How to stop smoking and stay stopped

- How to put together your stop smoking plan.
- Common problems and their solutions.
- Stop smoking medications – which one is the best for you?
- Where you can get help.
We are happy to consider requests for translations in alternative languages and formats. Please contact our publications team at alternative.formats@health.scot.nhs.uk or telephone 0131 536 5500.

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Further copies can be obtained from local health promotion resource services. This document can be downloaded as a PDF from www.healthscotland.com
About this booklet

This booklet is for smokers who are seriously thinking about stopping smoking. The original text was written by a stop smoking adviser – an ex-smoker – who had been helping smokers to stop for more than 30 years, but this has been adapted slightly in revised editions. It draws on their experiences, their struggles and their achievements. If you follow the steps set out here, you will be on a path followed successfully by thousands of smokers before you.

Reading this booklet will help you finally decide if you are ready to stop, and then how to go about it.

You don’t have to do it alone. If you want to try, but you think you may need help, there are many options: you can talk to your pharmacist or GP, ring Smokeline 0800 84 84 84, log-on to www.canstopsmoking.com or get help from your local stop smoking services (also known as ‘smoking cessation services’). You can get details of these services from Smokeline.

If you are not sure about stopping yet, why not read Aspire magazine, which is written to help you make up your mind. Details are on page 36.
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This booklet will help you, by taking you through the process of stopping in a simple step-by-step way.

It will help you decide if you really want to stop and the best way to go about it. It will then help you through the first few weeks to help you stay stopped. Keep it with you during this period.

It answers common questions smokers have about stopping and gives information about nicotine replacement therapy, bupropion (Zyban) and varenicline (Champix), and about the stop smoking services for smokers. The booklet was tested with real smokers and the quotations about the booklet are from them.

If you follow the steps in this booklet, you can stop smoking.

Good luck.
Preparing to stop smoking can take anything from days to months. It is worth taking time to prepare properly. It is easily the most important part of the process. If you want to stop, and you prepare carefully, you can succeed.

It is important that you don’t try to stop until you are sure you are ready – to give you the best chance of staying stopped.

Stopping smoking is a bit like going through a revolving door. You may succeed first time, but most smokers go round several times before eventually leaving it. So if you don’t stop the first time you try, don’t worry. Have a break, get your energy back, and try again. Eventually you will succeed.
Stopping smoking is a choice

When you finish this section, you will:

- be sure you want to stop
- know why you want to stop
- be ready to make a plan that will work for you.

The key to success is wanting to stop, then preparing thoroughly, because there is no quick fix. That is why it is worth taking time on this section. Stopping smoking will affect the rest of your life – it’s worth doing properly.

‘I think it is good when it says don’t try to stop smoking until you are ready. If you are not ready in your own mind, then it is not going to work.’
AR, Prestwick
Thinking about stopping

Do I really want to stop?

The following list may help you decide. Tick your reasons and add your own. This is your list. Keep it handy over the next few weeks.

I want to stop because:

☐ I want to improve my health.
☐ I want my children to grow up non-smokers.
☐ I want to be more considerate to other people.
☐ The money I save will be useful.
☐ I want my clothes fresh and free from stale smoke.
☐ It’s more sociable to be smoke-free these days.
☐ I don’t like being addicted.
☐ I don’t want my family, friends or pets to suffer from passive smoking, even if I smoke outside.

☐ ____________________________________________________________________________

If you want to discuss your reasons, why not talk to a friend, or contact Smokeline 0800 84 84 84.
‘It is you that has to stop and not because somebody is pressuring you. You are the only person that can make the decision.’
JM, Dunfermline

## Why it’s worth stopping

### Did you know that in:

<table>
<thead>
<tr>
<th>Time</th>
<th>Effect</th>
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<tbody>
<tr>
<td>20 minutes</td>
<td>Pulse rate drops</td>
</tr>
<tr>
<td>1 day</td>
<td>Carbon monoxide levels return to normal</td>
</tr>
<tr>
<td>Several days</td>
<td>Nicotine disappears from the blood</td>
</tr>
<tr>
<td>Several months</td>
<td>Shortness of breath decreases</td>
</tr>
<tr>
<td>1 year</td>
<td>Lung function improves</td>
</tr>
<tr>
<td>2–4 years</td>
<td>The risk of a heart attack falls considerably</td>
</tr>
<tr>
<td>10 years</td>
<td>The risk of lung cancer falls considerably</td>
</tr>
<tr>
<td>10–15 years</td>
<td>The risk of a heart attack or stroke is the same as someone who never smoked</td>
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Thinking about stopping

Problems or excuses?

