Behavioral Health Taking a Stand - Encouraging Sacred Use of Tobacco Only!

During the month of May Behavioral Health Prevention Team members posted signs around the Behavioral Health property, promoting the sacred use of tobacco. Beginning June 1st the signs will be updated prohibiting the use of any commercial tobacco products including but not limited to cigarettes, e-cigarettes, hookahs, pipes, cigars, smokeless tobacco, etc. within 50 feet of the Behavioral Health building and all buildings/lodges on the Behavioral Health campus. We are not stopping there! For the health of the community and our employees, the entire Behavioral Health campus will become smoke-free on Thursday, November 16, 2017 in conjunction with the American Cancer Society’s Great American Smoke-Out!
Drug Facts: Cigarettes and other Tobacco Products
www.drugabuse.gov

What is tobacco?
Tobacco is a plant grown for its leaves, which are dried and fermented before being put in tobacco products. Tobacco contains nicotine, an ingredient that can lead to addiction, which is why so many people who use tobacco find it difficult to quit. There are also many other potentially harmful chemicals found in tobacco or created by burning it.

How do people use tobacco?
People can smoke, chew, or sniff tobacco. Smoked tobacco products include cigarettes, cigars, bidis, and kreteks. Some people also smoke loose tobacco in a pipe or hookah (water pipe). Chewed tobacco products include chewing tobacco, snuff, dip, and snus; snuff can also be sniffed.

How does tobacco affect the brain?
The nicotine in any tobacco product readily absorbs into the blood when a person uses it. Upon entering the blood, nicotine immediately stimulates the adrenal glands to release the hormone epinephrine (adrenaline). Epinephrine stimulates the central nervous system and increases blood pressure, breathing, and heart rate. As with drugs such as cocaine and heroin, nicotine increases levels of the chemical messenger dopamine, which affects parts of the brain that control reward and pleasure. Studies suggest that other chemicals in tobacco smoke, such as acetaldehyde, may enhance nicotine’s effects on the brain.
What are other health effects of tobacco use?

Although nicotine is addictive, most of the severe health effects of tobacco use come from other chemicals. Tobacco smoking can lead to lung cancer, chronic bronchitis, and emphysema. It increases the risk of heart disease, which can lead to stroke or heart attack. Smoking has also been linked to other cancers, leukemia, cataracts, and pneumonia. All of these risks apply to use of any smoked product, including hookah tobacco. Smokeless tobacco increases the risk of cancer, especially mouth cancers.

Pregnant women who smoke cigarettes run an increased risk of miscarriage, stillborn or premature infants, or infants with low birth weight. Smoking while pregnant may also be associated with learning and behavioral problems in exposed children.

People who stand or sit near others who smoke are exposed to secondhand smoke, either coming from the burning end of the tobacco product or exhaled by the person who is smoking. Secondhand smoke exposure can also lead to lung cancer and heart disease. It can cause health problems in both adults and children, such as coughing, phlegm, reduced lung function, pneumonia, and bronchitis. Children exposed to secondhand smoke are at an increased risk of ear infections, severe asthma, lung infections, and death from sudden infant death syndrome.
How does tobacco use lead to addiction?
For many who use tobacco, long-term brain changes brought on by continued nicotine exposure result in addiction. When a person tries to quit, he or she may have withdrawal symptoms, including:

- irritability
- problems paying attention
- trouble sleeping
- increased appetite
- powerful cravings for tobacco

How can people get treatment for nicotine addiction?
Both behavioral treatments and medications can help people quit smoking, but the combination of medication with counseling is more effective than either alone.

The U.S. Department of Health and Human Services has established a national toll-free quitline, 1-800-QUIT-NOW, to serve as an access point for anyone seeking information and help in quitting smoking.

Behavioral Treatments
Behavioral treatments use a variety of methods to help people quit smoking, ranging from self-help materials to counseling. These treatments teach people to recognize high-risk situations and develop strategies to deal with them. For example, people who hang out with others who smoke are more likely to smoke and less likely to quit.

Nicotine Replacement Therapies
Nicotine replacement therapies (NRTs) were the first medications the U.S. Food and Drug Administration (FDA) approved for use in smoking cessation therapy.

Current FDA-approved NRT products include chewing gum, transdermal patch, nasal sprays, inhalers, and lozenges. NRTs deliver a controlled dose of nicotine to relieve withdrawal symptoms while the person tries to quit.

Other Medications
Bupropion (Zyban®) and varenicline (Chantix®) are two FDA-approved non-nicotine medications that have helped people quit smoking. They
target nicotine receptors in the brain, easing withdrawal symptoms and blocking the effects of nicotine if people start smoking again.

**Can a person overdose on nicotine?**

Nicotine is poisonous and, though uncommon, overdose is possible. An overdose occurs when the person uses too much of a drug and has a toxic reaction that results in serious, harmful symptoms or death. Nicotine poisoning usually occurs in young children who accidentally chew on nicotine gum or patches used to quit smoking or swallow e-cigarette liquid. Symptoms include difficulty breathing, vomiting, fainting, headache, weakness, and increased or decreased heart rate. Anyone concerned that a child or adult might be experiencing a nicotine overdose should seek immediate medical help.

