No Ifs, Ands or Butts

Smoking isn't a habit. It's an addiction. *by Kelsey Allen*



Photo: Luther Johnson

Johnny Adams has quit many things many times. Heroin, alcohol, cigarettes. But the addictions just kept rearing their ugly heads. "It was like a Whac-A-Mole game that would pop up," Adams says. A 45-year-old living in Chicago, Adams has been sober since June 2010, but he can't seem to kick his addiction to nicotine. "It is kind of absurd to live clean and sober but to succumb to smoking cigarettes," Adams says. "It's ridiculous, but it's very difficult."

And it is. An average cigarette has 10 to 15 puffs; a full pack provides 200 to 300 puffs of smoke. If someone is smoking a pack a day, that is 200 to 300 times that the nucleus accumbens (a collection of neurons in the brain that play an important role in pleasure and reward) are stimulated and the reward pathways in the brain are triggered.

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"That is why quitting is so difficult," says Robert Z. Friedman, M.D., medical director at Seabrook House, a treatment center in Bridgeton, N.J. "There is no other substance that stimulates the brain that way. People don't drink that way; they don't shoot heroin that way. The neural circuitry is so firmly ensconced, and that is why smoking is one of the most difficult substances to stop for people in and out of recovery." But for people struggling with other addictions, Friedman says, quitting is even more difficult because the reward system is more sensitive.

What makes it even harder for Adams is the fact that cigarettes don't actually make his life unmanageable. "Heroin gives your life a single purpose: getting more heroin," Adams says. "Cigarettes aren't like that. [They are] readily available and legal. It's not that I can't do my job or that I lose my sense of judgment. It doesn't seem like such a dangerous substance. I mean, I was shooting heroin. It's the lesser of the two."

The fact that the negative consequences of cigarette smoking often aren't felt until years of nicotine abuse may make it easier for addicts to deny the severe health risks—even when, like Adams, they understand just how damaging smoking can be. J. Taylor Hays, M.D., associate professor of medicine at the Mayo Clinic's Nicotine Dependence Center, says it's nicotine's consequence curve that can keep people from kicking the habit.

"If you use an illegal substance such as coke or meth, you will very quickly get into major trouble," Hays says. "With tobacco, the consequence curve is really long and shallow. Before someone gets lung cancer, they typically smoke 20 years. The same is true for lung disease. But when those occur, they will have extremely negative consequences on someone's life."

Hays says it is important to view tobacco not as a bad habit but as an addiction like any other. Because of that, people who have already overcome another addiction may have a better shot at quitting for good.

"People in recovery will recognize the principles," Hays says. "It really begins with motivation. That motivation can come from legal, family and social problems accrued from the use of these substances. With tobacco and smoking, it's often health problems, but increasingly, the social stigma and family discord are motivations."

It's a stigma with which Adams is well acquainted. He recently attended a support meeting in downtown Chicago and was smoking on the sidewalk during a break when a woman walked by him. "I had a feeling of shame come over me," Adams says. "She probably thinks I'm stupid because I'm smoking, and smokers are stupid. But it's not OK. I don't want to do it."

Friedman says that this shift in awareness is the first step in the right direction. "I want a patient to look at a cigarette and say, 'Why am I still doing something to hurt myself?' That cigarette wasn't about pleasure; it was about hurting oneself, one's lungs, one's physical capabilities."

Adams is on his journey to a full life in recovery, and this idea is something he is starting to understand. "I have an opportunity to take a look at everything that is going on in my life, and what a perfect time to take on all of these negative things," Adams says. "I can see myself not smoking. The evidence is there. I know it will happen." ■

HOW TO WIN AT QUITTING

1. Make the decision to quit. Think about why you want to quit and what motivates you to commit to quitting.

2. Set the date. Pick a quit date, draw up a plan of action and stick to it.

3. Prepare for your quit date. Talk to your doctor if you plan on using medication. Throw away ashtrays, lighters and cigarettes. Ask family and friends for support. Set up a system to reward yourself for good behavior.

4. Stop smoking. Do not smoke. Stay active, drink fluids and eat right. Change your routine.

5. Realize there will be withdrawal. There are going to be both physical and mental symptoms, but don't make excuses.

6. Reward yourself. You've just broken a behavior that was reinforced more than 100 times a day. Take the money you've saved, and treat yourself

RESOURCES

- **EX: Re-learn life without cigarettes** becomeanex.org
- **Quit Smoking for Life Apps** itunes.com/us/app/quit-smoking
- **Cost of Smoking Calculator** savingadvice.com/tools/calculators/cost_of_smoking.php
- **smokefree.gov**
- **quitsmokingsupport.com**
- **quitnet.com**
- **nicotine-anonymous.org**

