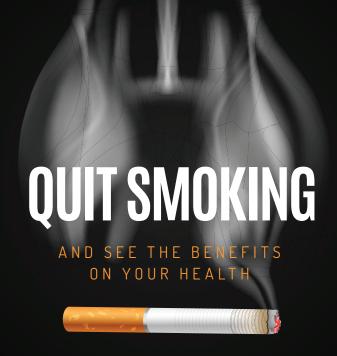


QUIT SMOKING

AND SEE THE BENEFITS ON YOUR HEALTH





YOU MAY REMEMBER THE DAYS WHEN SMOKING WAS PERMITTED ON AIRPLANES AND EVEN IN OPERATING ROOMS. OUR IGNORANCE OF THE DEVASTATING EFFECTS OF CIGARETTES AND SECOND-HAND SMOKE WAS DREADFUL.

In recent decades, the fight against smoking has spread to all levels of society and become a public health priority. Government bodies and organizations have taken steps to regulate tobacco marketing and sales and smoke-free areas and set up support programs for people who want to quit. The vast majority of smokers today know that smoking is harmful, but it can be really hard to stop.

If you're a smoker and you've picked up this guide, you've taken a big step in the right direction! This guide describes what's involved in quitting, the reasons it's so hard, the obstacles you'll face and tips for reaching your ultimate goal: becoming a non-smoker!

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HISTORY

Tobacco has been consumed in the Americas for hundreds of years. Indigenous peoples first used tobacco in rituals to communicate with spirits and relieve pain. After his journey to the Americas in 1492, Christopher Columbus introduced tobacco to Europe. Since then, tobacco use has spread around the world.

Cigarettes were first invented sometime in the 1830s. In the 20th century, big companies started multiplying and manufacturing cigarettes in industrial quantities. During the First and Second World Wars, manufacturers provided soldiers with free cigarettes as a means of mental escape.

With time, cigarettes became part of the lifestyle, a tool used to seduce or impress or integrate social groups, and a symbol of the transition to adulthood and independence. From the '50s to the '70s, marketing campaigns focused on the symbolism and imagery associated with smoking. They featured film stars, fictional characters, and famous figures like Marilyn Monroe, Lucky Luke, and John F. Kennedy, smiling with a cigarette in hand or between their lips. Some cigarette manufacturers even capitalized on public trust in doctors, recruiting them to vaunt the smoothness and flavour of a cigarette after a hard day's work.

Then we realized the effects of smoking. Unfortunately cigarette companies are still making a fortune at the expense of consumers and their health. Despite numerous lawsuits and billions of dollars paid in damages and interest, they continue to attract millions of consumers.

Today, the evidence is undeniable, and smoking is no longer cool or sexy. The fight against smoking has even become a public health priority.

STARTLINGNUMBERS

on May 31,
the World Health
Organization celebrates
World No Tobacco Day.
Here in Quebec,
the third week of
January is Quebec
Tobacco-free
Week.

An estimated 20% of Canadians still smoke regularly or occasionally. We've made great strides in recent years, thanks to the development of smoking-cessation medication, anti-smoking campaigns, increased taxes on tobacco products, and smoking bans in bars, restaurants, and many public places. Nevertheless there are still far too many smokers.

WANT TO SEE THE NUMBERS?

- There are about one billion smokers on the planet, and 80% of them live in low- and middle-income countries.
- It is estimated that one in two smokers will die from a smoking-related illness.
- Each day, **15 billion cigarettes** are sold around the world.



• Each day, **10 billion cigarettes** are thrown away outdoors—a real threat to the environment.

DID YOU KNOW that cigarette filters take more than 10 years to break down? Think about that before you throw your butt out the window!

- Smoking increases the risk of stroke six times for women and three times for men
- 82% of smokers start before age 18.
- Each year nearly 40,000 deaths are associated with smoking, making it the primary cause of avoidable death in Canada. That's one smoking-related death every 14 minutes.
- On average, smokers' lives are 10 years shorter than non-smokers'.

THAT'S A LOT OF NUMBERS! HERE ARE SOME MORE.

In concrete terms, smoking is responsible for:

- 85% of lung cancer cases
- 85% of COPD (chronic obstructive pulmonary disease) cases
- 30% of all cancers
- 30% of cardiovascular diseases

Smoking is also responsible for:

- Increased healthcare costs
- The introduction and enforcement of laws and regulations
- Lost productivity at work and at home
- Premature deaths
- Incapacity
- And so much more

Every cigarette you don't smoke adds around 10 minutes to your life.