When you start thinking about stopping, and suddenly you think of lots of problems, you need to ask yourself if they are real problems or if you are looking for excuses not to stop. For example:

‘This isn’t the right time.’

There are times when it may be more difficult to stop, for example, when you are under a lot of stress. But this can also be used as an excuse. Ideally the best time to stop is as soon as possible.

‘It’s too late; the damage is probably done already.’

If you stop smoking before you get seriously ill, you are likely to remain healthy because the damage from smoking builds up slowly over the years. Stopping at any age will improve your health, but obviously the sooner you stop, the better.
‘I haven’t got any willpower.’

Everyone has willpower, but it’s a bit like muscle power – you can increase it by exercising it. Think of something you did once just through sheer determination. That’s willpower; you’ve got it. You can learn to apply it to smoking.

‘The main thing that kept me going was the thought “I can prove it to myself and everyone else.” It was like an endurance test. Although everyone supported me, I did feel like they were waiting for me to fail.’

VF, Helensburgh

‘I may put on weight.’

Many people are afraid of putting on weight when they stop. However, some people do put on weight, others don’t, and some may even lose weight. The typical amount of weight gain is small compared to the health benefits of stopping smoking. If you are worried about putting on weight, go to page 14 for advice on reducing weight gain.
Some commonly asked questions:

**Should I cut down gradually, or stop completely, on day one?**

Some smokers want to cut down gradually because they are afraid to stop. Cutting down means that you are constantly thinking about when you can have the next cigarette. It can make withdrawal symptoms worse and last longer by lasting throughout the ‘cutting down’ phase, as well as after having quit. It also tends to make smokers inhale more deeply and take more puffs from the fewer cigarettes which they do smoke, in order to be able to achieve the same nicotine levels. If you want to cut down gradually, ask yourself why? If possible, stop completely on day one.

**Can I just switch to low tar cigarettes?**

The problem with low tar cigarettes is they usually contain less nicotine as well. As a result, you will almost certainly inhale more in order to get the amount of nicotine you are accustomed to, in the same way as tends to happen if people try to cut down their cigarette consumption. The
result can be inhaling more smoke and thus more tar. Unfortunately there is no safe cigarette and any amount of tar is not safe.

**Should I keep some cigarettes, just in case?**

Just in case what? In case you want to smoke? Again, you need to ask yourself why you would do this? Is it really because you are afraid to let go? Only you can answer this one because everyone is different, but you probably know the answer deep down. For most smokers, it’s not really a good idea.

**Should I tell colleagues or friends, or not?**

It depends on how you think they will react. If you think it will help to get their support, then tell them. If you think the smokers may be jealous and offer you a cigarette, then maybe not. You have to decide what you think will be most helpful.
Thinking about stopping

Coping with withdrawal symptoms and stress

Most smokers get withdrawal symptoms even if they are quite mild. They result from craving nicotine and the loss of a strong habit.

An average smoker will puff 200 times a day and 72,000 times a year, and each puff delivers nicotine to the brain incredibly efficiently – it takes just 7 seconds for the nicotine to go from the lungs to the brain.

The good news is that, for most smokers, the worst of the withdrawal is over in a month or so. It will, however, go more quickly if you can maintain your resolve.

‘My stress level was through the roof and I was thinking about cigarettes all the time, but in the end I thought it’s not going to beat me. It was hard but I did it.’

AM, Stirling

Medications (also known as pharmacotherapies) will help cope with the withdrawal (they are described on page 38–44), but there are also things you can do to reduce the stress.
Some simple stress reducers:

- Walk away from it – take a break, have a drink of water or juice.
- Try deep breathing and stretching your back, neck and arms; even just for a few minutes can help a lot.
- Phone a friend who makes you laugh or watch a comedy video in the evening if you can – laughter is relaxing and a great stress reducer.
- Be more active and take exercise if you can; even walking is good – walk the dog.

‘When I got so edgy and irritable that I knew I would explode if I stayed in the house, I would take the dog for a walk. I was going out about ten times a day taking the dog for a walk. The dog must have got absolutely knackered and after a month I reckon his legs were at least an inch shorter.’

DM, Aberdeen
Thinking about stopping

‘I’m worried about putting on weight.’

