

Stopping Tobacco Use After a Cancer Diagnosis

Resources and Guidance for Patients and Families



Cancer.Net

Doctor-Approved Patient Information from ASCO®



ABOUT ASCO

Founded in 1964, the American Society of Clinical Oncology, Inc. (ASCO®) is committed to making a world of difference in cancer care. As the world's leading organization of its kind, ASCO represents more than 40,000 oncology professionals who care for people living with cancer. Through research, education, and promotion of the highest-quality patient care, ASCO works to conquer cancer and create a world where cancer is prevented or cured, and every survivor is healthy. ASCO is supported by its affiliate organization, the Conquer Cancer Foundation. Learn more at www.ASCO.org, explore patient education resources at www.Cancer.Net, and follow us on Facebook, Twitter, LinkedIn, and YouTube.

Cancer.Net

Doctor-Approved Patient Information from ASCO®

ABOUT CANCER.NET

Cancer.Net provides timely, comprehensive, oncologist-approved information from the American Society of Clinical Oncology (ASCO), with support from the Conquer Cancer Foundation. Cancer.Net brings the expertise and resources of ASCO to people living with cancer and those who care for and about them to help patients and families make informed health care decisions. Follow us on Facebook, Twitter, and Youtube.

ASCO patient education programs are supported by:

CONQUER CANCER™
THE ASCO FOUNDATION

Stopping Tobacco Use After a Cancer Diagnosis

Table of Contents

Introduction	4
Benefits of Quitting	5
Talking with Your Doctor about Your Tobacco Use	6
Myths about quitting smoking	8
How to Quit Smoking and Using Tobacco	10
Medications	10
Counseling	11
Mobile apps	11
Electronic cigarettes and other forms of tobacco	12
Have realistic expectations	13
Your Plan to Quit	14
Resources to Help You Quit	16

The ideas and opinions expressed in the *Stopping Tobacco Use After a Cancer Diagnosis* booklet do not necessarily reflect the opinions of ASCO or the Conquer Cancer Foundation. The information in this guide is not intended as medical or legal advice, or as a substitute for consultation with a physician or other licensed health care provider. Patients with health-related questions should call or see their physician or other health care provider promptly, and should not disregard professional medical advice, or delay seeking it, because of information encountered in this booklet. The mention of any product, service, or treatment in this guide should not be construed as an ASCO endorsement. ASCO is not responsible for any injury or damage to persons or property arising out of or related to any use of ASCO's patient education materials, or to any errors or omissions.

Introduction

If you or a loved one has been diagnosed with cancer, quitting tobacco use is one of the best goals a person can have to improve the chances of successful cancer treatment. Many believe that smoking caused their cancer and feel like they have brought this on themselves. Others believe that it is too late to quit, that the damage has already been done. People who use tobacco should not blame themselves for a cancer diagnosis or feel that nothing can be done to help them. Quitting can have immediate benefits.

It is never too late to stop using tobacco.

Quitting smoking is difficult, and most people have tried several times to quit smoking. It is extremely important to commit to quitting and to ask for help. Many treatment options and resources exist to help you achieve your goal. Quitting is always possible. Your entire health care team can be involved in helping you. This booklet can help you learn more about the benefits of stopping tobacco use after a cancer diagnosis. It includes lists of programs and other resources that can help you reach this goal.

You can download this booklet as a printable PDF (www.cancer.net/tobacco) or order printed copies through the ASCO University Bookstore (www.cancer.net/estore).



Benefits of Quitting

Stopping tobacco use after a cancer diagnosis offers many physical and mental benefits, including:

- Live longer
- A better chance of successful treatment
- Fewer and less serious side effects from cancer treatment, including surgery, chemotherapy, and radiation therapy
- Faster recovery from treatment
- Less risk of secondary cancers
- Lower risk of infection
- Easier breathing
- More energy
- Better quality of life



Continuing to use tobacco after a cancer diagnosis presents these risks:

- Shorter life
- Lower chance of successful treatment
- More problems from surgery, such as slower wound healing, infection, scarring, and more time in the hospital
- More side effects from chemotherapy, such as infection, fatigue, heart and lung problems, and weight loss
- Additional side effects from radiation therapy, such as dry mouth, mouth sores, loss of taste, and scarring after treatment, which can affect how you breathe, how your bowels and urinary tract work, and how your skin looks
- Increased risk of the cancer coming back after treatment
- Increased risk of other serious illnesses, such as heart and lung diseases, or a second cancer
- Poor quality of life

Talking with Your Doctor about Your Tobacco Use

Many people with cancer may not want to tell their doctor or another member of the health care team about their tobacco use. Why?