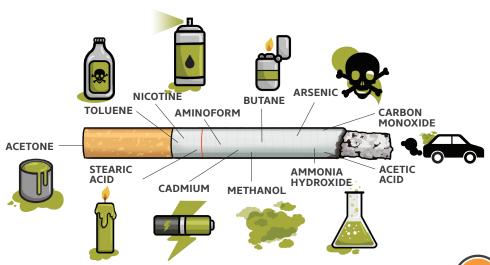
WHAT'S IN A CIGARETTE?

Tobacco products come in different forms. There are cigarettes, cigars, cigarillos (miniature cigars), smokeless tobacco (chewing), pipes, and water pipes (shisha or hookah). In theory, electronic or e-cigarettes sold in Canada don't contain nicotine. At the time of writing, e-cigarettes containing nicotine are illegal, and thus unregulated, in Canada (see page 29).

Nicotine, a naturally occurring substance in tobacco, is the cause of tobacco addiction

Nicotine is not carcinogenic in and of itself, but the toxic vapours and products generated by burning tobacco are a different story. Of the thousands of chemicals generated by tobacco, about 50 are thought to be carcinogenic. The smoke generated by this chemical reaction contains:

Chemicals generated from tobacco smoke



WHAT CAUSES ADDICTION?

Our body works through reward systems to satisfy needs like hunger, thirst, and sexual desire.

Our brains release endorphins naturally, for example, when we work out. This creates a feeling of well-being and relaxation after an effort. Our bodies secrete these substances independently when we fulfill a need. But when an endorphin release is triggered by an external substance (in this case, nicotine), the brain gradually gets lazy and eventually needs more of this external source to make up for its lack of endorphins.

When nicotine is inhaled, it takes just 10 seconds for it to penetrate the lungs, enter the bloodstream, and make its way to the brain, where it can do its damage.

Once in the brain, nicotine triggers the release of dopamine, a chemical substance associated with pleasure. The dopamine release creates a feeling of well-being and relaxation, reduces irritability and hunger, enhances concentration, and makes people feel alive. So it's easy to see why smokers repeat the experience.



After just two to four hours without nicotine, the body may start to feel symptoms like a headache, mild depression, anger, anxiety, and sleep issues. It's withdrawal.

What's more, the craving for a cigarette goes beyond the physical addiction to nicotine. On the emotional level, smoking helps to manage stress, anxiety, anger, pain, and even joy. But hold on! That doesn't make smoking the solution to our problems.

Nicotine is easily
accessible and absorbed
so quickly by the brain's
receptors that it's the
substance we become most
addicted to, more so than
even cocaine, alcohol

THE LOWDOWN ON SMOKE

There are three types of smoke created by tobacco consumption:

First-hand smoke is directly inhaled by the smoker. It's quickly trapped in the lungs and the rest of the body.

Second-hand smoke refers both to smoke from the tip of the cigarette and smoke exhaled by the smoker. It probably gets the most "publicity," because it's harmful, smells bad, and is even more carcinogenic than first-hand smoke. People around smokers can't control this smoke because they inhale it involuntarily.

Second-hand smoke:

- Increases the risks of cardiorespiratory disease
- Increases the risk of cancer
- Reduces fecundity and fertility
- Hampers fetal development in pregnant women
- Causes respiratory difficulties, migraines, eye and throat irritation
- Is considered an asthma trigger



Third-hand smoke is what remains trapped in objects like stuffed toys, couches, walls, floors, cushions, carpets, vehicle seats, and so on. Even after the odour is gone, third-hand smoke can remain in inanimate objects for years.

CAREFUL!

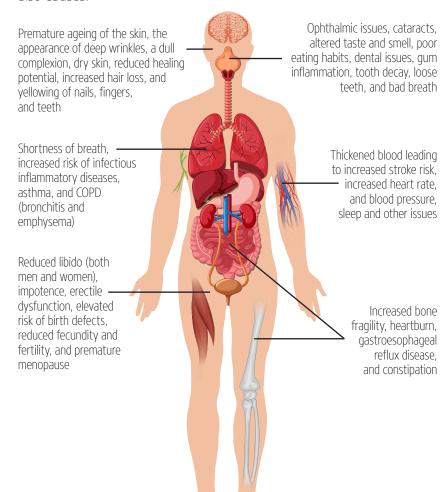
Exposure to second- and third-hand smoke is more harmful for children than for adults. Their bodies are growing and haven't matured. Plus they naturally breathe faster and have a tendency to put objects that are potentially contaminated by smoke in their mouths. This increases the risk of ear infections, psoriasis, asthma, allergies, learning and behavioural difficulties, and other issues.