Some of the reasons smokers put on weight when they stop are:

- Nicotine reduces feelings of hunger, so you feel hungrier when you stop smoking.
- Nicotine speeds up the rate at which your body burns calories so you may find that you don’t burn calories as quickly as before.
- Food will start tasting better so you eat more.
- Most people who stop smoking tend to eat more calories. Most of these are taken as snacks between meals.

Here are a few simple tips:

- Avoid snacks, such as biscuits and cakes. Try fruit, breadsticks, crackers or oatcakes instead.
At mealtimes, eat lean red meat, chicken or fish (preferably not fried) instead of sausages or bacon, and include lots of fruit and vegetables.

Reduce alcohol consumption (alcohol is high in calories).

Become more active.

NRT may delay any possible weight gain while you are taking it. This means that you can focus your attention on quitting smoking now and make the changes to your diet later when you have more energy and confidence.
Thinking about stopping

Now see if you are ready to stop

You have thought about your reasons for stopping and how to cope with some of the problems you might face. It’s now time to decide if you are ready for the next stage – preparing to stop:

Are you sure you want to stop?  □ Yes  □ No

Are you sure about your reasons?  □ Yes  □ No

Are they your reasons?  □ Yes  □ No

Are you ready to move on to the next stage and start preparing to stop?  □ Yes  □ No

If you answered YES to every question, you’re ready to move on.
If you answered NO to some questions, and therefore you’re not quite sure if you’re ready to prepare to stop, work through this section again or perhaps talk to someone, e.g. a friend, your pharmacist or GP, a Smokeline adviser on 0800 84 84 84, or log-on to www.canstopsmoking.com

‘I like the idea of planning your time to stop because, in the past, every time I just did it when I felt “right now it’s time to stop”. The idea of thinking about when you are going to stop and when are going to be the difficult times, and writing things down – I hadn’t thought of doing that.’ HM, Dundee
Preparation to stop

Making a plan

If you approach stopping smoking like any other major change, with careful preparation and planning, you can succeed. The first step is to make a plan that will work for you. This is your action plan.

‘I think if you’re making any major change in your lifestyle, it’s always better to plan for it or prepare for it before you do it, whether it’s stopping smoking, or moving house, or whatever.’

DE, Glasgow
Firstly, decide if you are going to get advice or support of any kind. Tick all the options you want, or at least would like, to get information about:

I am going to get advice from □ Yes □ No
Smokeline 0800 84 84 84 (page 36)

I am going to talk to:

A friend or someone □ Yes □ No in my family

My doctor or pharmacist □ Yes □ No

My plan will include stop □ Yes □ No smoking medication(s) (page 38–44)

My plan will include support from □ Yes □ No a stop smoking service (see overleaf)

I am going to log-on to □ Yes □ No www.canstopsmoking.com
Preparing to stop

Stop smoking services

If you need more information, ring Smokeline, or your GP or pharmacist. They should be able to describe the stop smoking services and the medications.

The research shows that the more support you get, the better your chance of stopping smoking. If you use the stop smoking services in combination with the medication(s), you are much more likely to succeed – roughly four times as likely.

There are now specialist stop smoking services in every NHS Board in Scotland, providing support in groups and to individuals. These services will help you by giving expert advice and practical support, including help in choosing the medication(s) (NRT, bupropion [Zyban] or varenicline [Champix]), and reassurance and advice on withdrawal symptoms.

Your GP or Smokeline will be able to tell you about services in your area, or you can log-on to www.canstopsmoking.com to find out.
If you are unable to attend these services, or would prefer not to, don’t worry. Some smokers do give up just using stop smoking medications, such as NRT, bupropion (Zyban) or varenicline (Champix), or through willpower alone. In such cases, your GP will be able to provide advice on these medications. However, it’s much better to give yourself the best possible chance of succeeding long-term at stopping smoking by combining attendance at stop smoking services along with the medication.

‘The services are friendly and informal and provide lots of encouragement from the stop smoking adviser and support from others.’
VR, Edinburgh
Preparing to stop

Completing your action plan

Now you can complete your action plan. Remember that a good action plan is one you are happy with and is not punishing. Plan rewards for yourself over the first few (or couple of) weeks and months (see opposite).

Choose a day

Will the first few days be easier when you are busy or when you are relaxed?

I am stopping on ____________________________

Anticipate problems

On day one the biggest problem will be

__________________________________________

The solution is ____________________________

During the first week the biggest problem will be

__________________________________________

The solution is ____________________________
Plan rewards
Plan rewards for the end of day one, week one, and so on. Be careful that the reward does not sabotage your stop smoking plan, for example, alcohol (for obvious reasons) or too much high calorie food.

