Stop smoking

How to quit for a healthy heart

SAVE
GET FIT & HEALTHY
FEEL BETTER

BEATING HEART DISEASE TOGETHER
Stopping smoking. It may not be easy – but it is possible!

If you’re a smoker, stopping smoking is the single most important step you can take to protect the health of your heart.

At the British Heart Foundation (BHF) we understand that changing a long-standing habit may not be easy. If you plan and prepare to stop smoking you’re much more likely to be successful. The information, practical tips and exercises in this booklet are designed to help you succeed in quitting for good.

In this guide we talk mostly about cigarettes, but the same advice applies to all forms of tobacco and smoking such as roll-ups, chewing tobacco, pipes, cigars, or shisha (water pipe) smoking.

We hope you find this guide useful, but please remember it does not replace the advice your nurse, doctor or pharmacist may give you.

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Why quit?

Tobacco smoke contains over 4,000 chemicals. Every time you smoke, these enter your lungs and go straight into your bloodstream and body tissues, increasing your risk of developing coronary heart disease, stroke and cancer.

About half of all regular smokers will eventually be killed by their habit. In the UK, 13,000 smokers die from heart disease each year. If you want to live a longer and healthier life, stopping smoking is the single most important thing you can do.

Fast fact
Passive smoking
By smoking around your family and friends you may be putting them at risk too. Research shows that exposure to second-hand smoke can make asthma and allergies worse, and in the long term can increase the risk of developing lung cancer and coronary heart disease.
How does smoking affect your heart?

The chemicals in tobacco smoke can damage the lining of your coronary arteries – the arteries that supply your heart muscle with oxygen-rich blood.

This damage leads to the build-up of fatty material in your arteries, which may block or narrow them. This is known as coronary heart disease.

In time, your arteries may become so narrow that they can’t deliver enough oxygen-rich blood to your heart muscle. This can cause angina – a pain or discomfort in your chest.

The chemicals in tobacco smoke also make the small particles in your blood – called platelets – more sticky, which means that the blood is more likely to form clots, which can block your arteries and cause a heart attack or a stroke. That’s one of the reasons why smokers have a greater risk of having a heart attack than non-smokers.

**Fast fact**

**Carbon monoxide**

Carbon monoxide is a poisonous gas found in tobacco smoke. When you breathe it in, it binds onto your red blood cells, reducing their ability to carry oxygen around your body and depriving your heart and body tissues of vital oxygen. Having carbon monoxide in your blood greatly increases your risk of developing heart disease.

To learn more about your heart and how it works, go to bhf.org.uk/knowyourheart
Smoking facts

1. Smokers die, on average, about ten years younger than non-smokers.
2. Smokers have nearly twice the risk of having a heart attack compared with people who have never smoked.
3. Stopping smoking after a heart attack reduces your risk of having another heart attack and improves your chances of surviving a heart attack.
4. Stopping smoking before surgery, especially before heart surgery, reduces the risk of serious complications.

To learn more about changes you can make to reduce your risk of coronary heart disease and stroke, order our booklet Keep your heart healthy (code HIS25) from bhf.org.uk/publications

Sean’s story

The heart attack really scared me. It was my kids who really gave me the motivation to quit, especially as we’d had another baby after I thought the medication I was on had made me infertile. My wife Nicola and I both realised it was really important not to set the kids a bad example by smoking, so she stopped too. I feel so much better now – I can taste food and smell things properly. It’s not always been easy, but I owe it to my kids to be around to see them grow up. We’ll never go back.
Are all types of smoking and tobacco use harmful?

Most people know that cigarette smoking is bad for your health, but many people believe that other types of smoking or tobacco use are ‘better for you’.

Let’s take a look at the facts.

Shisha smoking
Shisha smoking is harmful. Recent research shows that even after it has been passed through water, the smoke from a water pipe contains high levels of chemicals including carbon monoxide. In a single smoking session, a shisha smoker may inhale as much smoke as a cigarette smoker would inhale if they smoked 100 or more cigarettes.

Cannabis
Smoking cannabis has been linked to lung diseases including lung cancer. Smoking cannabis can increase your heart rate and blood pressure, which can be harmful for people with heart disease. If you mix cannabis with tobacco you also take on all the risks associated with smoking tobacco.

‘Light’, ‘mild’ or ‘low-tar’ cigarettes
It’s easy to think that ‘light’, mild’ or ‘low tar’ cigarettes are ‘better’ for you, but research has shown that the health risk from smoking them may be almost the same as for ordinary cigarettes, so they are still very bad for your health.