We have a duty to protect our children. They can't leave smoke-filled spaces whenever they like. A smoke-free home is a lifelong gift to your children.



SMOKING'S EFFECTS ON THE BODY

In addition to creating a vicious cycle of physical and psychological dependency, smoking has substantial effects on the body. Contrary to popular belief, smoking isn't just harmful for the respiratory system; it also causes:



SMOKING CESSATION

Quitting smoking is no easy task, but with the right tools, anything is possible. Of course, there will be obstacles on the way. You'll need to break the vicious cycle of physical addiction caused by nicotine and the pernicious feeling of well-being it provides, as well as the psychological addiction associated with moments of relaxation and decreased stress. That's why you should arm yourself with patience, willpower, and motivation

The very first step is to make a game plan or strategy. It takes preparation to reach that all-important goal of becoming a non-smoker!

PRE-CONTEMPLATION: At this stage, smokers don't think quitting is an option. They aren't receptive to messages about the negative effects of cigarettes. They're defensive and often disillusioned about quitting. And they don't have any changes planned in the near future.

You'll need to find your own reasons and motivations for quitting.

- **CONTEMPLATION:** Smokers in the contemplation phase are thinking about quitting in the **next six months**. They're increasingly aware of smoking's harmful health effects. They don't exactly know how they'll quit, but the idea is slowly sinking in. Does this describe you?
- PREPARATION: This phase marks the transition from thinking about quitting to taking action. A quit date is set for less than a month away. In this phase, smokers actively seek information about available treatment options and support programs.

- **ACTION:** Quitting officially begins. The last cigarette is stubbed out. The action phase lasts six months from the last cigarette. This step is particularly difficult, especially during the first month. It takes perseverance!
- MAINTENANCE: After six months without smoking, ex-smokers enter what's known as the maintenance phase. The goal here is to stay smoke-free! That means managing temptation to avoid relapsing.
- **RELAPSE:** Yes, relapsing is part of the normal quitting process. But it shouldn't be seen as a failure. Relapses can happen at any time, but are most common within two weeks of quitting.

The first two weeks after the last cigarette are often the most critical. During the first three or four days, smokers are often highly motivated, but reflexes are quick to return, withdrawal symptoms kick in, and motivation decreases. That's why it's important to be persistent.

Most smokers average five to seven attempts before they quit for good. So don't lose hope. You'll get there!

DID YOU KNOW that one in two Canadian smokers will make at least one attempt to quit every year? About 20% of smokers will quit on their first attempt, 50% after six, and 100% after 12, which means there's hope if you're persistent!

THE HABITS THAT COME WITH SMOKING

Once you've set your quit date and made your game plan, you'll need to identify your cravings and critical moments. One of the hardest parts of quitting is that smoking isn't associated just with an emotion or state of mind, but with specific moments and activities. Smokers will say they smoke:

- While having a cup of coffee
- While drinking alcohol
- After meals
- In the car
- During breaks at work
- While watching television

- After working out
- Before bedtime
- When they are alone
- At restaurants
- With friends
- And so on

These situations are often the hardest to avoid. They're such an ingrained part of smokers' daily lives that it often takes extra effort to kick the habit.

An impromptu evening out, a drink or two, and whoops—out come the cigarettes.

Triggers are different for everyone, so it's important to recognize yours and to avoid them as much as possible so that you can learn to handle them on a daily basis.

The "danger" of relapse is higher at certain times or events, including parties, the holiday season, and periods of intense emotion.

For every reason you have to reach for a cigarette—whether it's to relax, out of habit, or for pleasure—you need to find an effective counter-strategy.

THE BENEFITS OF QUITTING

The benefits of quitting start within minutes of butting out your last cigarette. Over time, respiratory and cardiovascular risks decline and your quality of life and life expectancy improve.

