

" People do not like smoking at all, but they cannot stop to do it."

Their disease has the international code

F 17

Who is a smoker (S)?

- Current regular S. at least 1 cigarette daily
- Occassional S. less than 1 cigarette daily
- Former S. does not smoke now, during lifelong smoked more than 100 cigarettes
- Never S. does not smoke now, during lifelong smoked less than 100 cigarettes
- Similar rules are for smoking of pipe, water pipe, cigar, e-cigarettes, heated-not burn tobacco

How to evaluate the dependence?

Fagerstrőm's questionnaire is the most often method (6 very simple questions, 10 penalty marks)

For a brief orientation: history of smoking

- How many cigarettes daily? < 15 > (light x heavy S.)
- At which age did you start to smoke daily?
- When do you light your first cigarette after waking-up?

< 30 min >

ATTENTION! Answers must include also using water pipes and e-cigarettes

Why to stop smoke?

- PHYSICIAN'S BASIC DUTY IS ADVICE and MOTIVATE TO STOPPING SMOKING
- * PERSONIFICATION THE PATIENT'S INDIVIDUAL RISK
- Health reasons: (hereditary vulnerability for serious diseases, current health status, better condition, breathing, less respirátory infections, better sexual functions – men, healthy pregnancy, better health for newborns and children)
- Beauty (white teeth, face without wringles, smell)
- Social reasons (partner, children, job, economy)

Stopping smoking works

- Within 20 min decreasing of HR and BP
- Within 8 hours CO elimination, decreasing COHb levels to 1%
- Within 72 hours better lung functions (FEV1)
- Within 1st y: risk of ac. CVD decreases signific.
- After 5 y: the CVD risk as for never S.
- After 10 -15y: oncological risk similar to never S.

Recommendations

- Make the reasons "FOR and ANTI"
- Choose Day D
- Establish strong personal motivation
- Adopt breathing methods, exercises
- Change stereotypical situations
- Seek for family/friends support
- Think and plan reward

Withdrawal symptoms

- craving
- Bad mood, depression, excitation, aggressivity, angry, anxiety
- Sleep disturbance, headache
- Increased appetite
- Problems with attention and copy with stress

Remember

- Craving disappers within 20 seconds
- Levels and frequency of withdrawal symptoms continually decrease
- Ask for support and help
- Smoking cannot remove your crisis, but enlarges it!

Drugs for support

- AFTER THE PSYCHOLOGICAL MOTIVATION
- * Nicotine replacement therapy: (chewing gums, sticks, spray, inhalator, subling. tablets)
- BUPROPION (Zyban, Welbutrin) antidepresant
- VARENIKLIN (Champix) nicotine agonist
- ALTERNATIVE (yoga, acupuncture, hypnosis) effects like placebo

E-cigarety, iQOS???

They are not drugs, but another forms of tobacco products.

Evaluation of effects

- Time of abstinence at least 1 year
- Only 2% of smokers are able to stop withouth help
- * Physician's participation is essential due to personification of the risk

Better behavioral treatment

- Needs psychosocial approach by
- Educated specialist
- Advisory offices, Centers

The healh professionals use 5A Programme

- Ask smoking history
- Advise STOP SMOKE, because....
- Assess the level of dependence, willing for change
- Assist motivation, preparation, drugs
- Arange follow up support, seek for relaps, restart the proces of cessation

Centers in Brno

- Clinic of respirátory dis. and TBC, FH
 Brno Bohunice
- Int. Cardiology FH Brno Bohunice
- 1st. Int. Cardiology FH FNUSA
- Masaryk's Oncology Institute Bakešův pavilon

When smoker does not stop...

Recommend to increase the intake of antioxidants and trace elements:

- vitamín E, C
- selen
- manganese
- zinc
- Extracts from Ginko biloba

For more informations:

- http://www.kurakovaplice.cz
- http://www.odvykani-koureni.cz
- http://www.dokurte.cz/download/doporuce
 ni_pro_lecbu_zavislosti_na_tabaku.pdf
- http://slzt.cz/odborna-doporuceni
- http://www.stop-koureni.cz