Roll-up cigarettes
Hand rolling tobacco is as bad for you as ordinary cigarettes. Smoking roll-up cigarettes can result in the same health risks as smoking commercially produced cigarettes - including cancer, stroke, heart and lung disease.

Electronic cigarettes
E-cigarettes are battery powered vaporisers that enable you to inhale nicotine vapour. Unlike tobacco smoke, nicotine vapour does not contain tar, carbon monoxide, or cancer-causing chemicals, but electronic cigarettes are not currently regulated and the long term effects on health are not fully known.

Chewing tobacco (dry or moist) and nasal snuff
Using smokeless tobacco increases your risk of mouth cancer, throat cancer and cancer of the oesophagus. Some research studies suggest that people who use smokeless tobacco have a higher risk of dying from cardiovascular diseases (such as coronary heart disease or stroke) than people who have never smoked.

Cigar/pipe smoking
Studies have shown that cigar and pipe smoking carry a major risk of smoking-related ill health. Compared with people who had never smoked, pipe/cigar smokers have a significantly higher risk of coronary heart disease, stroke and some types of cancer.
Good news

If you’ve been smoking for a while, you might feel like the damage has already been done. But however long you’ve been smoking for, it’s always worth giving up.

Take a look at how your body will benefit from stopping smoking.

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<tr>
<th>Why quit?</th>
<th>After...</th>
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<td>10 years</td>
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<td>15 years</td>
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Are you ready to quit?

If you’re considering quitting, it’s important that you’re ready to make the change.

Fill in the exercises on the next pages to help you think about why you want to stop and decide if you’re ready.

If you’d rather print these questions on a separate sheet, you can download a copy from bhf.org.uk/smoking

If your mind is made up and you’ve decided to quit, find out how to prepare on page 19.
Think about why you first started smoking.
I started smoking when I was years _____ old.
I’ve now been smoking for _____ years.
I started smoking...
☐ To look ‘cool’ or sophisticated
☐ To rebel
☐ To be accepted
☐ To show my independence
☐ Because it made me feel confident
☐ Because of curiosity
☐ Because my family or friends all smoke
Other reasons

Next, find out how much you have spent supporting your smoking habit. You might be in for a big surprise.
Currently I smoke _____ cigarettes a day.
I smoke _____ cigarettes a week
I smoke _____ cigarettes a year
I have probably smoked _____ cigarettes in my life.
I spend up to £ _____ a week on cigarettes.
Multiply this weekly amount by 52 to get the cost for a year.
In a year I will spend this £ _____ on tobacco
The total I’ve spent on tobacco in my lifetime is probably £ _____

If you stop smoking now, what else could you spend this money on?
For example: a family holiday, a car, or the mortgage.

Think about why you enjoy smoking and why you’d want to give up
What I enjoy about smoking:

Why I want to stop smoking:

My reason for being a smoker is:
Think about giving up smoking:
The people who will be really pleased with me are:

When I have stopped, I hope to feel:

It will be worth the effort because:

One thing I will no longer have to worry about is:

I will be proud of myself because:

Read through your answers
Are you ready to make a serious attempt to stop smoking?

☐ Yes ☐ No ☐ Maybe

If your answer is ‘Yes’
Congratulations and good luck!
I am thinking of stopping on ____ / ____ / ____

Take a look at page 23 to choose your quit method.

If your answer is ‘No’
Try to answer this question honestly:
What would have to happen, to make me want to stop smoking? For example: having a heart attack, cancer, no money saved, clothes smelling.

Go to page 4 and think about the effects of smoking.

If your answer is ‘Maybe’
It would be a good idea to talk through your situation with a stop-smoking advisor.

Take a look at our website wequit.co.uk for more advice and reasons to kick the habit.
Preparing to quit

If you’ve decided you’re ready to quit, congratulations!

The keys to quitting successfully are choosing a quit method that’s right for you and planning in advance how you’re going to deal with any ‘triggers’ or temptations to smoke.

Fazhul’s story

“I started smoking in my teens, when no-one knew it was bad for your health. When I tried to quit, nothing seemed to work, even though I felt guilty about exposing my family to my smoke and being a bad role model to the youngsters I worked with. About a year ago I signed up for NHS Smokefree, and with the support of my family and fellow quitters, I finally succeeded. I’m a changed man – and I’ve put the money I’ve saved towards founding an orphanage in Bangladesh. A lot of our community have died from smoking. I chose not to be one of them.”
Finding the right support

Getting the right support makes a difference. Research shows that getting professional help doubles your chance of quitting.

NHS Stop Smoking Services
These services offer free counselling and support to anyone who wants to quit smoking. You can go to group support sessions or, in some areas of the UK, you can have one-to-one support.

