Why is it so hard to quit?

Simply put, nicotine is among the most addictive drugs. Smoking is not a habit or a lifestyle choice. It’s an addiction that over time, changes brain chemistry. Nicotine has its effect by attaching to certain receptors in the brain, and when you become a smoker these receptors increase in number. If not regularly stimulated with nicotine, the increased receptors begin to make a person feel very unpleasant, a phenomenon known as withdrawal. Both withdrawal and the craving it causes are tied to changes in brain chemistry.

Quitting smoking is one of the most important things people with diabetes can do to help prevent or delay the onset of complications.

Why is smoking so bad for people with diabetes?

Smoking is bad for everyone. It increases your risk for lung cancer, heart attack and stroke. Every day, 100 Canadians die of smoking-related illnesses. People with diabetes face even greater risks from smoking, because just like high blood sugar levels, the poisonous chemicals in cigarette smoke attack blood vessels. This contributes to hardening of the arteries (or what is known as atherosclerosis) which impairs your blood’s ability to carry oxygen throughout your body.

Together, the combination of high blood sugar and smoking dramatically increases damage to the blood vessels that feed the heart, brain, eyes, kidneys and peripheral nerves, speeding up the long-term complications of diabetes.

How can I quit?

The first and most important step is to make the decision to quit. It may help to set a firm, short-term quit date. Gather as much information as you can from your doctor or pharmacist about options to help you quit, including medications that can increase your chances of success. Similar to the day-to-day process of managing your diabetes through diet, exercise and regular blood sugar testing, managing to quit smoking is something that is best approached by incorporating it into your daily routine. Your diabetes health-care providers will ask you if it is ok to give you advice, arrange therapy and provide support. They can support you as you move through your journey from decision making, to goal setting, to quitting.
What can help me quit smoking?

**Nicotine replacement therapy**

The first line of treatment is nicotine replacement therapy, whether in the form of a gum, patch or inhaler, to help ease withdrawal symptoms. Nicotine replacement therapy is now available without a prescription in pharmacies. Talk to your health-care provider about the potential benefit of nicotine replacement therapy.

**Oral Medications**

Your doctor can prescribe smoking cessation medications to help reduce your smoking cravings. Speak to your doctor to learn if these medications are suitable for you as they might interfere with other medications or health issues.

**Lifestyle changes**

Smoking often is associated with strong cues, so as you move toward a quit date, get a sense of where and when you smoke, and identify some strategies to bypass those situations. If you typically smoke after dinner, take a walk instead. Any setting where alcohol is involved, such as a wedding or a party, will probably be a hazard zone, so just as you may plan to adjust your food intake or insulin dosage, consider in advance how you will handle these situations.

Enlist your family and friends in the effort. Make sure they understand how important it is for you to quit smoking and how hard it may be. Ask for their support. For some people, joining a support group along with others who are also trying to quit is helpful. Your doctor or diabetes health-care provider may have some information about groups in your community. For more information and support, go to [www.gosmokefree.ca](http://www.gosmokefree.ca) and [www.smokershelpline.ca](http://www.smokershelpline.ca).

**Never quit quitting!**

Making the transition from smoker to nonsmoker is not easy, and you may have a relapse. If you do, give yourself a break. Don’t focus on the one cigarette you just had, but remember the hundreds you haven’t had since you quit. Manage your quitting plan much like you manage your diabetes – take it one day at a time.

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