Time since quitting	Benefits associated with quitting
20 minutes	Your blood pressure and pulse return to normal.
1 day	Your heart attack risk decreases.
2 days	Your senses of taste and smell improve.
3 days	Your bronchi open more, breathing is easier, and energy increases.
3 months	Your blood flow and lung function improve.
9 months	Your coughing, nasal congestion, and shortness of breath improve. Your fatigue decreases, and your energy levels gradually improve.
1 year	The risk of heart disease is half that of a smoker.
5 years	Your stroke risk decreases significantly.
10 years	Your risk of lung cancer as well as other related cancers (e.g., mouth, throat, esophagus) is decreased.
15 years	Your heart disease risk is similar to that of a non-smoker.

Source: Government of Canada

In addition to improving your quality of life and making a healthier environment for your family and friends, quitting is also good for:

- Your wallet
- Your energy level, shortness of breath, and fitness
- Your body image and attitude
- And much more

WARNING!

You may be surprised to learn that cigarettes can cause multiple drug interactions. If you use medication on a regular basis and you decide to stop smoking, tell your pharmacist so he can monitor you properly (e.g., side effects, dosage adjustments, blood samples).

WHY DO PEOPLE GAIN WEIGHT WHEN THEY STOP SMOKING?

The weight gain associated with quitting is a big obstacle for many smokers who want to kick the habit. Fear of weight gain is enough to dissuade some smokers from even thinking about quitting. Yet the health advantages of quitting largely outweigh the risk of gaining weight!

There are a number of reasons for potential weight gain.



Nicotine can also suppress appetite by raising blood sugar levels. When blood sugar is higher, the body signals that, in theory, it's had enough to eat

When a person stops smoking, the absence of nicotine can lead to decreased energy consumption (fewer calories burned) and increased appetite, which may translate into weight gain.

- People appreciate food more because their sense of taste and smell improves within 48 hours of quitting. As a result, the pleasure derived from eating grows and the desire for foods that are rich in fat and sugar may increase.
- For some, the habit of constantly having a cigarette in their hands or mouth is replaced by eating. Since it's easy to fall into this trap, one trick is to use aids like a stress ball or chew a cinnamon or celery stick—in short, to keep your hands and mouth busy.
- Others may eat more for the same reasons they used cigarettes (e.g., to manage stress, avoid boredom, pass the time, or reward themselves), which can also lead to weight gain. It's important to avoid these situations as much as possible.

The average weight gain is estimated to be around 2 to 4 kg (4 to 8 lb.), which is why most people won't see significant changes.

Remember that simple lifestyle changes like healthy eating and regular exercise help to maintain a healthy weight. And always keep in mind that the benefits of quitting outweigh the risks of weight gain.

QUITTING STRATEGIES

There is no miracle recipe for quitting. Some people succeed on their own without assistance. More power to them! For everyone else, there are a variety of methods to help kick the habit.

Pharmacological aids have been proven to double or even triple your chances of quitting and reduce withdrawal symptoms and relapse risks.

There are two types of pharmacological aids:

- Nicotine replacement therapy, which delivers nicotine by means other than tobacco
- Products that do not contain nicotine (prescription medication)

Under certain conditions, insurance covers part of the cost for pharmacological aids. Talk to your pharmacist to see if you are eligible.

DID YOU KNOW... You might think that quitting is easier for a light smoker (less than 10 cigarettes a day) than a heavy smoker (more than 20 cigarettes a day). But it's just as hard because the addiction is often more psychological than physical for light smokers.

NICOTINE REPLACEMENT THERAPY

The choice of nicotine replacement therapy (NRT) depends on the smoker's needs, previous attempts to quit, level of addiction, and product tolerance, among others. You're considered to be heavily addicted to nicotine if you:

- Smoke your first cigarette within 30 minutes of waking up in the morning
- Smoke more than 20 cigarettes a day

The goal of NRT is to provide a dose of nicotine without the tobacco and its other harmful by-products. The dose may be delivered via a skin patch, gum, lozenges, sprays or inhalers.

THE PATCH

Transdermal nicotine patches feature a thin film containing nicotine, which is released in a controlled manner through the skin. Patches provide your body with a "continuous," prolonged dose of nicotine.

When to apply the patch

Patches remain effective for about 24 hours. As a result, we recommend applying the patch when you wake up and applying a new one the next morning. Some people may not tolerate wearing the patch overnight. Most smokers don't wake up to smoke so they're not used to receiving nicotine in their sleep. In some cases, people wearing a patch at night report unusual and vivid dreams. They may be advised to remove the patch before going to bed and put a new one on the next morning.

But be careful if you opt for this approach! If you have a tendency to smoke your first cigarette within minutes of waking up, make sure your morning craving is under control, even without the patch at night.