To find your nearest service, call the free NHS Smoking Helpline on 0800 434 6677 or visit www.smokefree.nhs.uk.

National stop smoking helplines and websites

England
www.smokefree.nhs.uk
Phone: 0800 022 4 332

Northern Ireland
www.spacetobreathe.org.uk
Phone: 0808 812 8008

Scotland
www.canstopsmoking.com
Phone: 0800 84 84 84

Wales
www.stopsmokingwales.com
Phone: 0800 085 2219

Other helplines and websites
These helplines can offer information and advice on stopping smoking, and support for people who are finding it hard to stop.

Quitline®
www.quit.org.uk
Phone: 0800 00 22 00

NHS Asian tobacco helpline
Open from 1pm to 9pm on Tuesdays
Urdu: 0800 169 0881
Punjabi: 0800 169 0882
Hindi: 0800 169 0883
Gujarati: 0800 169 0884
Bengali: 0800 169 0885

WeQuit
www.wequit.co.uk
Run by the British Heart Foundation, this website provides information and support for quitters, and hosts a community for like-minded people who have decided to stop smoking.
Choosing a quit method

There are many different ways to stop smoking. Some people try to cut down gradually before they stop, while other people stop immediately. Some people use medication, some use nicotine replacement therapy, and others rely on willpower.

It can seem daunting to choose from all the options, but research shows that you are twice as likely to give up if you use nicotine replacement therapy or medication, so it’s worth taking the time to find out more about your options.
Different ways of quitting

Cold turkey

The phrase ‘going cold turkey’ means suddenly stopping smoking. In other words, if you smoke a pack of cigarettes today, but from tomorrow you smoke none at all, you are ‘going cold turkey’. If you have tried this method in the past but are still smoking, don’t let this put you off trying again. Using professional support can help.

Cutting down

This means reducing the number of cigarettes you smoke over a period of time. If you want to try cutting down, it is important that you set yourself definite goals for the number of cigarettes you will cut down to, and set a quit date for the future. You’re much more likely to be successful if you use a nicotine replacement product while you’re cutting down.

Nicotine replacement therapy (NRT)

Nicotine is a substance that makes cigarettes addictive. NRT provides you with the nicotine you would have received from smoking, without using tobacco. Unlike tobacco smoke, NRT does not contain tar, carbon monoxide, or cancer-causing chemicals. It has been shown to double your chance of successfully stopping smoking.

Most people, including people with a history of heart disease, can use NRT products safely. However, if you have a heart problem or are pregnant you must ask your GP or cardiologist (heart specialist) about when you can start using NRT.

Turn over and find out more about the different types of nicotine replacement therapy available.
Different forms of nicotine replacement therapy

There are several forms of NRT available. These products are all available on prescription, and many types are also available without prescription from supermarkets and pharmacies.

Nicotine gum
Nicotine is absorbed through the lining of your mouth when you chew the gum. It comes in two different strengths, and you can chew up to 15 pieces a day.

Nicotine patches
These come in 16-hour or 24-hour patches and are generally used as a 12 week course. The patches are placed on the skin and give you a constant supply of nicotine while they are worn.

Microtabs
Microtabs dissolve under your tongue and the nicotine is absorbed through the lining of your mouth. You should not suck, chew or swallow them as this will reduce the amount of nicotine you get. You should use no more than 20 microtabs in any one day.

Nicotine nasal spray
This is the strongest form of NRT and is usually taken as a 12 week course. The nicotine dose gets absorbed fast, so this can be helpful for heavy smokers. You can use up to 2 doses an hour and the amount used is normally reduced over the 12 week course.

Nicotine lozenges
When you suck a lozenge, the nicotine is absorbed through the lining of your mouth. You must not crunch or chew it. You should use no more than 15 lozenges in one day.

Nicotine inhalator
This is a plastic device into which a nicotine cartridge is fitted. Sucking on the mouthpiece releases a nicotine vapour, which is absorbed through your mouth and throat. This can be helpful if you miss the hand-to-mouth action of smoking.
NRT – questions and answers

There are so many types of NRT products – how will I know which kind is right for me?

Different methods work best for different people. If you’re unsure which method is right for you, get support by calling one of the helplines or visit one of the websites on page 20. You can also make an appointment with a stop smoking counsellor or your GP to discuss your options, or simply pop down for a chat with your local pharmacist who will be able to talk through your options.

How does nicotine affect my body?