Change your routine
Smoking is strongly linked to certain times and situations – with your first cup of tea or coffee, or when talking on the phone. You need to break the link between the situation and the cigarette, and you can do this by changing your routine. For example, try drinking fruit juice instead of coffee for a while.

Review your plan
Look at your reasons for stopping (page 6) and your plan (pages 19 and 22). Are you ready to go?

Don’t take too much on over the first few days and weeks. Be kind to yourself. Try to relax at the end of each day. Even simple exercises, such as deep breathing and stretching can help. Keep this booklet with you. Good luck.
Here are some useful tips to help you get through the first few days.

Day one

Make time at the beginning of the day to review your plan.

Look at page 6 and remember why you are doing this.

If you find it almost impossible to drink without smoking, you might have to avoid alcohol for a short while. Okay, so it doesn’t sound much fun, but it is only temporary until you have got over the withdrawal symptoms. Eventually you will be able to go back to normal – without cigarettes.
One day at a time

Try not to think ahead. Try to take each minute, each hour, each day, one at a time. It will help a lot to concentrate on the present and not worry about how you are going to live without cigarettes for the rest of your life.

Live in the present. Your goal is to get through today without smoking. Tomorrow will come soon enough.

My reward for getting through day one is


Helpful hints

👉 If you need to put something in your mouth, try sugar-free chewing gum or something healthy and non-fattening, such as a carrot.

👉 If you need to do something with your hands, find something to fiddle with – a pencil, coin, worry beads, puzzle, or send a text message or log-on to www.canstopsmoking.com and use its interactive tools.

👉 Try drinking fruit juice or eating fruit when you feel like a cigarette – something that changes your routine.

👉 Why not save your cigarette money? A few smoke-free months could buy you a holiday.

Ring Smokeline 0800 84 84 84 or your stop smoking service if you need support.
Here are a few examples of rewards smokers in a stop smoking group/support (also known as ‘smoking cessation group/support’) thought of: a massage, a night out, leaving work early, a walk in the country, phoning a friend, going bowling, listening to music, watching the world go by for an hour in a coffee bar, watching television, playing a game, going to the cinema.
Week one

There will be times when your old smoking self rebels and tempts you to smoke. When it does, review your reasons for stopping.

Finish each day by congratulating yourself for getting through the day smoke-free. Start each day with a fresh commitment to stopping.

Try to take time out each day to relax; remember to be kind to yourself.

When you get the urge to smoke, do something to distract yourself: check the money you are saving, wash the car, walk the dog, ring or text a friend, do some gardening, listen to music. Above all, don’t start arguing with yourself about whether it is worth stopping. You made the decision.

Be careful about alcohol and try not to get bored; long empty periods may be difficult in the first few weeks.
My reward for getting through the first week will be

How to stop smoking
DOs and DON’Ts

DO think positively

There will be times when you feel tired and tempted to give in. Remember why you are stopping. Be positive. If you remain determined, the temptation will pass.

DON’T play games

One favourite is ‘one cigarette won’t hurt’ or ‘I’ll just have one to prove I’ve kicked it.’ The occasional cigarette will reawaken the craving. Recognise these games for what they are – a weakening of your resolve. Stamp on them firmly.

DO take care

After the first few weeks, especially if it was easy, your friends may stop encouraging you and even forget you are stopping. This period is crucial. Don’t become complacent and get into difficult situations. Use your common sense and remain vigilant. You’ve used your motivation to stop, and you’ll be able to use this same motivation and determination to stay stopped.
DON’T give in to ‘friends’ who offer you cigarettes

If ‘friends’ keep offering cigarettes – ‘oh go on, just one’ – they’re not good friends, or they may be jealous. If they persist, accept one but then break it up.

DO ring Smokeline 0800 84 84 84

They can provide details on your local stop smoking service.

DO log-on

Try out the ‘Quit Buddy’ on www.canstopsmoking.com
The first month

The first month will probably be up and down. It may even get more difficult after the first week, when you start getting a little tired.

At the end of the first week, sit down for 15 minutes and review your progress.

Were there any problems you did not anticipate? How are you going to deal with them next time?

Try to remember why you are doing this. Read pages 6 and 7 regularly. Remind yourself that you deserve better health.

