

# 100

# QUESTIONS & ANSWERS

What is tobacco?

○○○○

What are the psychological effects of nicotine?

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What are the medical consequences of tobacco use?

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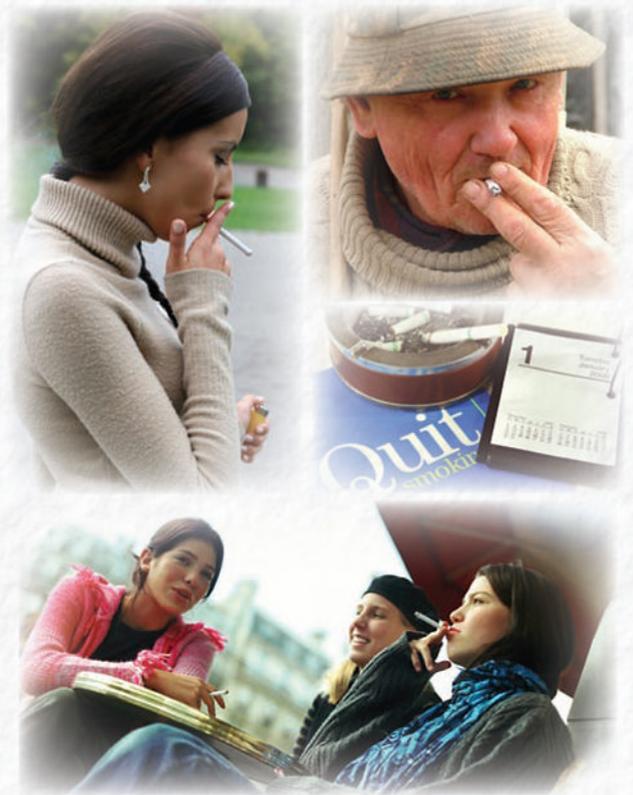
What are some medication aids that can help me quit smoking?

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How do I avoid “triggers” and relapse?

*About*

## How to Quit Smoking



*by*

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# **100 Questions & Answers About How to Quit Smoking**

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To my wife, Ana Cristina, whose involved critical reading, frequent meetings with the co-authors, and editorial efforts justly deserve the right to be considered as a co-author to this book as well. It would not have been written and completed without her organizing force.

—*Charles Herrick, MD*

This book is dedicated to my husband, children, and grandchildren. I am a proud wife, mother, and grandmother.

I want to thank my son, Charles Herrick, for inviting me to co-author a second book with him. I am also grateful to his wife for the support that she provided both of us in bringing this book to fruition. Her editorial contributions were invaluable.

I especially want to thank my husband, Bob Herrick, for his patience in allowing me the time to do the research and writing that contributed to making *100 Questions & Answers about How to Quit Smoking* possible. He has continued to encourage me to write and over the past few years I have written three books, all published by Jones and Bartlett. I want to thank the editorial staff of Jones and Bartlett. It has been gratifying to work with all of you.

I would also like to dedicate this book to all of the smokers who have quit smoking. Congratulations! As an ex-smoker, I know how hard it was. This dedication also includes those smokers who are valiantly trying to quit. Keep trying and eventually you will succeed! I am deeply grateful to two friends and colleagues who read parts of this book and gave suggestions. One is an ex-smoker, who shared her journey with me, and the other is currently trying to quit, using the patch. The fact that she is trying to stop smoking after reading parts of this book is a testament to the fact that *100 Questions & Answers about How to Quit Smoking* may be helpful. Thank you so much. I hope both of you live healthy and productive lives.

—*Charlotte A. Herrick, PhD, RN*

I dedicate this book to my husband, Scott, and my kids, Megan, Jillian, and Drew. They have put up with my smoking cessation ramblings for many years and can probably recite the dangers of smoking in their sleep. I could not have done this without you.

—*Marianne Mitchell, APRN*



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Tobacco has probably had a bigger impact on the lives of Americans than all plants, drugs, or other commodities combined. This may sound exaggerated, but when one examines the history of our nation one cannot but be left with the feeling that, were it not for tobacco, we would not have been able to gain our independence as rapidly as we did. Tobacco did it all. It brought jobs and opportunity. It led to rapid agricultural development. It brought wealth, and with wealth came the power to obtain independence. Unfortunately, like all things that seem initially like windfalls, the cultivation of tobacco came at a price. That price was paid, in many respects, on the backs of African Americans, who worked the plantations to bring the plant to market and fuel the American economy. (Cotton contributed to this as well, but tobacco was the first cash crop.) Gradually, however, America's increasing dependency on slave labor for that cash crop created deep divisions, which finally ignited in the form of a bloody Civil War, the effects of which are still being felt today over a hundred years later.