When nicotine enters your body it stimulates your brain to release dopamine – a substance that can affect your mood, appetite and other brain functions. It can also increase your blood pressure. Nicotine is very addictive and your body can quickly become dependent on the effects of nicotine, which is why if you stop smoking suddenly you may experience unpleasant withdrawal symptoms.

Aren’t NRT products as dangerous as smoking cigarettes?

Compared with smoking, NRT products are very safe. They don’t cause cancer or heart disease. Damage to the health of a smoker is caused by the tar, carbon monoxide, and chemical compounds found in cigarette smoke, and you get none of these if you use NRT. There is no evidence that NRT increases the risk of heart attacks.

Can I use NRT to cut down rather than to stop altogether?

Smokers who are not ready to stop completely can use nicotine gum, microtabs, lozenges, nasal spray, or the inhalator (but not nicotine patches) to help them cut down their cigarette consumption. The evidence shows that using NRT in this way can increase people’s confidence to stop smoking altogether.

Won’t using NRT just keep me craving nicotine?

No. The amount of nicotine that you get from NRT is just enough to beat the craving to smoke, but not enough to keep you addicted. By following the step-down plan that the manufacturers recommend, your body learns to reduce your nicotine intake until you no longer need it.

Is it OK to use two NRT products together?

Yes. You can use more than one form of NRT at the same time. For example, you might want to wear a nicotine patch to provide a steady delivery of nicotine, and combine this with an oral product, such as the nicotine gum, microtab, lozenge, or inhalator. Using a combination of two NRT products in this way can give relief from any urges or cravings that may arise during the day.
Medications

There are two medicines that do not contain nicotine and which have been licensed to help people stop smoking.

They are:
- **Bupropion** trade name *Zyban*, and
- **Varenicline** trade name *Champix*.

Using one of these medications can more than double your chance of stopping smoking.

**Bupropion (Zyban)**

Bupropion works directly on your brain to help reduce your cravings for cigarettes and the withdrawal symptoms. Bupropion is only available on prescription. It comes in tablet form and a full course lasts two months.

Before starting on bupropion, your doctor will need to check your full medical history. Bupropion is a safe medication when it is prescribed appropriately, but you should not take it if you suffer or have ever suffered from seizures (fits) or eating disorders.

As with any medicine, some people may get side effects while taking bupropion. The most common ones are difficulty sleeping, a dry mouth and headache. These side effects are usually mild and generally disappear within the first few weeks. Many of these effects can also be due to your body adjusting to being without nicotine.

**Varenicline (Champix)**

Varenicline is a prescription-only tablet. You usually take it as a 12-week course. You can’t use varenicline if you are pregnant or if you are under 18. If you are taking varenicline, you should not drive until you are sure that it does not affect your driving ability. The most common side effect is mild or moderate nausea, which usually subsides over time.

If you have suffered from mental illness in the past, you should discuss with your GP whether you should start taking this medication. Varenicline use has been linked to depression and suicidal thoughts. You should stop taking varenicline immediately if you or your family notice that you become agitated or depressed, or if there are changes in behaviour that concern you or your family.

**Complementary therapies**

Some people report benefiting from complementary therapies. However, the effectiveness of these remains unproven. The two most popular forms are hypnotherapy and acupuncture. If you decide to try complementary therapies, it is important to find a registered practitioner.

Contact one of the organisations below. They can both offer information on the services available and details of local practitioners.

**The British Acupuncture Council**
63 Jeddo Road, London, W12 9HQ
Phone: 020 8735 0400
www.acupuncture.org.uk

**The General Hypnotherapy Standards Council**
PO BOX 204, Lymington, SO41 6WP
Phone: 01590 683770
www.general-hypnotherapy-register.com

The British Heart Foundation will not accept responsibility for referrals or advice offered by either of these organisations. You are strongly advised to satisfy yourself about the competence, registration, insurance and background of any complementary therapists.
Diet and physical activity

Many people who want to stop smoking are concerned about the possibility of putting on weight.

Compared with the risk of continuing to smoke, gaining weight is a very minor health risk, so this concern should not stop you from giving up smoking.

When you’re smoking, the nicotine in your system can decrease your appetite and increase your metabolism – the rate your body turns food into energy. When you quit smoking this is no longer the case, so many people will put on some weight when they quit. Many people also find food tastes better after they quit, or they replace cigarettes with snacks and sweets.

To avoid putting on weight after you stop smoking, try to keep to your normal diet and avoid high-calorie or fried foods.

For information, tips and interactive tools to help you eat well and keep active, go to bhf.org.uk/prevention

Can physical activity help?

Stopping smoking can slow down your body’s metabolism, so it’s very important to do some form of regular physical activity. Physical activity has been shown to help reduce nicotine cravings and can reduce stress and low moods, as well as improving your fitness.