- They worry that the doctor or their family will judge or blame them.
- They think that they may receive less support for their cancer treatment.
- They believe that quitting after a cancer diagnosis is pointless; the damage is already done.
- They feel that they will need to use tobacco to handle the stress of living with cancer.
- They have tried to quit before but just can't stop.

You may have these feelings, but it is critical to know that quitting tobacco use at any time can improve your health, even after a cancer diagnosis. Your health care team wants to help you reach this goal.



Many people believe that smoking and using tobacco is a lifestyle choice. It is not. It is an addiction. No matter what your level of tobacco use, your addiction will make it harder to stop, even if you want to quit. Quitting tobacco use is a cycle. Many people will need to try many times before they finally reach their goal of a tobacco-free life.

To give yourself the best chance to quit, you need to talk openly and honestly with your doctor about your tobacco use. Your doctor needs to know how much nicotine you use to find the right treatment to help you quit. Let your doctor know if your spouse, family, or close friends use tobacco, too.

Think about your tobacco use and read the questions below. You will want to let your doctor know about your history of tobacco use.

- Have you ever smoked (at least 100 cigarettes in your life)?
- Do you smoke every day or some days?
- How soon after waking up do you smoke your first cigarette?
- How many years have you been smoking?

- How many cigarettes do you smoke per day?
- How old were you when you started smoking?
- If you've quit or cut down, how long has it been since you smoked regularly?
- How many times have you tried to quit smoking? How long were you able to quit each time?
- What methods have you used or are using now to try to quit smoking?
- Do people in your household smoke?
- Is smoking allowed in your workplace?
- Have you ever used forms of tobacco other than cigarettes? How often you have used them?
- Has your tobacco use changed after being diagnosed with cancer?

QUESTIONS TO ASK YOUR DOCTOR

Your doctor is your partner in your effort to quit. Consider asking your doctor the following questions:

- What medications can help me stop?
- How can I change my lifestyle to make quitting easier?
- How can I avoid situations that make me want to smoke or use tobacco?
- How can you and your team help me manage the stress of quitting along with the stress of a cancer diagnosis?
- What resources for quitting smoking or tobacco use are in my community?
- How can my family and friends help me?
- How often should we discuss my progress?

Myths about quitting smoking

Myth: Smoking is entirely a personal choice.

Fact: Tobacco contains nicotine. Nicotine is addictive. Nicotine addiction is so powerful that it can be considered a “brain disease” because of the way it affects receptors in the brain and throughout the body. Many people who start smoking quickly become addicted to nicotine. The Heaviness of Smoking Index (HSI) is a simple way of measuring the strength of a person’s addiction to nicotine.

HEAVINESS OF SMOKING INDEX (HSI)

On the days that you smoke, how soon after you wake up do you have your first cigarette?

1. Within 5 minutes (3 points)
2. 6–30 minutes (2 points)
3. 31–60 minutes (1 point)
4. After 60 minutes (0 points)

How many cigarettes do you typically smoke per day?

1. 10 or fewer (0 points)
2. 11–20 (1 point)
3. 21–30 (2 points)
4. 31 or more (3 points)

Results *(add up your points)*

0–2 points: low addiction

3–4 points: moderate addiction

5–6 points: high addiction

Myth: There is no point in quitting smoking now that I have cancer.

Fact: It is never too late to quit smoking. People who quit smoking after a cancer diagnosis live longer, have a better chance of successful treatment, have fewer side effects from treatment, recover faster, and have a better quality of life.

Myth: Smoking will help me deal with the stresses of cancer treatment. It will be too stressful to quit smoking at the same time.