---

**Risks from Smoking**

Smoking can damage every part of your body

---

*Diagram showing various health risks associated with smoking.*
What is secondhand smoke?

Secondhand smoke is the combination of smoke from the burning end of a cigarette and the smoke exhaled by smokers. You can be exposed to secondhand smoke in homes, cars, the workplace, and public places, such as bars, restaurants, and recreational settings.

In the United States, the source of most secondhand smoke is cigarettes, followed by pipes, cigars, and other tobacco products. Secondhand smoke contains more than 7,000 chemicals. Hundreds of the chemicals are toxic and about 70 are known to cause cancer.

Can secondhand smoke make me sick?

There is no safe exposure to secondhand smoke. When you are around a person who is smoking, you inhale the same dangerous chemicals as the smoker. Breathing even a little secondhand smoke can be dangerous.

Inhaling secondhand smoke can cause lung cancer in nonsmoking adults. In the United States, approximately 3,000 adults die each year due to lung cancer from secondhand smoke exposure. According to the U.S. Surgeon General, living with a smoker increases a nonsmoker’s chances of developing lung cancer by 20% to 30%.

Exposure to secondhand smoke can also cause coronary heart disease and have negative effects on your blood and blood vessels, increasing your risk of a heart attack. Heart disease caused by secondhand smoke kills approximately 46,000 nonsmokers every year. People who already have heart disease are at an especially high risk of suffering negative effects from breathing secondhand smoke and should avoid even brief exposure to it.

Because studies show that laws banning smoking in public places help improve worker and customer health, many states and communities
have laws making workplaces, public places, restaurants, and bars smoke-free. But millions of children and adults still breathe secondhand smoke in their homes, cars, workplaces, and in public places.

**How does secondhand smoke affect pregnant women, babies, and children?**

Pregnant women who breathe secondhand smoke are more likely to have lower birth weight babies than women who do not breathe secondhand smoke. Once born, babies who are around cigarette smoke are more likely to:

- Get ear infections
- Develop bronchitis and pneumonia
- Die from **Sudden Infant Death Syndrome (SIDS)**

Secondhand smoke can cause serious health problems in children, including:

- Frequent lower respiratory illness
- Wheezing and coughing
- More frequent and severe asthma attacks
- Ear infections

For these reasons, women who are pregnant are advised to avoid environments where heavy concentrations of secondhand smoke linger.
Native Americans and Tobacco: National Facts and Trends
www.tobaccofreemaine.org

Adults
- American Indians smoke at a rate of 32.4%. This is the highest percentage for any race/ethnicity group in the United States.
- In some communities the smoking rate of American Indians is 73%.
- Cardiovascular disease is the leading cause of death among American Indians and lung cancer is the leading cause of cancer death among American Indians. Tobacco use is a major risk factor for both diseases.
- Since 1978, prevalence of cigarette smoking has diminished for African-Americans, Asian-Americans and Pacific-Islanders, Hispanic and white women of reproductive age (18-44 years), but unfortunately, not for American-Indian and Alaska-Native women.

Native American Youth
- Although American Indians smoke at a high rate, it appears to decrease with age (18-34, 48% vs. 55 and up, 10.5%) and education (44.1% with less than high school vs. 33.5% with high school graduate.)
- The rate of smoking among Native American girls is virtually the same as for boys (26.% and 29.5% respectively).
- Native American youth start smoking at the youngest age and reported frequent cigarette use (more than 20 cigarettes in the preceding 30 days) 24.4% Native American vs. 13.8% US youth.

Other Tobacco Use
- 5.4% of Native American adults vs. 2.9 % of the general US population use smokeless tobacco.
- Pipe and cigar use has been cited as higher in 1987 and 1991 NHI; however, this survey did not distinguish between ceremonial and addictive daily pipe smoking.
- 1 in 5 Native American youth living on reservations use smokeless tobacco vs. 1 in 12 US high school students.
Quitting Smoking: Effects on the Human Body
www.quitday.org

Quitting smoking now greatly reduces your risk for numerous diseases, cancers, COPD, and reproductive complications. When quitting smoking, there are numerous physical and emotional effects the body experiences. These effects are both short-term and long-term.

Short Term Effects of Quitting

- The short-term effects of quitting smoking begin within 20 minutes. Cigarettes contain ingredients and produce chemicals that speed up your heart rate, and also raises your blood pressure. According to the CDC, within 20 minutes of not smoking an analogue cigarette, your heart rate will already begin to drop down to normal levels.

- Within two hours of not smoking, your heart rate and blood pressure will have returned to almost completely normal levels. Your peripheral circulation may also begin to improve during this time. This means you may begin to feel warmth in your fingertips and other extremities. This is due to your circulation improving. However, during this time you may also begin to experience some of the adverse effects of quitting smoking: withdrawal symptoms. These symptoms may include anxiety, increased appetite, irritability, sleeplessness, and intense cravings.