In a sense, tobacco's story on the social level has mirrored its effects on the individual level. Unlike any other drug of its kind, tobacco does it all. It perks you up and makes you sharper, but it also slows you down and allows you to focus better so you can block out bothersome stimuli; It stimulates and it sedates. It helps you manage everything that stress can throw your way without impairing you or turning you into an idiot. Because of this wealth of activity, of providing for every psychological need in a steady and manageable way, tobacco creates a slow but certain dependency that catches you off-guard until a civil war erupts in your body in the form of some life threatening disease that you can conveniently ignore until it explodes, leaving you at the edge of health.

We now approach smokers in the same way we approached other social outcasts, looking at them with disdain, viewing them as moral failures at best, or hooligans at worst. We wonder how they can ignore the flood of information that drowns us all with horrific statistics about rates of cancer

and heart disease and emphysema, all leading to lost years and lost quality of life. We forget our past. We forget that this attitude is the exception, not the rule. We forget that even if we never smoked, our parents smoked, and smoking was part of the fabric of our lives, invading every medium as surely as the smoke filled restaurants, airplanes, bars, and homes filled our lungs as an accepted part of life. Smoking was the engine of America's success in the eighteenth and nineteenth centuries, just as oil has been America's success in the twentieth. While one can hope for a future of independence from both, one cannot forget to pay proper respect to the fact that our current freedoms and standard of living have been partly built on these products.

It is an unfortunate fact of human nature to make things all good or all bad. It is especially unfortunate that Americans tend to do this more than other peoples. It is unfortunate because it often leads us to act in ways that ultimately hurt us rather than help us. While it is a good thing that we have become more aware of the dangers of second hand smoke and have created laws to limit our exposure to it, it is not a good thing to treat our family and friends who smoke as pariahs. Hopefully, this book will provide some insight and understanding regarding tobacco's insidious effects on our biology, while offering hope that effective treatment is available to enable us to ultimately free ourselves from its grasp.

# *The Basics*

What is tobacco?

How do chemicals such as nicotine work  
in the brain?

What are the psychological effects of nicotine?

*More...*

## 1. *What is tobacco?*

Tobacco is a plant that was domesticated, cultivated, and used by Native Americans for at least the past 5000 years, long before Columbus arrived in America. It is believed that the plant originated from South America and its cultivation spread northward during prehistoric times. Tobacco may even be the first domesticated plant in the Americas, as it was more widely cultivated by Native Americans than maize at the time the first Europeans arrived. Tobacco is the fastest spreading plant in human history. From the Americas, the Spanish conquistadors and early European explorers carried it to Europe where its cultivation rapidly spread to Asia.

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*Tobacco is the fastest spreading plant in human history.*

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Numerous species are native to South America, Mexico, and the West Indies. The plant grows 4 to 6 feet high and bears pink flowers. It has huge leaves. The tobacco plant, *Nicotiana tabacum*, was named after Jean Nicot, the French ambassador to Portugal who first brought the plant back from Brazil in 1560. A number of tobacco species grow naturally in the Americas, all belonging to the genus *Nicotiana* of the *Solanaceae* family. Products manufactured from the leaf are used in cigars, cigarettes, snuff, pipes, and chewing tobacco. The chief commercial species is *N. tabacum*, which is native to tropical America. *N. rustica* was grown in Virginia and the Carolinas during the Colonial era. Although today the number of tobacco farms is declining, it remains the chief crop in the Mid-Atlantic, Southeastern states, and some of the Southern states, including Kentucky and Tennessee. Many American farmers have exchanged their tobacco crops for other products. Today, vineyards are developing all over North Carolina to replace the old tobacco farms. *N. rustica* is also grown in Turkey, Russia, and other parts of the Ottoman Empire, and is known as Turkish Tobacco.

Tobacco requires a warm climate and rich, well-drained soil. The leaves are picked as they mature and are harvested together with the stalk. After harvesting, the tobacco leaves are cured, fermented, and aged to develop an aroma and to reduce the harsh taste. There are several methods of curing tobacco

leaves. Fire curing involves drying the leaves in smoke. Air curing involves hanging the leaves to dry in a well-ventilated structure. Another form of curing is when the leaves are dried by radiant heat from flues or pipes connected to a furnace.

Once the leaves are cured, the tobacco leaves are graded, bunched, and stacked into piles, and then put in closed containers for fermentation and aging. Most commercial tobacco is a blend of different types of tobacco. Other ingredients such as maple sugar and other sugars are then added for taste.