Fact: Nicotine does not help with stress relief. The calming effect you feel when you smoke is actually the relief of nicotine withdrawal. The symptoms of nicotine withdrawal can begin just 20 minutes after your last cigarette. Breaking a nicotine addiction is hard and uncomfortable. But the health benefits of quitting outweigh the discomfort.

Myth: Smokers can quit on their own. A doctor's advice isn't needed.

Fact: Smoking is an addiction. While some people are able to quit on their own, most people are more successful when they have the help of clinicians, family, and friends. There are many effective tools to improve your chances of quitting. Doctors and other members of a health care team are available to provide support, information, and any necessary medications to help people quit.

Myth: Most tobacco-quitting programs have a low success rate.

Fact: Quitting smoking is hard and often requires several attempts until a person is permanently tobacco-free. Research has proven that counseling and medications improve the odds that you can quit smoking for the long term. There are several medications that can help you deal with nicotine withdrawal. Ask your doctor and other members of your health care team for help.

Myth: If my doctor does not discuss tobacco use, then it must not be important for my cancer treatment.

Fact: The data are conclusive. In 2014, the Surgeon General released the report *The Health Consequences of Smoking—50 Years of Progress*. The report concludes that cancer patients and survivors who smoke are at increased risk of cancer coming back, getting a second cancer, and death. The dangerous risks of smoking apply to all cancer types and treatments.

How to Quit Smoking and Using Tobacco

Many treatments and resources can help you stop using tobacco, including medications and counseling. But the first step in quitting is to **commit to quit**. Then, you need to set a plan. Having a plan increases your chances of quitting successfully. A **strong plan** will include:

- A quit date
- Plans for dealing with situations that make you want to smoke or use tobacco
- A support network

Talk with your doctor about putting together a treatment plan to help you quit. Remember, it may take several attempts to successfully quit tobacco use. Don't give up.



Medications

Using medication can at least double your chances of quitting smoking. The U.S. Food and Drug Administration (FDA) has approved several medications to treat nicotine addiction. If you have health insurance, medications to help you quit tobacco use may be covered.

Nicotine replacement therapy (NRT). NRT is the most widely used medication for quitting. It has mild side effects and is available over the counter and by prescription. NRT lessens the symptoms of nicotine withdrawal and cravings. Your doctor will help find the best dose for you based on your current smoking habits. NRT comes in several forms:

- Gum
- Lozenges
- Skin patches
- Inhalers
- Nasal sprays

Bupropion (Wellbutrin, Zyban). This medication can reduce withdrawal symptoms. Common side effects include dry mouth and difficulty falling asleep or staying asleep.

Varenicline (Chantix). This medication reduces withdrawal symptoms and keeps you from enjoying nicotine if you start smoking again. Common side effects include nausea, vivid dreams, constipation, and drowsiness.



Counseling

In addition to medication, counseling can be used to help with stopping tobacco use. Counseling increases your chances of successfully quitting. Your doctor can refer you to a professionally trained counselor or mental health therapist to help you. A counselor can help you set up a tobacco-free environment and change behaviors and identify triggers that make you want to use tobacco. It is helpful for people who:

- Have tried several times to quit but have not been successful
- Experience severe feelings of anxiety or depression
- Do not have enough support from family and friends to quit
- Are dependent on alcohol or other substances

Medicare, Medicaid, and private insurers cover different types of tobacco-quitting programs and at different coverage levels. Talk with a nurse, social worker, or other member of your health care team to learn what may be covered through your insurance policy. If you do not have insurance, these people can help you explore other options.

Mobile apps

If you want a little extra help in stopping your tobacco use, you can try using a mobile app for your smartphone, laptop, or other mobile device. Studies have shown that using apps like this can help motivate you to reach your goal. There are a lot of apps available, but only

some of them offer reliable, science-based support. Some apps actively try to encourage people to smoke more! Be sure to choose apps carefully, and when in doubt, ask your health care team for guidance. A list of a few mobile apps is located in the **Resources to Help You Quit** section of this booklet (p. 16).