Your enemies are:

boredom – keep busy

carelessness – stay alert, watch out for dangers, stay focused

tiredness – get support, don’t push yourself too much.
My reward for getting through the first month will be

‘The first week was hell. After that it was okay. I felt proud of the fact that I actually stopped smoking.’
NC, Cumbernauld

‘I had a very short fuse and was easily upset. The first month was the worst.’
BJ, Stornoway
A new life

When you haven’t smoked for a few months and are feeling confident, this could be a good time to look at other issues, including diet and weight. Use your new confidence to make other changes you want. Stopping smoking could be the beginning of a new life.

What if I smoke?

It’s not the end of the world. Most smokers stop several times before eventually succeeding. Have a break, don’t feel guilty, and when you are ready, try again.

How long does it take to become a non-smoker?

When you first stop smoking, you still think of yourself as a smoker. When stressed, your automatic reaction is still to want a cigarette. However, time changes this. For most smokers, the worst is over in 3 months.
Free at last

One day you will wake up and realise that you went the whole of the previous day without even thinking about cigarettes. When this happens, you have made it.

You have become a non-smoker.

‘A big turning point was 3 months. I suddenly realised that I was going 2 or 3 days without thinking about it.’
VS, Galashiels

‘I definitely feel a lot healthier. That’s one thing. The freedom is another – not having anything controlling your life. You don’t realise how it controls you when you are smoking – not until you stop. You think you’ll never get over wanting a cigarette, but you do and your life feels so much better without them.’
IR, Irvine
Further help

Smokeline

You can ring Smokeline free 0800 84 84 84 from noon until midnight for confidential support and advice. Smokeline is staffed by trained support staff who will be able to give you expert advice, as well as details of the stop smoking services in your area.

www.canstopsmoking.com

This website offers information and advice to stop smoking. Try out ‘Quit Buddy’ – sign-up to get email reminders and tips throughout your quit attempt, or else try the ‘Interactive Web Chat’ with trained support staff available every evening.

Aspire

Aspire magazine is packed with helpful and encouraging information aimed at smokers aspiring to give up. You can get a free copy from your GP practice, pharmacist or stop smoking adviser (also known as smoking cessation adviser), or you can find it online at www.healthscotland.com
Complementary therapies

You might have heard of hypnotherapy and acupuncture. However, there is no scientific evidence that they work any better than willpower, and they are not as effective as proven methods which are the stop smoking services and medications.

‘Something that has really struck me about giving up is how everyone is different. I thought that when I went to the group there would be a way of doing it and it would be the same for everyone. But everyone’s different. You have to find the way that’s right for you.’

AM, Edinburgh
There are currently three main types of stop smoking medications: nicotine replacement therapy, bupropion (Zyban) and varenicline (Champix). More products are being researched all the time.

They really work, although they are not magic cures and they will not do the hard work for you – you must want to stop and you must be prepared to try.

NRT and bupropion (Zyban) have similar success rates so you can choose the product that suits you best. Both have been extensively tested and available on prescription for some time now – since 2000/2001.

Varenicline (Champix) is the latest medication designed to help smokers to stop smoking. Trials and its use in stop smoking services suggest that it is also very effective, even more so than bupropion (Zyban), although it is still relatively early days. It has been on prescription since 2007 and so is still fairly new.

Scientific research trials show that these medications approximately double your chances of stopping. The best success rates are achieved, however, when smokers get
support from stop smoking services, along with using the medication(s), and this is really encouraged as it may even double your chances of stopping on top of this. It also means that services can discuss your medication(s) with you, and monitor or make changes to your medications use.

If you want more details about medications, we recommend you talk to your GP, pharmacist, local stop smoking service or ring Smokeline **0800 84 84 84**.

If you have decided to get support from the stop smoking services, they will also advise on the right medication(s) for you.

NRT can be bought over-the-counter from pharmacists, and some of them can be bought in ordinary shops. It is also available on prescription. Bupropion (Zyban) and varenicline (Champix) can only be used with a prescription from your doctor.
Nicotine replacement therapy (NRT)

How does NRT work?

NRT gets nicotine into your body – but only the nicotine, without the dangerous tar, carbon monoxide and other poisonous chemicals in tobacco smoke. It is also a lesser amount of nicotine than you would get from cigarettes.

It replaces the nicotine from tobacco, easing the withdrawal while you get used to becoming a non-smoker. You start taking it on your quit day when you stop smoking. Once you are comfortable without cigarettes, it’s easy to stop taking NRT before the end of the treatment course. However, only once you feel comfortable without cigarettes, are reaching the end of the treatment course and have adapted your behaviour accordingly (e.g. by replacing the associations with cigarettes by something else, such as fruit juice instead of coffee, or playing with a stressball instead of a cigarette), do you phase out NRT.

