

Smoking and diabetes

management

Why is it so hard to quit?

Simply put, nicotine is among the most addictive drugs. Smoking is not a habit or a lifestyle choice. It's an addiction that, over time, changes brain chemistry. Nicotine takes effect by attaching to certain receptors in the brain, and when you become a smoker these receptors increase in number. If not regularly stimulated with nicotine, the increased receptors begin to make a person feel very unpleasant, a phenomenon known as withdrawal. Both withdrawal and the craving it causes are tied to changes in brain chemistry.

Quitting smoking is one of the most important things individuals living with diabetes can do to help prevent or delay the onset of complications.



Why is smoking so bad for people with diabetes?

Smoking is bad for everyone. It increases your risk for lung cancer, heart attack and stroke and, each year, more than 47,000 Canadians die of smoking-related illnesses. But people with diabetes face an even greater risk from smoking: just like high blood glucose levels, the noxious chemicals in cigarette smoke attack blood vessels, accelerating atherosclerosis (hardening of the arteries) and impairing the blood's ability to carry oxygen to the tissues.

Together, the deadly combination of high blood glucose and smoking dramatically increase damage to the blood vessels that feed the heart, brain, eyes, kidneys and peripheral nerves, speeding up the long-term complications of diabetes. People with diabetes are already at increased risk for heart disease; however, if they smoke, they face three times the risk for heart attack of a person with diabetes who does not smoke.

How can I quit?

The first critical step is to make the decision to quit. It may help to set a firm, short-term quit date. In the meantime, get as much information as you can from your doctor or pharmacist about options to help you quit, including medications that can increase your chances of success by three to four times. Similar to the day-to-day process of managing your diabetes through diet, exercise and regular blood glucose testing, managing to quit smoking is something that is best approached by incorporating it into your daily routine.

What can help me quit smoking?

Nicotine replacement therapy

The first line of treatment is nicotine replacement therapy, whether in the form of a gum, patch or inhaler, to help ease withdrawal symptoms. Nicotine replacement therapy is now available without a prescription in

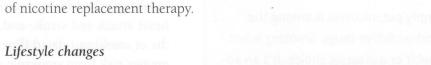




Oral medications

Buproprion (Zyban) is a prescription medication that dramatically decreases smoking cravings. It works by stimulating the same areas in the brain that are stimulated by nicotine. This drug can't be used by everyone (e.g. people with epilepsy or a history of seizures), and might interfere with other medications if you are already taking an antidepressant or other psychiatric medication.

Another prescription drug called Varenicline (Champix) acts by stimulating the receptors in the brain responsible for initiating and maintaining nicotine addiction, so that people feel they have smoked a cigarette without actually having done so. If they do smoke, it doesn't have the same positive effect. However, like any prescription drug, it has side effects—including nausea and, for some, psychiatric symptoms—and so may not be right for everyone.



pharmacies. Talk to your healthcare provider about the potential benefit

Smoking often is associated with strong cues, so as you move toward a quit date, get a sense of where and when you smoke, and identify some strategies to bypass those situations. If you typically smoke after dinner, take a walk instead. Any setting where alcohol is involved, such as a wedding or a party, will probably be a hazard zone, so just as you may plan to adjust your food intake or insulin dosage, consider in advance how you will handle these situations.

Enlist your family and friends in the effort. Make sure they understand how important it is for you to quit smoking and how hard it may be, and ask for their support. For some people, joining a support group along with others who are also trying to quit is helpful. Your doctor may have some information on groups in your community. For more information, visit www.hc-sc.gc.ca and enter "quit smoking" in the search box.

Never quit quitting!

Making the transition from smoker to nonsmoker is not easy, and you may have a lapse. If you do, give yourself a break. Don't focus on the one ciga-rette you just had, but remember the hundreds you haven't had since you quit. Manage your quitting plan much like you manage your diabetes—take it one day at a time.

The fact is, successful quitters generally make at least two or three unsuccessful attempts before they finally kick the habit, so never quit quitting!



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