You don’t have to join a gym to get the benefits. Building physical activity such as brisk walking into your day can be a step in the right direction.

If you have a heart condition or high blood pressure, or if you are taking medication for these conditions, check with your doctor before you start any new activity.

Check out the BHF booklets *Put your heart into walking* (G12) and *Get active, stay active* (G26) for more details.
Your smoking patterns

Understanding when, where, and why you smoke will help you plan what you need to do differently during your first smoke-free week.

- Keep a record of each cigarette you smoke over the next few days using the exercise opposite.
- Write down each time you smoke and the reason why.
- Think about what you can do instead when you stop smoking.
- List all your ideas in the last column. When you’ve finished filling in your smoking record, you will have lots of information about your personal smoking habits and preferences.
- You’ll be able to see which cigarettes you’ll miss and, more importantly, which cigarettes you can do without.
- Perhaps you can start to cut out the ones which are least important to you. This will get you off to a great start.

Remember that you are more likely to succeed if you use nicotine replacement therapy – see page 26.

<table>
<thead>
<tr>
<th>The times when I smoke</th>
<th>How important is this cigarette on a scale of 1-5?</th>
<th>Instead of smoking I could:</th>
</tr>
</thead>
<tbody>
<tr>
<td>8AM - to help me get up and ready for the day ahead</td>
<td>5</td>
<td>LEAVE THE HOUSE FOR WORK EARLIER AND WALK SOME OF THE WAY.</td>
</tr>
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</table>

Score from 1 = Not very important, up to 5 = Essential

Does anything in your smoking record surprise you?

If you’d rather write your smoking patterns on a separate sheet or if you run out of space, you can download this sheet from bhf.org.uk/smoking
Learning from past experiences

Lots of people make more than one attempt to quit smoking before they eventually succeed. If you have tried to stop before, don’t let this put you off trying again.

If you’ve tried to quit before, use this exercise to help you remember what worked or didn’t work last time. This will help you learn from and build on your experiences.

<table>
<thead>
<tr>
<th>Times I’ve given up smoking before</th>
<th>How long I stayed stopped</th>
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<td>2.</td>
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<td>4.</td>
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<tr>
<td>5.</td>
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</tbody>
</table>

Thinking about the times you stopped in the past, how did you do it? Which strategies were the most successful? List your answers below.

<table>
<thead>
<tr>
<th>What helped me to stay stopped?</th>
<th>What things got in my way?</th>
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If you’d rather write your experiences on a separate sheet or if you run out of space, you can download this sheet from bhf.org.uk/smoking
How did you cope physically during the time that you were off tobacco?

__________________________________________________________________________________________

Does anything from your past experience of stopping smoking concern you about your next quit attempt? If so, what is it?

__________________________________________________________________________________________

Is stress one of your concerns?  □ Yes  □ No

Myth buster

**Smoking relieves stress**

Lots of people think tobacco helps them relax and cope with stress, but in fact this is not true. Most smokers are caught in a trap. Nicotine is highly addictive. When they inhale they get a ‘hit’ from the nicotine and feel a rush of adrenaline which makes them ‘feel good’. Unfortunately the ‘positive’ effects of nicotine only last a short while. When they wear off, the smoker can start to feel ‘withdrawal symptoms’ – such as irritation, and tension building up in their body – and they interpret these as stress. To reduce the build-up of these stressful feelings, a smoker will light up another cigarette. So round and round it goes, becoming a vicious circle.
When you stop smoking, it’s really important to have a clear plan of action. If you know what you are going to do from the beginning, you are less likely to get caught out.

In the last section, we talked about methods you can use to quit. Now let’s talk about when and how you’re going to do it.

Susan’s story

“It was one of the biggest decisions of my life, especially because two years after I’d stopped I was allowed to have a gastric bypass which would have been too risky if I was still smoking. I’ve lost eight stone and feeling healthier has helped me to exercise properly and lose more weight. I do more walking and climb hills I would never have managed before. We’ve even saved money on our home and life insurance now I’m a non-smoker!”
My quit date is: _____ / _____ / _____
I have chosen it because:

The people who are going to support me are:

My emergency ‘phone a friend’ numbers are:

I am going to tackle my withdrawal symptoms by:

If I get tempted to smoke I will distract myself by:

These are the rewards or treats I will give myself

After 1 day

After 1 week

After 1 month

After 3 months

At my 1 year anniversary

I will respond to the urge to smoke by telling myself:

**Fast fact**

**Saying NO to cigarettes**

During the first week you will be aware of your decision to stop smoking on almost an hour-by-hour basis. This takes willpower. It is really important to recognise that, even if you have ‘just one’ cigarette, this feeds the nicotine addiction and within a few hours you will be back in the same place, except that this time you will be smoking. You have set a goal to stop smoking. You can do it. In the days ahead it will get easier, but if you give in at this stage, you will have to go right back to the beginning and start again.
The stop-smoking contract

You can adapt this contract if you use a different form of smoking to cigarettes.

