

TOBACCO ADDICTION



Dr Lígia Pires

DO YOU WISH TO STOP SMOKING? - HELP IS AT HAND!

TOBACCO consumption is the leading preventable cause of disease. In the US, 800,000 people die a year from the immediate consequences of smoking.

Active and passive tobacco smoking is an important factor in the development of cardiovascular disease, lung cancer and chronic obstructive pulmonary disease (chronic bronchitis/ pulmonary emphysema).

In males, tobacco is a cause of impotence and infertility (decreased sperm quality). In females, tobacco consumption causes decreased fertility, pregnancy complications, and early menopause and osteoporosis.

Children of parents with smoking habits suffer from respiratory and ear problems with greater predisposition to frequent and worse asthma attacks.

Tobacco addiction is a multi-factorial phenomenon resulting from the interaction between nicotine dependence and smoking habits. Once absorbed, nicotine reaches the brain within 10 seconds.

Nicotine is a psychoactive substance with a high capacity to induce psychological and physical dependence, in a similar way to those of heroin and cocaine. The amount of nicotine absorbed and the

rapidly increased absorption also increases dependency.

Nicotine contained in cigars is more readily absorbed and there are some brands of cigarettes that introduce chemicals in order to increase the speed of absorption of cigarettes which contain less nicotine.

Withdrawal symptoms are: mild agitation and restlessness, impaired

ability to concentrate, anxiety, increased appetite and weight gain, sleep disturbances and drowsiness and craving for cigarettes. There are variations in the degree to which individuals experience these symptoms, which may last for several weeks to months.

Treatment of the smoker should aim at complete cessation, but only 2% of heavily dependent smokers

achieve this goal without any medical intervention and through willpower.

The number of cigarettes smoked daily is not a decisive factor, but the degree of dependence is. Before treatment starts, the degree of dependence should be assessed with the Fagerstrom test (figure 1). Scores: 1-3 Mild, 4-7 Moderate, 8-10 Heavy. In addition to pharmacological



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FAGERSTRÖM TEST FOR NICOTINE DEPENDANCE

QUESTIONS	RESPONSES	SCORES	
1 How soon after you wake up do you smoke your first cigarette?	Within 5 minutes	_____	3
	6 – 30 minutes	_____	2
	31 – 60 minutes	_____	1
	After 60 minutes	_____	0
2 Do you find it difficult to refrain from smoking in places where it is forbidden? (e.g., in the cinema, in meetings, etc.)	Yes	_____	1
	No	_____	0
3 Which cigarette would you hate most to give up?	The first in the morning	_____	1
	Any other	_____	0
4 How many cigarettes per day do you smoke?	10 or less	_____	0
	11 – 20	_____	1
	21 – 30	_____	2
	31 or more	_____	3
5 Do you smoke more frequently during the first hours after awakening than during the rest of the day	Yes	_____	1
	No	_____	0
6 Do you smoke if you are so ill that you are in bed most of the day?	Yes	_____	1
	No	_____	0

Scores: 1-3 Mild 4-7 Moderate 8-10 Heavy

TOTAL SCORE _____

treatment, it is important to establish the profile of the smoker, implementing an individual behavioural therapy.

It is essential to understand which are the moments of everyday life that relate to smoking, in order to change behaviour patterns and anticipate anxiety smoking.

There is an association between coffee and cigarette for many smokers; in these particular cases it is easier to quit smoking if they stop drinking coffee. Heavy smokers indicate that smoking is an automatic gesture. The mere fact that they are made aware of this fact is enough to make them reduce the number of cigarettes.

Pharmacological treatment has evolved and improved its results by reducing the symptoms of dependence. The classic nicotine substitutes (adhesives, chewing gum, sweets), antidepressants

and tranquilisers are the main help for those wishing to stop smoking.

It is important to evaluate whether a smoker has a history or symptoms of depression, as these symptoms may worsen when he stops smoking. In these cases, firstly the symptoms of depression must be under control before tobacco smoking is stopped.

All smokers benefit when they stop smoking. Given the complexity and difficulty of the process, most cannot do so without professional help, therefore expert help and advice should be sought from your doctor.

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