## 2. *Why do people use tobacco?*

Tobacco is clearly valued for its **psychoactive** effects. This means that it has several actions on the mind that depend upon the dose used. It can be used to stimulate the mind, relieve anxiety, or create visions or hallucinations. All of these properties can be pleasurable. In many Native American tribes, tobacco was traditionally used for religious or shamanistic purposes. Traditionally, tobacco was reserved primarily for shamans and priests because of its hallucinogenic properties. Tobacco was thought to allow the individual a conduit to the visions of the future, to the afterlife, God, or to a greater spiritual plain. All parts of the plant were used for different medicinal purposes; tobacco was used in agriculture to deter insects and other plant diseases, and it was a source of currency (see Question 4). Many tribes use tobacco to this day in their ceremonies and consider it one of the most important of their sacred herbs.

During the Colonial era, tobacco was used as a commodity for bartering, and it was exported to Europe in exchange for manufactured products. Snuff and chewing tobacco were initially more popular among men before the Civil War. Starting with World War I, cigarettes became popular among Americans (see Question 3). Snuff, chewing tobacco, cigars, pipes, and cigarettes are all used for pleasure. Nicotine, the major psychoactive ingredient of tobacco, can act as both a stimulant to enhancing the ability to think clearly and improve

### **Psychoactive**

A drug or chemical substance that acts on the brain to alter mood, behavior, perception, or consciousness. Abuse of some of these substances may cause addiction.

alertness, and as a relaxant to relieve anxiety, so that the smoker “feels good.” (Question 83 reviews nicotine’s possible health benefits.)

### 3. *What is the history of tobacco use?*

The following is a timeline of the history of tobacco.

- Before 1492: Tobacco was first used by the pre-Columbian Americans, who cultivated it for ceremonial and medicinal purposes.
- 1492: Christopher Columbus arrived in the Caribbean and observed the natives smoking and chewing tobacco. The Indians smoked tobacco through a Y shaped pipe called a *Tobago*. Christopher Columbus brought a few tobacco leaves and seeds back to Europe.
- 1556: Tobacco did not gain popularity until it was introduced to France in 1556, when Jean Nicot, a Frenchman, gave the tobacco seeds to Catherine de Medicis, the Queen of France. Plants grew from the seeds and were christened *Nicotine tabacur* after Jean Nicot’s name. Later, the addictive substance was called **nicotine**.
- 1584: Sir Francis Drake, the famous explorer of California Coast, introduced tobacco to Sir Walter Raleigh, another well-known explorer of the Carolinas.
- 1612: The first commercial tobacco crop was grown in Virginia.
- 1619: The first African slaves were brought to Jamestown, Virginia to work the tobacco plantations. Later in 1661, slavery was officially legalized in Virginia.
- 1730: The first tobacco factories opened up to manufacture snuff.
- 1761: One of the first investigations about the relationship between tobacco and disease concluded that malignancies of the respiratory tract, including the nose, could be traced to the use of snuff.

#### **Nicotine**

A chemical found in a variety of plants that targets a specific group of acetylcholine receptors known as nicotinic receptors.

- 1776: The American Revolution occurred in part because of “A Tobacco War.” Colonists objected to the taxes levied on their tobacco products by British merchants. Tobacco also served as collateral during the American Revolution, which helped to finance the French involvement.
- Mid-18th Century: “Big Tobacco” was born including its manufacturers Duke, Philip Morris, Liggett, and J.R. Reynolds. After the inventions of matches and later lighters, the number of cigarette smokers skyrocketed.
- 1861: Tobacco was issued along with food rations and drink to soldiers during the Civil War. Many Northerners were first introduced to tobacco during the Civil War. Hand-rolled cigarettes became popular. Before 1861, tobacco was generally smoked in pipes or cigars.
- 1864: The first cigarette factory was built in the United States.
- 1881: James E. Bonsack invented an automated cigarette making machine, sponsored by the Duke Company, which could produce 200 cigarettes per minute. Prior to this invention, 50 workers were required to produce 200 cigarettes. This invention markedly reduced the costs of production.
- 1906: Tobacco was removed from the *U.S. Pharmacopeia*, thus eliminating The Federal Drug Administration’s (FDA) ability to regulate tobacco use.
- 1909: Per capita smoking consumption grew, especially among men, who smoked mostly cigars and pipes.
- 1912: The first lobectomy for lung cancer was performed.
- 1917: During World War I, cigarettes were favored over pipes and cigars because they were more portable during combat. Between 1910 and 1919, the production of cigarettes increased by 633%.
- 1929: Mt. Zion Hospital in San Francisco performed six successful lobectomies. This was the start of modern thoracic surgery.