I (add name) have decided to stop smoking.

I am going to commit myself to the following actions

I will stop smoking on ____ / ____ / ____

☐ After this date, I will never accept another cigarette.

☐ I will tell my family, friends and work colleagues of my decision.

☐ After stopping, I will never buy another cigarette.

Signed

Witnessed by

Witnessed by

Witnessed by
Practical preparation

Here are some actions you can take in the days before your quit date. Tick them off as you do them.

The week before your quit date

☐ Plan to keep your quit day as stress-free as you can make it.

☐ Talk to an ex-smoker. Find out how they stopped. If they did it so can you.

☐ Talk to a friend or family member about stopping. Explain how important it is to you.

☐ Find a friend or relative who also wants to quit and support each other.

☐ Identify any situations that are likely to tempt you and think about how you can avoid them.

The day before your quit date

☐ Throw away any cigarettes, chewing tobacco or loose tobacco near you.

☐ Get rid of all ‘smoke reminders’ such as ashtrays and lighters.

☐ Remind friends and family that you are going to stop.

☐ Decide what you will do immediately if you light up or if you are tempted to light up.
Managing your first weeks

When you stop using tobacco, it’s likely that you’ll experience some strong physical, emotional and psychological changes. These are different for each person, but they are positive signals that your body is starting to repair itself and that the recovery process has begun.

Many smokers experience challenges when trying to quit. One of the main reasons why stopping smoking is difficult is because your body craves the nicotine it used to get from cigarettes.

It’s important to understand how to manage withdrawal symptoms. Otherwise, you may fall into the trap of thinking that returning to smoking is the only way to ‘fix’ the problem.

Fast fact
Double your chances
Using a stop-smoking treatment will greatly reduce your withdrawal symptoms and double your chance of successfully stopping smoking. For information on these treatments, see page 26.
Dealing with withdrawal symptoms

Here are some suggestions for simple things you can do to help you cope with common withdrawal symptoms.

Craving
An intense desire to smoke, which becomes less frequent over the first four weeks. The craving is mainly caused by the withdrawal of nicotine.

❤️ Take a few long, slow, deep breaths. Drink a glass of water and distract yourself by going for a walk or changing activities.

Remind yourself of the reasons why you want to quit, taking a look at the exercises on page 13.

Coughing
This is often worse in the beginning. It is caused by your body clearing out the tar from your lungs.

❤️ A warm drink can ease the cough. If your cough becomes serious, see your doctor.

Hunger
You may feel more hungry. This is due to changes in your metabolism, and the fact that food tastes better once you have stopped smoking.

❤️ Keep a ‘survival kit’ of fruit, healthy snacks or chewing gum with you.

Disturbed sleep
You may find that your normal sleeping pattern is disturbed. It should get back to normal within a month. The sleep disturbance is caused by the nicotine leaving your body.

❤️ Doing more physical activity may help you to sleep better. Try to get some exercise in the fresh air. Cut down on stimulants such as coffee, tea or cola drinks.

Dizziness
You may occasionally feel dizzy in the first few days after stopping smoking. This happens when more oxygen starts getting to your brain instead of carbon monoxide. This is a positive sign. Your body will soon adjust and the dizziness usually passes after a few days.

❤️ If you have a dizzy spell, sit down and drink some water.

Mood swings, inability to concentrate, or feeling irritable
These are emotional signs of nicotine withdrawal, and show that your body is missing the chemicals and stimulation of smoking.

❤️ Try to figure out some coping mechanisms that work for you. Warn your family and friends that you might get these withdrawal symptoms, and ask for their support – but don’t let them persuade you to have a cigarette!

Temptation may get the better of you. Turn over to find out ways you can combat the urge to smoke.
What if I get tempted to smoke?

Even with all the expert help and support on offer, there may be times when you feel really tempted to use tobacco again. These can be particularly bad just after you’ve given up.

Sometimes making a small change can make all the difference to how you feel about a situation.

COUNT TO TEN
THEN THINK AGAIN
Here are some suggestions for ways that you can defeat the urge to smoke. Tick the changes off as you make them.