Electronic cigarettes and other forms of tobacco

Some people think that switching to smoking electronic cigarettes will help them quit smoking tobacco cigarettes. Electronic cigarettes are also known as e-cigarettes and vapor cigarettes. E-cigarettes vaporize a nicotine fluid, which mimics the smoke that comes from burning tobacco in traditional cigarettes. This is why some people refer to using e-cigarettes as “vaping.”



E-cigarettes are a relatively new product, and the market is changing rapidly. There are thousands of e-cigarette devices and liquids available. E-cigarettes are currently not regulated by the FDA. There are also no regulations or quality controls guiding the manufacturing of the devices. The FDA does not approve their use as a way of quitting smoking. In 2015, ASCO and the American

Association for Cancer Research (AACR) issued a joint statement on electronic nicotine delivery systems or ENDS. ASCO and AACR agree that there is not enough scientific research to say that this is a safe and effective way to quit tobacco use and do not endorse their use as a quitting aid. More research is needed to understand if e-cigarettes can harm or improve health.

In addition to e-cigarettes, some people think about going from smoking cigarettes to smoking pipes or cigars instead. This is not an effective way to stop smoking. All forms of smoking tobacco, including pipes, cigars, and cigarillos, contain carcinogens and are not safe alternatives to cigarettes. Waterpipes, or hookahs, present the same dangers as other forms of tobacco smoking, even though the smoke is first passed through water. In fact, smoking through a waterpipe can expose you to higher amounts of toxins than smoking cigarettes.

Smokeless tobaccos, such as chewing tobacco, snuff, snus, and dissolved tobacco, are also not an effective way to stop tobacco use. Many people feel that smokeless tobacco is less dangerous than smoking cigarettes, cigars, pipes, and cigarillos. However, even smokeless tobacco products contain nicotine and other chemicals that increase the risk of cancer, particularly oral cancer.

Have realistic expectations

Different people will have different experiences with stopping tobacco use. However, it is helpful to prepare yourself for the reality of what it is like to stop using tobacco.

When you first stop, you will likely experience the symptoms of nicotine withdrawal. Common symptoms of nicotine withdrawal include:

- Urges to smoke
- Irritability
- Difficulty concentrating
- Restlessness
- Increased appetite
- Anxiety
- Feeling depressed



These symptoms are usually at their strongest in the first few days after quitting. About 1 to 2 weeks after stopping, the symptoms will usually lessen. However, if you have a strong addiction to nicotine, these symptoms may last for weeks or months. Some people have mild withdrawal symptoms, whereas others have moderate or severe symptoms. The uncomfortable symptoms of withdrawal often draw people back to tobacco use. Even many years after successfully quitting tobacco use, people have gone back to a smoking habit because they've been exposed to other people smoking. Overcoming a nicotine addiction can be a life-long process. Do not be afraid to ask for help and support coping with the symptoms of nicotine withdrawal.

Your Plan to Quit

If you are going to stop using tobacco, having a plan will improve your chances of reaching your goal. A plan will answer the following questions:

Do I want to quit?

How soon can I quit?

What is stopping me from quitting?

What scares me about quitting?

(If you have tried to quit before.) What made me start smoking again? What can I change this time to quit for good?

How can I work with my doctor and other health care team members to create a good plan that will help me quit?



When you collaborate with a health care team member on your plan to quit, you can take the following steps to improve your chances of reaching your goal:

- Talk with your doctor, nurse, or other health care professional about stopping tobacco use and ask for support
- Call a quitline (see p. 16)
- Enroll in an online program for stopping tobacco use
- Ask to meet with a tobacco cessation specialist
- Ask about medications that can help you stop using tobacco
- Ask for help identifying and managing situations that make you want to use tobacco

Resources to Help You Quit

The following resources can help you quit smoking and using tobacco products. Most of these are free, but some charge a fee. Because programs and services continually change, visit Cancer.Net (www.cancer.net/tobacco) to find the most current information.