- After only 12 hours of not smoking analogue cigarettes, your blood oxygen levels raise to near normal levels. As stated by the CDC, carbon monoxide is released from a lit cigarette and inhaled with the smoke. At high levels, carbon monoxide is considered to be toxic to the human body. Carbon monoxide also bonds effectively to blood cells, prohibiting them from bonding successfully with oxygen. This can lead to serious cardiovascular complications. After 12 hours of not smoking, these carbon monoxide levels decrease, allowing your blood cells to once again bond effectively with oxygen.

- Since the risk of heart attack is 70% higher than those who do not smoke, after 24 hours the risk of heart attack begins to decrease.

- The sense of smell and taste rely on nerve endings. Smoking deadens these nerve endings. However, according to the Cleveland Clinic, these nerve endings begin to regrow within
48 hours of not smoking. This means that your sense of smell and taste will begin to increase, allowing you to experience more flavor and aromas.

- Approximately three days after quitting, the nicotine levels in your system will have been depleted. However, with this absence comes greater symptoms of withdrawal. Increased tension, cravings, irritability, and other symptoms may be strongly present.

- After two to three weeks after quitting smoking, numerous regenerative processes begin to take place in the body. Some of which are very noticeable. According to the American Heart Association, your lung capacity and performance will begin to regenerate and improve, as will your circulation. This will allow you to perform intense activities such as exercising, running, and various other physical activities that rely on endurance and stamina.

- Between one and nine months after quitting smoking your lungs dramatically begin to repair themselves. One of the adverse effects of smoking analogue cigarettes is the damage to the cilia. Cilia are the small hair-like organelles which assist in reducing your risk of infections by pushing mucus out of your lungs. The regenerative process your lungs undergo include the repair of the cilia. This increases the lung function and performance, as well as reducing the risk of infection.

- During this restorative period, nicotine has been absent from your system since the first several weeks of quitting smoking. However, withdrawal symptoms can remain for upwards of six months.
Long Term Effects of Quitting Smoking

- The risk for any type of coronary heart disease is much greater for a smoker. According to the CDC, approximately one year after smoking your overall risk for coronary heart disease decreases by half.

- Another primary adverse effect smoking has on your health is the constricting of blood vessels. The constricting of the blood vessels greatly increases the chance of stroke. A primary factor which causes this is carbon monoxide. Between five and 15 years after quitting smoking, the chance of stroke decreases to that of an average non-smoker, according to the CDC. This restorative process takes time, but results in an overall decrease in an ex-smoker’s mortality rate.

- The CDC further states that after 10 years of not smoking, the risk of lung cancer, cancer of the throat, mouth, esophagus, and major organs also decreases by approximately half that of a traditional cigarette smoker. Medical practitioners report that nearly 90% of all lung cancer-related deaths are a result of smoking traditional cigarettes.
Steps to Manage Quit Day
www.smokefree.gov

1. Make a Quit Plan
Having a plan can make your quit day easier. A quit plan gives you ways to stay focused, confident, and motivated to quit. You can build your own quit plan or find a quit program that works for you. Check out SmokefreeTXT, QuitGuide app, or a quitline like 1-800-QUIT-NOW (1-800-784-8669) or 1-877-44U-QUIT (1-877-448-7848) to get started. If you don’t know what quit method might be right for you, you can explore different quit methods. No single approach to quitting works for everyone. Be honest about your needs. If using nicotine replacement therapy is part of your plan, be sure to start using it first thing in the morning.

2. Stay Busy
Keeping busy is a great way to stay smoke free on your quit day. Being busy will help you keep your mind off smoking and distract you from cravings. Think about trying some of these activities:
- Exercise – get out of the house for a walk.
- Chew gum or hard candy.
- Keep your hands busy with a pen or toothpick, or play a game in the QuitGuide app.
- Drink lots of water.
- Relax with deep breathing.
- Go to a movie.
- Spend time with non-smoking friends and family.
- Go to dinner at your favorite smoke free restaurant.

3. Avoid Smoking Triggers
Triggers are the people, places, things, and situations that set off your urge to smoke. On your quit day, try to avoid all your triggers. Here are some tips to help you outsmart some common smoking triggers:
- Throw away your cigarettes, lighters, and ash trays if you haven’t already.
- Avoid caffeine, which can make you feel jittery. Try drinking water instead.
- Spend time with non-smokers.
- Go to places where smoking isn’t allowed.
- Get plenty of rest and eat healthy. Being tired can trigger you to smoke.
- Change your routine to avoid the things you might associate with smoking.
4. Stay Positive
Quitting smoking is difficult. It happens one minute...one hour...one day at a time. Try not to think of quitting as forever. Pay attention to today and the time will add up. It helps to stay positive. Your quit day might not be perfect, but all that matters is that you don’t smoke—not even one puff. Reward yourself for being smoke free for 24 hours. You deserve it. And if you’re not feeling ready to quit today, set a quit date that makes sense for you. It’s OK if you need a few more days to prepare to quit smoking.

5. Ask for Help
You don’t need to rely on willpower alone to be smoke free. Tell your family and friends when your quit day is. Ask them for support on quit day and in the first few days and weeks after. They can help you get through the rough spots. Let them know exactly how they can support you. Don’t assume they’ll know.