<table>
<thead>
<tr>
<th>Day</th>
<th>1</th>
<th>2</th>
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**Change your usual routine**
- Keep yourself busy. Begin a project, or finish something you have been putting off.
- Choose not to stand in areas where smokers meet to have a smoke, either at work or when you are out socially.
- Get outside and take a walk in the fresh air

**Coping with the urge to smoke**
- Remember that each craving to smoke will pass in a few minutes.
- Go for a walk
- Use the NRT method you chose
- Try to sit still for a few moments and take slow breaths in and out.
- Talk about these feelings with someone you trust.

**Change the way you think about smoking**
- Recognise that smoking ‘just one’ cigarette will undo all your work.
- Take the process one day at a time. Don’t worry about tomorrow or next week. Today is happening now.
- Remind yourself why you decided to stop and the amazing benefits.
- Remember that you are choosing not to smoke. No-one is making you do anything.

If you’re struggling, have a think back to your reasons for stopping smoking on page 13.

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Answer the following questions honestly

My main reason for stopping smoking is:

What I would gain from starting smoking again:

What I need to say to myself if I ever consider smoking again:

What I plan to do if I consider smoking:

I can ask the following people to help me:

Remember that stopping smoking will:
- reduce your risk of developing coronary heart disease
- help you cope better when you need a sudden burst of energy, like running for a bus
- increase your chance of living a longer and healthier life.
Slipped up? Getting back on track

Life isn’t always fair and may not respect the fact that you’re in the process of doing something really important for yourself.

Based on past experience, you may accidentally respond to a situation with an old instinct and have an urge to smoke. If you follow this ‘gut reaction’ and give in, the ‘urge to smoke’ will come back within a couple of hours.

Learning any new skill can take practice. If you do light up and smoke, try following these steps:

1. Remind yourself why you wanted to stop.
   - Speak to someone you trust, to help you get back on track.
   - Change your surroundings to leave the situation.
   - Go outside for a brisk walk.
   - Throw away any remaining tobacco or cigarettes.

2. Think about the experience.
   - What happened that led up to this?
   - Where were you?
   - Who were you with?
   - What were you doing/feeling/thinking?

3. Think about how you felt when you smoked.
   - What was it like when you smoked again?
   - Did it match your expectations?
   - Did you feel better, or worse?
   - Did it make the problem go away?
   - Can you now find another way to cope?

4. Decide!
   Think of all your reasons for not smoking and imagine yourself handling this situation again, but this time without a cigarette. If the same situation arises again, how will you handle the problem?

5. Don’t feel guilty!
   Learn from the lapse and let it go. People make mistakes. Don’t let a mistake lead you to give up trying. Remember that you haven’t failed. You just need more time to succeed. You can do it!

6. Contact your stop-smoking adviser.
   Finally, think of three or more qualities about yourself that you expect to improve by stopping smoking. (For example, you will be able to see yourself as smoke-free, healthier and more in control of your life). Focus on how good it will feel to have managed the change.

If you feel yourself slipping, take a look at our website wequit.co.uk for more help and advice.
Achieving lasting success

As time passes it’s possible to forget the effort you put into stopping the smoking habit.

Breaking an addiction is something to be proud of. You really deserve lots of support and congratulations. If you can do this, doesn’t it make you wonder what else you can achieve?

This exercise is designed to help you take stock of where you are now and build on your success.

My effort to stop smoking was worthwhile because:


Since I stopped smoking my life has changed in the following ways:


I can now look forward to:


What does successfully stopping smoking say about me?


The qualities and strengths that have helped me stop smoking are:


If I can stop smoking, I should also be able to:


Resources from the British Heart Foundation (BHF)

The BHF is the nation’s heart charity, dedicated to saving lives through pioneering research, patient care, campaigning for change and by providing vital information.

We produce a wide range of resources to help you and your family and friends look after your heart health.

To order any of our heart health resources:
- Call the BHF Orderline on 0870 600 6566
- Email orderline@bhf.org.uk
- Visit bhf.org.uk/publications

You can also download many of our publications from our website bhf.org.uk

For information about all of our resources, ask for a copy of Our heart health catalogue (code G5).

Inspired to make other lifestyle changes?
Quitting smoking is only one part of keeping healthy to protect your heart. Being physically active, eating well and managing stress are all important too and we have resources available to help you. Order or download the below booklets or visit bhf.org.uk/prevention for more information and advice.

- Eating well (code G186)
- Get active, stay active (code G12)
- Put your heart into walking (code G26)
- Coping with stress (code G187)
- Cut down on salt (code G160)

Our resources and services are free of charge, but we rely on donations to continue our vital work. If you’d like to make a donation, please call our donation hotline on 0300 330 3322 or visit our website at bhf.org.uk/donate

Or, please complete the form at the end of this booklet and send it to us at the address on the back cover.