Where to apply it

Patches should be applied to a clean, dry, hairless area that doesn't get irritated and is visible in the mirror (so you don't forget it). Preferred areas are the shoulders, outer arm and parts of the abdomen where there isn't too much fat. Avoid sticking the patch to your breasts or over the heart. If the chosen area is hairy, we suggest trimming the hair rather than shaving it before applying the patch. Irritated skin may affect nicotine absorption when patches are applied.

It's best to wait one week before reapplying a patch to the same spot to avoid irritating the skin and affecting absorption. Vary your application sites.

Handy tips

Patches are water resistant, so you can shower or swim while wearing one. If the patch comes loose, try to re-apply it or put on a new one.

Intense exercise may increase nicotine absorption. You may be advised to remove the patch 15 minutes before activity and replace it after.

WARNING!

Do not smoke when wearing a patch. And never cut patches into pieces so as to prevent the reservoir from releasing nicotine too quickly.



Are there side effects?

When you apply a patch, you may feel a slight tingling or itching sensation. This is normal, and symptoms usually subside within one hour of application. When the patch is removed, the skin may temporarily be red and slightly puffy. This should also return to normal within an hour of removal.

If you experience intolerable itching, intense redness, or severe swelling, you may be having trouble tolerating the product. Some people react more than others to the glue used to secure the patch in place or to cutaneous nicotine absorption. Before giving up on the patch, talk to your pharmacist. There are solutions to these issues.

Treatment duration

Nicotine patches come in three different doses. The goal is to gradually decrease the dose of nicotine in the system to help your body adjust and gradually reduce withdrawal symptoms.

The quitting process should usually take about 12 weeks. It is important to respect the time frame to increase your chances of success. Some people try to stop using the replacement therapy quicker, thinking they are ready, but studies have shown that the 12-week schedule is actually the most beneficial and effective. In

contrast, treatment exceeding three months has not proven to be any more effective.

DID YOU KNOW?

A cigarette contains about 1 mg of nicotine.

SHORT-ACTING AIDS

The patch alone may not control all of your cravings for cigarettes, which is why gum, lozenges, sprays, and inhalers exist. These products also contain nicotine and are used on a short-term basis to calm strong urges to smoke, usually in combination with patches.

GUM

Nicotine gum contains a precise quantity of nicotine roughly equivalent to the amount in a cigarette. Gum is available in different doses and flavours for everyone's tastes. Be careful! Nicotine gum is not used in the same way as ordinary chewing gum. Since nicotine is absorbed through the gums and cheeks and not by swallowing, the chewing technique is extremely important to make sure the treatment is as effective as possible.

Instructions:

- Chew the gum a few times to soften it and release the nicotine.
- When your tongue feels slightly numb, place the gum between your cheek and gum for one to two minutes.
- Chew the gum a few times to release more picotine.
- Put the gum back between your cheek and gums for one or two more minutes.
- Repeat this process for 30 minutes and then throw the gum away.

Are there side effects?

You may feel side effects when using gum, especially if you chew too fast and excess nicotine is released. Side effects may include:

- Headache
- Hiccups
- Increased appetite
- Nausea
- Light-headedness
- Altered sense of taste

These effects are usually temporary, but if they grow intolerable and you think they're caused by the gum, talk to your pharmacist.

Handy tips

Avoid drinking or eating 15 minutes before using gum and while chewing so as not to affect the product's effectiveness.

The maximum recommended number of pieces of gum is 20 to 30 per day, depending on the dose of nicotine they contain. Anything over and above this quantity and you probably need to reassess your nicotine patch dose. Gum can be used on its own for a maximum of three months and then occasionally when you have cravings.

LOZENGES

Like gum, lozenges contain a precise quantity of nicotine, equal to about one cigarette. For best results, place a lozenge between your cheek and gum and let it dissolve. This usually takes 20 to 30 minutes. You can move the lozenge from one side of your mouth to the other. Don't crunch or swallow it, and avoid drinking or eating while it is in your mouth so as not to affect nicotine absorption.

Lozenges should be used at intervals of one and a half to eight hours, without exceeding the maximum dose of 15 to 25 lozenges per day, depending on the strength used.

DID YOU KNOW... Gum and lozenges come in popular flavours like mint, fruit, and cinnamon. Not only do they taste good, they also leave your breath a lot fresher than a cigarette does.

