It Burns You Up
Effects of cigarette smoking on your body

When you smoke, it's not just your lungs that suffer. Chemicals from cigarettes do damage to almost every part of your body. Take a look:

- **Brain:** Increased risk of stroke
- **Teeth:** Yellow color, decay, gum disease
- **Mouth:** Bad breath, cancers of the mouth, tongue, lips
- **Lungs:** Cancer, COPD (chronic bronchitis, emphysema), asthma exacerbations
- **Arms:** Decreased blood flow
- **Stomach:** Acid secretions, cancer, ulcers
- **Reproductive organs:** Erectile dysfunction, cervical and uterine cancer, infertility, risks to unborn babies, miscarriage
- **Eyes:** Increased risk of cataracts
- **Face:** More wrinkles, acne
- **Throat:** Cancer
- **Esophagus:** Cancer
- **Larynx:** Cancer
- **Heart:** Increased risk of heart attack, heartburn
- **Pancreas:** Cancer
- **Kidneys:** Cancer
- **Bladder:** Cancer
- **Blood:** Cancer of the myeloid line of blood cells
- **Legs:** Decreased blood flow
- **Bones:** Osteoporosis, arthritis

**Want some good news?**
Your body starts to repair damage within weeks of quitting. While there is no cure for COPD, the best way to slow the lung damage is to stop smoking.

**Don't get burned: Quit.**
For more information and for help to stop smoking, visit www.smokefree.gov. To find out how much money you will save in your lifetime if you quit smoking now, visit www.costofsmoking.com.

Information adapted from the Centers for Disease Control and Prevention.

View and print this and other patient handouts on our website, www.advanceweb.com/NPPA.
All handouts are posted in English and Spanish.
## Triggers & Action Plan: example

<table>
<thead>
<tr>
<th>#</th>
<th>Strength (0-4)</th>
<th>Trigger Setting</th>
<th>New Strategies for Dealing with Each Trigger</th>
<th>Medication</th>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Being in a stressful situation</td>
<td>Take a deep breath; Recall a lovely flower, vacation, etc.</td>
<td>Use Nicotine nasal Spray</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Being around other smokers</td>
<td>Don't be around other smokers</td>
<td>Use Nicotine Nasal Spray</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Having a cup of coffee</td>
<td>Switch to tea</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>After a meal</td>
<td>Do something different; Change part of meal routine</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Making a phone call</td>
<td>Change phone, Change room</td>
<td>Highest threat. Use reliever med prior to phone call.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Starting Car</td>
<td>Think something different Do something different</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Classification of Severity - Table #1

### Classify Tobacco-Dependence Severity
Clinical Features Before Treatment*

<table>
<thead>
<tr>
<th>Cigarette Use</th>
<th>Nicotine Withdrawal Symptoms</th>
<th>Quantitative</th>
<th>Health Status</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STEP 4</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very Severe</td>
<td>- &gt;40 CPD</td>
<td>- Constant</td>
<td>- ≥1 Chronic Medical Dis. AND/OR</td>
</tr>
<tr>
<td></td>
<td>- Daily use</td>
<td>- NWS &gt; 40</td>
<td>- ≥1 Psychiatric Disease</td>
</tr>
<tr>
<td></td>
<td>- Time to 1st Cig:0-5 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>STEP 3</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>- 20-40 CPD</td>
<td>- Constant</td>
<td>- ≥1 Chronic Medical Dis. OR</td>
</tr>
<tr>
<td></td>
<td>- Daily use</td>
<td>- NWS 31-40</td>
<td>- ≥1 Psychiatric Disease</td>
</tr>
<tr>
<td></td>
<td>- Time to 1st Cig:6-30 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>STEP 2</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>- 6-19 CPD</td>
<td>- Frequent</td>
<td>- Healthy medically</td>
</tr>
<tr>
<td></td>
<td>- Daily use</td>
<td>- NWS 21-30</td>
<td>- Healthy psychiatrically</td>
</tr>
<tr>
<td></td>
<td>- Time to 1st Cig:31-60 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>STEP 1</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>- 1-5 CPD</td>
<td>- Intermittent</td>
<td>- Healthy medically</td>
</tr>
<tr>
<td></td>
<td>- Intermittent Use</td>
<td>- NWS 11-20</td>
<td>- Healthy psychiatrically</td>
</tr>
<tr>
<td></td>
<td>- Time to 1st Cig:60 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>STEP 0</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Daily/Social</td>
<td>- Non-daily cigarette use</td>
<td>- None</td>
<td>- Healthy medically</td>
</tr>
<tr>
<td></td>
<td>- Social setting only</td>
<td>- NWS &lt; 10</td>
<td>- Healthy psychiatrically</td>
</tr>
<tr>
<td></td>
<td>- Time to 1st Cig:&gt;&gt;60 min</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*The presence of one feature of severity is sufficient to place patient in that category.