Heart Matters
Heart Matters is our free, personalised service to help you live with a healthy heart. Join Heart Matters today to access benefits including heart matters magazine, a Helpline and an online members’ area with recipes, articles and lifestyle tools. Register online at bhf.org.uk/heartmatters or call 0300 330 3300 (calls are charged at a similar cost to 01 or 02 numbers).
How you can help

As a charity we rely on the generosity of people like you to fund our vital work. Thousands of people with heart disease turn to us for help every year and even more will need us in the future. We want to be there for them.

There are many ways you can get involved and play a crucial role in our efforts to beat heart disease:

- Become a **volunteer** and help run our shops, support local events and fundraising or even campaign for the UK’s heart health – there’s something for everyone.

- **Take part** in one of our events – they’re a great way for you to have fun, get fit, and save lives. Choose from cycles, runs, walks and many more.

- Join our Heartstart initiative and **learn to save lives** with the skills of emergency life support. Over 2.6 million people already have.

- Give to your local BHF shop – it’s easy to **donate your unwanted items** to us and help us raise vital funds.

- Make a one-off **donation**, set up a direct debit, give in memory or leave a gift in your Will – there’s lots of ways to support us.

- Shop from the heart with our **online shop** – all profits from the BHF Shop help fund our life-saving work.

For more information visit [bhf.org.uk/youcanhelp](http://bhf.org.uk/youcanhelp) or call 020 7554 0000.

Thank you.
Help the BHF save more lives by supporting us with a donation today

Please accept my gift of either £10 [ ] £15 [ ] £20 [ ] Other [ ]
(Please make your cheque/postal order / CAF voucher payable to The British Heart Foundation.)

OR please debit the above sum from my:
[ ] AMEX [ ] CAF Card [ ] Master Card [ ] Visa/Delta
[ ] Maestro

Card No. [ ]
Valid from [ ]/ [ ]/ [ ] Expiry date [ ]/ [ ]/ [ ]
Issue no [ ] (security code) [ ] (Maestro only)

Signature [ ] Date [ ]/ [ ]/ [ ]

The British Heart Foundation is the nation’s heart charity, registered charity number 225971 (England and Wales) and SC039426 (Scotland).

Once completed, please return the whole of this form to:
Freepost RRZJ-LCHX-EKCR, British Heart Foundation, Greater London House, 180 Hampstead Road, London NW1 7AW.

If you do not wish to be contacted by post, please tick this box. (MP0074)
If you do not wish to hear from us by phone, please tick this box. (MP0075)
If you do not wish to be contacted by them, please tick this box. (MP0060)

GAt [ ] Yes, I am a UK taxpayer and would like the BHF to reclaim the tax on any of the donations I have made in the last four years and any future donations I may make.*
Date [ ]/ [ ]/ [ ]

GA2 [ ] No, I am a non-taxpayer.

* To qualify for Gift Aid, you must pay an amount of UK Income Tax and/or Capital Gains Tax at least equal to the amount that all the charities or Community Amateur Sports Clubs (CASCs) will reclaim on your gifts for that tax year (6 April one year to 5 April the next) and you understand that other taxes such as VAT and Council Tax do not qualify.

Are you a UK taxpayer? If you are a UK taxpayer please tick the first box so we can claim back up to 25p for every £1 you give at no extra cost to you.

We would like to keep in touch with you to let you know how your support has made a difference.
By supplying your email address you agree that the BHF may use this to contact you about our work.

We would welcome your comments to help us produce the best information for you. Why not let us know what you think? Contact us via our website bhf.org.uk/contact

Children’s resources
Do you want the kids in your family to be more active and eat healthier? Help them make some changes now by encouraging them to visit the following websites:

[ ] cbhf.net a website for 7-11 year olds
[ ] yheart.net and yoobot.co.uk websites for 12-19 year olds

We also produce free resources for parents, teachers and those who work with children to help them encourage young people to live a heart healthy lifestyle. Go to bhf.org.uk/teachers for more information, or call the BHF Orderline on 0870 600 6566.

Acknowledgements
The BHF would like to thank all who have given their time and support to develop this resource.

This publication has been printed on Revive 100, a recycled paper stock containing 100% recovered waste.
We are the nation’s heart charity, dedicated to saving lives through pioneering research, patient care, campaigning for change and by providing vital information. But we urgently need your help. We rely on your donations of time and money to continue our life-saving work. Because together we can beat heart disease.