MOUTH SPRAYS

Mouth sprays are used the same way as gum or lozenges to calm powerful cravings for nicotine. Simply spray the product in your mouth when you feel the urge to light up. The advantage of sprays is that they're small and discreet and act quickly—within a minute.

The main side effects reported with sprays are mouth and throat irritation and hiccups. The maximum recommended daily dose is 64 sprays per 24 hours. Mouth spray can be used alone or in combination with nicotine patches.

INHALERS

Using a nicotine inhaler feels a little like smoking because of the mouthpiece you inhale from. To use an inhaler, you insert a nicotine cartridge in the reusable mouthpiece.

With the inhaler, nicotine is released through inhalation and then absorbed through the mucous membrane of your mouth. Since some of the nicotine is also absorbed through the lungs, it's best to choose other replacement therapies if you suffer from lung disease or asthma.

One inhaler cartridge is good for 20 minutes of inhalations, consecutive or not. For example, you can use it:

2 X 4 X
10 MINUTES 5 MINUTES and so on

However, once started, a cartridge is good for 24 hours. A maximum of 12 cartridges per day is recommended, depending on your degree of addiction and the stage you've reached in your quitting process.

A pack-a-day smoker makes about 90,000 hand-to-mouth movements a year—a reflex that reinforces the addiction. Using the inhaler on an occasional basis helps gradually reduce this habit.

Handy tips

As with gum and lozenges, avoid drinking or eating 15 minutes before and while using an inhaler so as not to affect product effectiveness.

The recommended duration of treatment is about three months but can be up to six months.

Inhalers can be used alone or with nicotine patches.

WHICH OPTION TO CHOOSE?

Some smokers decide to stop smoking by using only short-acting therapies. At the very beginning, this strategy helps them gradually decrease the number of cigarettes smoked per day and increase the time between cigarettes. But the entire quitting process tends to extend over six months rather than three. Short-acting options are being recommended less and less often for use on their own

Research has shown that pairing nicotine patches with short-acting products produces better control and substantial benefits, which is why combined therapy is often the first treatment option.



NICOTINE-FREE PRODUCTS

After assessing your condition, medical history, and medication, your doctor may decide to prescribe you pills. Like nicotine replacement therapy, this kind of medication is also prescribed for about 12 weeks.

Non-nicotine treatments target chemical substances in the brain that are responsible for addiction. With these treatments, smokers stop smoking on their own within 7 to 14 days of starting the medication.

These drugs are not for everyone. Talk to your doctor to find out if this option is right for you.



ALTERNATIVE THERAPIES

Some people turn to alternative methods such as acupuncture, hypnosis, and laser therapy to quit smoking; however, none of these methods are recognized by Health Canada as an effective way to stop smoking.

ELECTRONIC CIGARETTES



Electronic cigarettes, more commonly known as e-cigarettes, have made a real splash since they first arrived on the market... These small, battery-powered handheld devices resemble a small flashlight or large pen. They have a cartridge that is filled with liquid. Users inhale warm flavoured vapours rather than tobacco. E-cigarettes also mimic the action of bringing a cigarette to your mouth.

Since 2015, vaping devices (e-cigarettes) are subject to Québec's Tobacco Control Act. It is illegal to sell e-cigarettes to minors and use them in areas where smoking is prohibited. Promoting e-cigarettes is limited in the same way as tobacco products.

Although there are few studies that can confirm their efficacy, e-cigarettes are used by some people as a means to wean themselves off tobacco and slowly stop their bad habit for good. However, e-cigarettes with aromatized liquids often attract other types of consumers, such as young people, who are curious and want to try vaping. Unfortunately, it can also lead them to trying tobacco.

More research is needed to fully understand the effects of e-cigarettes, but we do know they are not without risk. While the lungs are not directly exposed to tobacco smoke, the flavours and vapours can irritate and aggravate respiratory problems such as asthma or bronchitis. What's more, some of the substances released when the products are heated may be toxic.

OUITTING DURING PREGNANCY

An estimated 15% to 25% of women continue to smoke during pregnancy. Research has proven that smoking while pregnant increases the risk of

- Miscarriage
- Premature birth
- Low-birth-weight babies
- Birth defects
- Sudden infant death syndrome
- Delayed fetal growth

Since replacement therapies expose pregnant women to nicotine, they are encouraged to quit smoking without pharmacological assistance. But this isn't always realistic, and researchers consider replacement therapies less harmful for the fetus than smoking during pregnancy. Ask your health professional for more information. He or she can tell you about the options available and weigh the risks and benefits of each treatment method based on your condition.