- 1933: The first successful pneumonectomy was performed for lung cancer.
- 1936: Dr Alan Oschner first saw lung cancer in 1919. Afterward, Oschner saw nine patients with lung cancer within a six month period. He concluded that the cause was cigarette smoking.
- 1945: It became socially acceptable for women to smoke. During World War II, The American Red Cross and other organizations distributed cigarettes to men and women in uniform.
- 1946: The “Golden Age” of advertising began promoting the use of cigarettes to the general public.
- 1954: The “Marlboro Man” ad was introduced by Phillip Morris, to promote the idea that men who smoke are more masculine and virile. The American Medical Association Board banned all advertising of tobacco and alcohol in their publications.
- 1959: The Surgeon General published the U.S. Public Health Services’ position that cigarette smoking causes lung cancer.
- 1964: The first *Surgeon General’s Report on Smoking and Health* was published. Ten scientists spent 14 months reviewing the scientific literature from all over the world. Per capita consumption dropped by 2% after the publication of the report. This report was pivotal in changing the smoking habits of Americans.
- 1971: Tobacco companies could no longer advertise in the broadcast media, which included television and radio. However, the ban did not include advertising in magazines and newspapers.
- 1986: The 19th *Surgeon General’s Report* reported that smokeless tobacco (chewing tobacco and snuff) is addictive.
- 1987: The U.S. Congress banned smoking on airline flights of less than two hours.

- 1992: Wayne McLaren, the world-famous “Marlboro Man,” died of lung cancer at the age of 51.
- 1994: Mississippi became the first state to sue tobacco companies for the cost of health care associated with smoking-related diseases. Other states followed. FDA announced it could consider regulating nicotine in cigarettes as a drug in response to a Citizen’s Petition by the Coalition on Smoking OR Health.
- 1996: FDA declared cigarettes to be “drug delivery devices.” Restrictions were proposed on marketing and sales to reduce the incidence of smoking by young people.
- 1996: Scientists announced that they found a direct chemical link between a substance found in tobacco tar and the development of cancer. Lawsuits proliferated in Minnesota, Mississippi, West Virginia, and Florida for smokers seeking reimbursements from the states for the costs of medical care for smoking-related illnesses.
- 1997: Nonsmoking bars became the norm in California. In San Francisco, the Board of Supervisors, with prodding from the San Francisco Medical Society and other anti-smoking and health-related groups, banned outdoor advertising of tobacco products.
- 1998: Forty-six States’ attorney generals and the tobacco industry arrived at a settlement with four of the largest tobacco companies in the United States, known as the Tobacco Master Settlement Agreement (MSA). (More on MSA in Question 95.) The States agreed to limit further lawsuits against the tobacco industry in exchange for higher taxes on cigarettes to pay for the States’ tobacco-related medical expenses. Tobacco companies also agreed to compensate the States \$206 billion to establish tobacco smoking prevention programs.
- 1999: Phillip Morris admitted publicly that smoking causes cancer.

- 2000: The U.S. Supreme Court, upholding an earlier decision in the Food and Drug Administration v. Brown & Williamson Tobacco Corp. et al., ruled 5 to 4 that the FDA did not have authority to regulate tobacco as a drug. Within weeks of this ruling, FDA revoked its final rule, issued in 1996, that restricted the sale and distribution of cigarettes and smokeless tobacco products to children and adolescents, and that determined that cigarettes and smokeless tobacco products are combination products consisting of a drug (nicotine) and device components intended to deliver nicotine to the body.
- 1950–2004: The proportion of adult smokers in the United States declined from a high of 46% in the 1950s to a low of 21% in 2004.
- 2004–2008: Smoking continues to decline in American society, but because of globalization, its use continues to grow internationally.

#### *4. What are the different ways in which tobacco is consumed?*

Tobacco can be ingested in many forms. Native Americans produced tobacco to be consumed as a beverage but mainly ingested it by smoking it using a pipe. A paste of moistened tobacco applied to the skin was a common remedy for insect bites and stings, and tobacco has been used to control minor bleeding as well as an antiseptic, as it kills many bacteria. Occasionally, it was used medicinally as an enema, but this method was far too dangerous because the high risk of overdose. It was therefore limited to smoking by shamans as a method for achieving visions.

Chewing and snorting are also utilized. Finally, tobacco is absorbed easily through the skin, and people have been known to put snuff between their toes as a method of remaining inconspicuous while using it.

Cigarette smoking gained popularity after the Civil War when cigarette sales surged. By the twentieth century, the growth of cigarette smoking was exponential across all classes of people, both males and females.