NRT is much safer and much less addictive than cigarettes and provides a ‘clean’ form of nicotine compared with the very dirty form you get from tobacco.
For several years now, it has been licensed for use by pregnant or breastfeeding women, young people over 12, and those with underlying diseases, such as cardiovascular disease, but these people should discuss this with their stop smoking adviser, pharmacist or GP, for further information. Use NRT according to the instructions on the packet and for as long as you need it.

**Which product?**

There are six NRT products. You can choose the one that is most practical for you as they have similar success rates.

**Patch** – discreet and easy to use.
Put on each morning, it is designed to be worn for 16 or 24 hours, and comes in different strengths. Heavier smokers should normally start with the highest dose patch. Patches supply a slow, steady dose of nicotine.

**Gum** – allows you to control the dose.
Comes in 2 mg or 4 mg strengths and various flavours. The taste can be unpleasant at first but most people get used to it in a week or so. Heavy smokers should normally start with the stronger gum.
Medications

**Inhalator** – a good choice if you need the ritual of smoking.
A plastic mouthpiece with a supply of nicotine cartridges which you draw on like a cigarette. Similar nicotine dose to the gum.

**Nasal spray** – fast acting; good for heavy smokers.
Small bottle of nicotine solution which delivers a spray of nicotine when you press the top. Nicotine absorption is very quick but it takes getting used to and can irritate the nose. If you still experience strong craving and withdrawal with the other NRT products, try the spray.

**Sublingual tablet** – discreet; you control the dose.
Placed under the tongue where it slowly dissolves. Works like the gum by allowing nicotine absorption through the mouth.

**Lozenge** – discreet; you control the dose.
Comes in various flavours. You suck slowly, occasionally resting it between gum and cheek. Works like the gum and tablet.

It’s also possible to use more than one type of NRT at a time if you are having particular difficulty in stopping smoking, but you should discuss this with your GP, pharmacist or stop smoking adviser to get the best advice.
Zyban

How does it work?

Zyban is the trade name for bupropion hydrochloride sustained-release (SR). It is available as a tablet. It does not contain nicotine and the way it helps smokers is not fully understood. However, like NRT, it works.

You start using bupropion (Zyban) while you are still smoking since it takes a few days to build up sufficient levels of the medicine in your body. You set a quit date in the second week of treatment.

Bupropion (Zyban) is available on prescription from your GP who will take a careful note of your medical history to make sure that this medicine is suitable for you. It is usually prescribed and/or used in conjunction with support from the stop smoking services for the reasons outlined on pages 38–39.

Some common side effects are sleeplessness, headaches, dizziness, depression and sweating.
Champix

How does it work?

Champix is the trade name for varenicline tartrate. It is a prescription-only medicine and is available as a tablet. It has been specifically developed to help people quit smoking. It is thought to work by reducing cravings and withdrawal symptoms when people are trying to stop smoking. It is started 1 to 2 weeks before a smoker’s quit date. The dose is built up over the first week and the usual course of treatment is 12 weeks. It is best prescribed and/or used in conjunction with support from the stop smoking services for the reasons outlined on pages 38–39.

The main reported side effect in studies in healthy volunteers was nausea. Varenicline (Champix) was licensed for use in the UK in December 2006, and approved for use in Scotland in early 2007 and, as with any new medications, side effects are being monitored by the Medicines and Healthcare Products Regulatory Agency as it becomes more widely used. Your GP, pharmacist or stop smoking adviser will have up-to-date details of these.
What smokers have said about this booklet:

‘It just made everything come together in my mind and I realised I could do it this time.’
JM, Kilmarnock

‘It actually encourages you to consider your own motivations for it, to remind yourself of it, and to plan around it, rather than just staggering into trying to stop. I really like the way it breaks it down in a realistic fashion.’
HM, Perth

‘I think it is really positive. It has lots of ideas in it. It is one of the least patronising things I have read.’
AR, Glasgow

‘It takes it a step at a time. It is definitely encouraging. It really has made me think about it.’
CC, Jedburgh

‘It doesn’t make you feel bad because you are a smoker. You’re allowed to be weak sometimes and if you slip up, don’t worry – just start again. There are things in here that I didn’t know you could get, lots of things I’d never heard of before.’
DE, Edinburgh

For free advice, call Smokeline 0800 84 84 84.

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