLEAN AIR !!!
- * DO CLEAN THE TOXIC WASTAGE (butts)

- * DO MAKE THE RIGHT DECISION (TO STOP SMOKE)
- * DO KEEP IT



BECAUSE ...

- * THE LIFE WITHOUT TOBACCO IS
- *MORE FREE
- *MORE MODERN
- *MORE CLEAR
- *****MORE AROMATIC
- *MORE SENSUOUS
- *MORE