

Smoking Cessation

Smoking-related deaths represent about 80 percent of lung cancer mortalities, and half of lifetime smokers will die from some tobacco-related disease. Tobacco use also raises risks for a number of other health conditions, including other cancers, rheumatoid arthritis, respiratory diseases, heart disease, heart attack, stroke, Alzheimer's disease, cataracts, and macular degeneration. Research has consistently proven that smoking cessation is paramount to lung health, and smokers who quit are more likely to live a healthier and longer life, while greatly decreasing their lung cancer risk.

Statistics

- One in two lifetime smokers will die from some type of tobacco-related disease.
- Nearly one in five deaths in the United States is linked to smoking.
- Thirty percent of all cancer deaths are attributed to smoking.
- Quitting smoking before age 40 lowers risk of death from a smoking-related cause by 90 percent.
- Smoking **increases risk of 16 other cancers** including oral, pancreatic, bladder, cervical, kidney, colorectal, and esophageal cancers.
- Smoking cessation **decreases the risk** for cancer, heart disease, chronic lung disease, heart attack, and stroke.
- Smoking reduces a person's lifespan by an average of **10 years**.
- Approximately **14 percent of Texans** smoked cigarettes in 2018 (latest available data).

Types of Cessation

- **Nicotine Replacement:** Nicotine patches, gum, inhalers, nasal sprays, and lozenges can all be used to replace, reduce, and eliminate nicotine dependence. All methods provide a variety of levels of nicotine per dose, and users reduce dosage and frequency over time, which can vary by type of replacement method.
 - Nicotine patches deliver nicotine through the skin.
 - Nicotine gum and lozenges deliver nicotine through the mouth and may be preferable for those with sensitive skin.
 - Nicotine inhalers and nasal sprays deliver nicotine through a vapor inhaled through the mouth or nose, which is intended to simulate smoking. Nicotine inhalers and nasal sprays require a prescription, but other nicotine replacement therapies are available over the counter.
- **Cold Turkey/Gradual Withdrawal:** Smokers that choose to quit cold turkey, or unaided by smoking cessation medicines or nicotine replacement, may quit altogether, while others choose to quit gradually by slowly decreasing the number of cigarettes smoked each day until they are no longer dependent on nicotine.

Tips for Cessation

- **Choose A Day:** Set aside a day to stop smoking. Some people use children's birthdays, anniversaries, or other occasions to easily remember their motivations for quitting.
- Trash the Stash: Eliminate all cigarettes, ashtrays, and lighters.
- Avoid Temptation: Steer clear of popular smoking areas and cigarette smoke when possible.
- **Get Moving:** Light to moderate exercise may help reduce cravings. Replace your usual smoke breaks with walks around your office or neighborhood.
- Keep Your Mouth Busy: Drink water, chew gum, or snack on fruit or vegetable slices to refrain from giving in to cravings.

- Treat Yourself: Use the money you would have spent on tobacco to buy a reward for quitting.
- Set Up Support: Call or text a friend or family member who can lend support. Some publicly sponsored programs have real-time chat and 24/7 text support.
- Ask for Help: Call at the Quitline 1-877-937-7848, a hotline supported by the Texas Department of State Health Services.

About Texas Oncology

Texas Oncology is an independent private practice with more than 500 physicians and 210 locations across the state. Meeting the oncology needs of Texans for more than 35 years, the practice includes Texas Center for Proton Therapy, Texas Breast Specialists, Texas Oncology Surgical Specialists, Texas Urology Specialists, and Texas Center for Interventional Surgery. As a lead participant in US Oncology Research, Texas Oncology played a role in the development of more than 100 FDA-approved therapies. For more information, visit www.TexasOncology.com.

Sources: American Cancer Society, Centers for Disease Control and Prevention, National Cancer Institute, and Texas Department of State Health Services



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