TIPS AND TRICKS

The temptations to smoke are many and persistent, and the wide availability of cigarettes doesn't help. Here are some tips you can use for extra motivation as you work your way through the process.

Avoid situations that encourage you to smoke or use strategies if they occur:

- Do you smoke when you go for drinks with friends?

 Don't join the smokers gathered outside. Stay indoors with the others if possible. The temptation won't be as strong.
- Do you smoke after working out?
 Tsk tsk! After all the work you've put in! Replace that cigarette with some fruit or a thirst-quenching sports drink.
- Do you smoke in the car?
 Chew gum or listen to music.
- Do you smoke to unwind or calm yourself down?
 Meditate, do yoga, exercise, take deep breaths, or go for a walk.

You'll need to keep your mind and hands busy until the urge passes. It will usually be gone in ten minutes or so.

To improve your chances and enjoy the benefits of your new tobaccofree life, you can also:

- Throw out all your cigarettes, lighters, ash trays, and other accessories that could put your resolve to the test
- Tell your family, friends, and colleagues about your plan and get their support

Calculate how much money you've saved. If you smoke 15
cigarettes a day, your estimated savings are over \$50 per week,
which adds up to more than \$2,700 per year. Talk about a great way
to treat yourself to a reward—like a special trip or coveted item!

Whatever your reason for quitting—a new baby, health concerns, a promise to family and friends—keep it front and centre in your mind. When you have times of weakness—and you will!—focus on that reason to help you stay motivated and on target to reach your goal. It's all up to you.

Quitting smoking is a gift to yourself—a guarantee of more and healthier years for yourself.

NEED **HELP?**

Pharmacists are healthcare professionals who can, under certain conditions, prescribe various therapies to help you quit smoking. Pharmacists are available to support you during the process; they will encourage you and provide practical tips and recommendations so that you can successfully break your habit.

Pharmacists are health professionals who, under certain conditions, can prescribe nicotine replacement therapies. Your local pharmacist can guide you through this process, encourage you, and give you advice and recommendations to help you succeed.

INFO LINES AND OUIT SMOKING CENTRES

Anyone who wants to stop smoking should contact a quit smoking centre. Professionals will suggest personalized support throughout your quitting process. Quit smoking centres even offer individual and group meetings so you can share your experience and get tips from people who face the same challenges as you. Extra psychological support is estimated to quadruple your chances of success. So don't be afraid to ask for help!

VIRTUAL SUPPORT

Mobile apps have been specially designed to help people who want to quit smoking. These apps, most of which are free, let you record progress, the time elapsed without smoking, money saved, impact on health, and so on. Some suggest daily missions and offer awards while constantly encouraging you.

I OUIT NOW PROGRAM

The I QUIT NOW program is specially designed to support Quebec smokers who decide to quit smoking. The suggested method teaches you how to get through cravings and learn to live with them. Based on your profile, cravings, and triggers, the program helps you tackle your doubts and build your confidence with respect to quitting. The method offers a whole range of exercises for you to do several times throughout the day, drawing on your senses, your breathing, your thoughts, and distraction techniques so you can control the situation instead of giving into your cravings. The program also helps you track your progress and get the support you need, either online, by phone, in person, or by text message. Visit https://tobaccofreequebec.ca/iquitnow/. The program is free!

To sum up, when you're ready, here are some important tips to remember:

- Set the date when you'll stop smoking and stick to it.
- Know why you're quitting.
- Get information on available aids (e.g., medication, psychological support).
- Take advantage of other people's experiences and seek inspiration from strategies that have worked for them.
- Tell your friends, family, and colleagues about your plan.
- Reward yourself.
- Be positive and motivated, and surround yourself with supportive people!

CONCLUSION

After numerous efforts and government measures, gruesome ad campaigns, and other initiatives, smoking cessation is on the right track in Canada. The numbers are encouraging but there's still cause for concern.

Remember that the lungs are not the only organ damaged by the harmful effects of smoking.

By quitting, you'll improve your quality of life, decrease your risk of disease, make the environment healthier for your family and friends, and increase your life expectancy and the time you'll spend with your loved ones.

No matter what method you choose or what your reasons for quitting are, pick a good time and surround yourself with people who will support you along the way!



SOURCES AND HELPFUL REFERENCES

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