- CPD=Cigarettes Per Day
- Time to 1st Cig=Time to First Cigarette after Awakening in the Morning
- NWS=Nicotine Withdrawal Symptom Score
- FTND=Fagerström Test for Nicotine Dependance Score
- Se=Serum
- Cotinine=First-pass, hepatic metabolite of nicotine; physiologically inactive
Initial & Long-Term Tobacco-Dependence Management

Stepwise Approach to Tobacco-Dependence Therapy: Adults (Based on the Asthma Model) - Table #2

Outcome: Tobacco-Dependence Control
No Nicotine Withdrawal Symptoms and No Smoking

Controller(s): (1 or more)
- Varenclline
- Bupropion-SR
- OR
- Nicotine Patch
- and/or
- Bupropion-SR
- AND/OR
- OR
- Controller: Varenclline, alone

Multiple Controllers:
- Varenclline
- and
- Bupropion-SR
- And/Or
- Hi-Dose Nicotine Patch
- And/Or
- Hi-Dose / Individualized Nicotine Patch
- AND/OR
- Multiple Reliever Meds:
- (NNS, NI, NG, NL)*
- OR

When tobacco dependance is controlled
(patient is not smoking
AND not suffering from nicotine withdrawal symptoms):
- Gradually reduce medications one at a time
- Monitor, to maintain NO nicotine withdrawal symptoms

Reliever Meds:
- (NNS, NI, NG, NL)*
- prn

Controller: Nicotine Patch or Bupropion-SR OR Varenclline OR
- Reliever Meds: (NNS, NI, NG, NL)*, prn

Controller: Nicotine Patch or Bupropion-SR AND/OR
- Controller: Varenclline, alone

Reliever: Not Known

Controller: None

STEP 0: Non-Daily/Social

STEP 1: Mild

STEP 2: Moderate

STEP 3: Severe

STEP 4: Very Severe

STEP Down & Maintenance

* Reliever Medications (Rapid Acting Nicotine Agonists):
- NNS = Nicotine Nasal Spray
- NI = Nicotine [Oral] Inhaler
- NG = Nicotine Gum
- NL = Nicotine Lozenge

† Some patients will need indefinite use of Controller or Reliever Medications to maintain zero nicotine withdrawal symptoms and no cigarette use.
2.7 DEVELOPING A MEDICATION TREATMENT PLAN: Logic Model

Overarching Goals:
To reduce or eliminate nicotine withdrawal symptoms, including tobacco-related cravings and compulsion to smoke
To enhance a patient’s and physician’s effectiveness in achieving control over tobacco use

Inputs
- Nature and severity of tobacco dependence
- Fagerström Test for Nicotine Dependence (FTND) score
- Number of cigarettes/day
- Medical history
- Gender
- Nicotine-withdrawal-symptom history with prior quit attempts
- Age started cigarette use
- Presence or absence of another cigarette user in household
- Number of prior quit attempts
- Number years education
- Socio-economic status (SES)
- Substance use history
- Psychiatric history
  - Depression
  - Mood disorder
  - Bipolar disorder
  - Post-traumatic stress disorder

Baseline control
- Decide on baseline Controller Medication needs
- Consider using nicotine patch(es) when:
  - Patient is mildly to moderately addicted to nicotine (FTND score 2–6)
  - Patient is Caucasian
  - Patient not obese (BMI ≤ 30 kg/m²)
  - Patient had prior success with nicotine patch
  - Adherence a concern
  - Insurance coverage for other Controllers is a concern

Acute Craving Management
- Add appropriate Rescue (Reliever) Medications
- Consider using nicotine nasal spray when:
  - Patient is severely addicted to nicotine (FTND score ≥ 7)
  - Patient is African-American
  - Patient is obese (BMI ≥ 30 kg/m²)
  - Patient needs to use a rescue medication while eating or drinking
  - Patient has experienced treatment difficulty or failure with other Rescue (Reliever) Medications

Anticipate Potential Barriers
- Review Instructions
- Dispel myths surrounding nicotine medications and controller use
- Review proper technique for using all Rescue (Reliever) Medications
- Identify high-risk situations
- Review craving triggers and practice proper response
- Review instructions for preemptive Rescue (Reliever) Medication use in anticipation of high-risk situations
- Review sources of external support:
  - Key family or friends
  - Quitline
  - Community support groups
- Review internal support mechanisms:
  - Introduce patient to office staff
  - Provide office number for questions
  - Provide resources from this toolkit
  - Schedule next office appointment

Outcomes

Short-term Patient Outcomes (before Target Stop Date)
- Increased intention to discontinue cigarette use (stage-of-change)
- Willingness to accept defined period of continued smoking during Controller Medication initiation
- Establish goals for stopping smoking (e.g., target stop date, treatment plan)
- Demonstrate effective medication-use technique
- Understand value of keeping regular follow-up office appointments
- Understand goals of treatment plan, including control of nicotine withdrawal symptoms
- Increased awareness of cessation resources in the office and within the area

Intermediate Patient Outcomes (Target Stop)
- Attempt to discontinue cigarette use
- Proper use of Controller and Rescue (Reliever) Medications
- Suppression of nicotine withdrawal symptoms
- Control over compulsion to smoke
- Management of medication side effects
- Avoidance of high risk situations

Long-Term Patient Outcomes (After Target Stop)
- Maintain complete suppression of nicotine withdrawal symptoms
- Demonstrated ability to manage cravings through Rescue (Reliever) Medication titration
- Continued control over compulsion to smoke
- Adoption of new, non-smoking behaviors
- Decreasing medication requirement