QUITLINES

American Cancer Society: Quit for Life

866-QUIT-4-LIFE (866-784-8454); 24 hours a day, 7 days a week (except Thanksgiving, Christmas, and July 4)
www.quitnow.net

American Lung Association

800-LUNGUSA (800-586-4872)
www.lung.org/support-and-community/lung-helpline-and-tobacco-quitline

National Cancer Institute (Smokefree.gov)

Local and state: 800-QUIT-NOW (800-784-8669)
NCI's telephone quitline: 877-44U-QUIT (877-448-7848); TTY 800-332-8615; 8 AM to 8 PM ET, Monday through Friday (English and Spanish)

U.S. Department of Defense: Quit Tobacco

24-hour helpline for TRICARE beneficiaries

- North Region: 866-459-8766
- South Region: 877-414-9949
- West Region: 866-244-6870
- Veterans enrolled in the VA system: 877-222-8387

SUPPORT GROUPS AND PROGRAMS

American Cancer Society: Quit for Life

www.quitnow.net

American Legacy Foundation:

Become an EX
www.becomeanex.org

American Lung Association: Freedom From Smoking Online

www.ffsonline.org

My Time to Quit

www.mytimetoquit.com

National Cancer Institute (NCI)

www.smokefree.gov
women.smokefree.gov
teen.smokefree.gov
LiveHelp, live online chat assistance, is available 8 AM to 11 PM ET, Monday through Friday (English only).

Nicotine Anonymous

www.nicotine-anonymous.org

QuitNet, Inc.

www.quitnet.com

U.S. Department of Defense: Quit

Tobacco (*for active service members and veterans*)

www.ucanquit2.org

Tips from Former Smokers

www.cdc.gov/tobacco/campaign/tips

U.S. Food and Drug Administration

FDA 101: Smoking Cessation Products

www.fda.gov/ForConsumers/ConsumerUpdates/ucm198176.htm

INFORMATION**Agency for Healthcare Research and Quality**

Help for Smokers and Other Tobacco Users

www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/clinicians/tearsheets/helpsmokers.html

MOBILE APPS**LIVESTRONG.com: MyQuit Coach**

www.livestrong.com/mobile-apps

quitSTART

www.smokefree.gov/apps-quitstart

Centers for Disease Control and Prevention

Five Keys for Quitting Smoking

www.cdc.gov/tobacco/quit_smoking/how_to_quit/you_can_quit/five_keys

Looking for Other Patient Information Resources?

ASCO ANSWERS GUIDES

ASCO Answers Guides feature comprehensive information about the diagnosis, treatment, side effects, and psychosocial effects of a specific cancer type, as well as practical information for patients and families.

ASCO ANSWERS FACT SHEETS

ASCO Answers Fact Sheets provide a one-page (front and back) introduction to a specific type of cancer or cancer-related topic. Each includes an overview, illustration, terms to know, and questions to ask the health care team. Cancer.Net has more than 65 fact sheets available (including some in Spanish), covering different cancer types, diagnosis and treatment, and side effects.

ASCO ANSWERS BOOKLETS

ASCO Answers Booklets provide in-depth, practical guidance on specific topics in cancer care.

For Patients and Caregivers: If you are interested in additional educational materials, visit www.cancer.net/ascoanswers to find all of our available materials in electronic format.

For Oncology Professionals: Bulk quantities are available for purchase. Bundled versions are also available for purchase. Bundles include guides for oncology professionals and patient guides. Available bundles cover survivorship, weight management, and tobacco cessation. Visit www.cancer.net/estore or call 1-888-273-3508 to place your order. To request free promotional materials for your practice, please send an email to contactus@cancer.net.

ASCO[®] answers

WE WANT TO HEAR FROM YOU

If you found this material helpful or if you have comments or suggestions about how they could be better, please let us know at contactus@cancer.net.

American Society of Clinical Oncology

2318 Mill Road, Suite 800 | Alexandria, VA 22314

Phone: 571-483-1300 | Fax: 571-366-9530

www.asco.org | www.cancer.net

For more information about ASCO's patient information resources, call toll-free 888-651-3038 or e-mail contactus@cancer.net. To order more copies of this booklet, call 888-273-3508 or visit www.cancer.net/estore.

© 2016 American Society of Clinical Oncology.

For permissions information, contact permissions@asco.org.

TOBPT16