## Pipes

Traditionally, indigenous people of North and South America used pipe ceremonies to celebrate their religious and community festivals. Sacred pipes are still commonly used today as they were in the past for traditional Native American ceremonies. Pipe smoking also occurred at the completion of a bargain or contract. Traditionally, people who belonged to the tribes of North and South America did not use tobacco outside of these highly ritualized occasions. Because tobacco was considered a gift from the Gods, misusing it would result in an illness that was considered to be from the wrath of the Gods or Spirits.

## Cigarettes

Today and during most of the twentieth century, cigarette smoking is the most common method of tobacco use. After the Civil War, the shift to cigarette smoking from chewing tobacco, snuff, and pipe smoking, constituted a profound change in the production and consumption of tobacco. The earliest cigarettes were made during the seventeenth century and were wrapped in cornhusks. Following the Civil War, Duke & Company (based in Durham NC) was one of the first companies to mass-produce cigarettes. The tobacco manufacturer also produced other tobacco products. Duke began packaging cigarettes in 1879. Duke is considered the “father” of the modern tobacco industry, which has dominated the American economy from that time until now. As late as the 1920s, it was still unclear which method of tobacco use would be the most popular, but by the late 1930s and 1940s, cigarettes were the most widely manufactured form of tobacco among Americans.

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*Today and during most of the 20th century, cigarette smoking is the most common method of tobacco use.*

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## **Cigars**

Cigars are not as easily mass-produced as are cigarettes. Manufacturing cigars is more labor intensive, as the tobacco leaves are hand rolled, and therefore cigars are more expensive and not marketed as extensively as other forms of tobacco. Educated urban and well-to-do men enjoyed a pipe or cigar because tobacco smoking was a symbol of power during the late 1800s and the early 1900s. Cigars and pipes were typically smoked in men's parlors and drawing rooms. The transition from cigars and pipes to cigarettes occurred during and after World War I and continued through World War II. By the end of WWII, cigarettes were clearly the most popular means of tobacco use by rich and poor alike. After the Cuban Missile Crisis, Cuban cigars were banned from importation to the United States, which also contributed to an increase in the U.S. cigarette market.

## **Snuff**

In some Native American tribes, tobacco was used by medicine men for its medicinal properties and was frequently chewed. Snuff was popular during the seventeenth and eighteenth centuries throughout the United States and Europe. Snuff is a generic term for fine-ground smokeless tobacco. European snuff is generally snorted while American snuff is generally dipped. Dry snuff is sniffed up the nose. Dipped snuff is a moist tobacco paste that is held between the cheek or lip and the gums, allowing the nicotine to be absorbed in that manner. Until the early twentieth century, snuff dipping was popular in rural America, especially in the South. Popular brands of snuff were Copenhagen, Skoal, Timber Wolf, Chisholm, Grizzly, and Kodiak, and many of these brands are still found in tobacco shops today. Some smokeless tobacco, such as Kodiak, contains a higher dose of nicotine than cigarettes. Snuff can damage human organs and lead to cancer of the mouth and other types of cancers as well as heart disease and other illnesses. Badly stained teeth are found in smokeless tobacco users.

## Chewing Tobacco

For many years, chewing tobacco was the most common means of using tobacco. Native Americans in both North and South America chewed the leaves of tobacco, which were frequently mixed with lime. The “twist” is the oldest form of chewing tobacco. Three high quality tobacco leaves are braided together and twisted into a rope and then cured. It still can be found in some stores in Appalachia. Chewing tobacco was popular in both the North and South among soldiers and farmers prior to, during, and after the Civil War. Spittoons could be found in many public buildings, both in urban and rural America. Today the spittoon is an antique. Periodontal disease and oral cancers are more commonly found in tobacco chewers.

## Bidis

Bidis are cheap cigarettes made from inferior tobacco products and laced with flavors such as chocolate, vanilla, and strawberry. Bidis come from Asia, particularly poverty-stricken India where they are very popular. Bidis can be found in convenience stores and gas stations across the United States and have gained popularity among American teens because of their sweet, aromatic flavors.

## Hookahs

Tall water pipes (hookahs) have been used for centuries in the Middle East and in South Asia. They have recently gained popularity among American college students. Hookah tobacco is soaked in molasses and mixed with pulp from various fruits, such as mint, mango, or apples. It is smoked communally, using disposable mouthpieces. There remains a myth among some people that water pipe smoking is safer than smoking cigarettes. Smoking from a hookah may be more dangerous than traditional forms of smoking. The tobacco contains more tar and nicotine than cigarettes and also may contain heavy metals. Additionally, hookah smoke produces