

Quit Smoking

BEFORE YOUR OPERATION



AMERICAN COLLEGE OF SURGEONS

Inspiring Quality:
Highest Standards, Better Outcomes



Smoking increases your risk of problems during and after your operation. Quitting 4 to 6 weeks before your operation and staying smoke-free 4 weeks after it can decrease your rate of wound complications by 50%. Quitting permanently can add years to your life.



Your chance for a better recovery

PREPARE FOR YOUR QUIT DAY

As listed on the American Cancer Society website:

- Pick the date and mark it on your calendar.
- Tell friends and family about your Quit Day.
- Get rid of all the cigarettes and ashtrays in your home, car, and place of work.
- Stock up on oral substitutes (sugarless gum, carrot sticks, hard candy, cinnamon sticks, coffee stirrers, straws, and/or toothpicks).
- Decide on a plan. Will you use nicotine replacement therapy (NRT) or other medicines? Will you attend a stop-smoking class? If so, sign up now.
- Practice saying, "No thank you, I don't smoke."
- Set up a support system, which could be a group program such as Nicotine Anonymous or a friend or family member who has successfully quit. Ask family and friends who still smoke not to smoke around you or leave cigarettes out where you can see them.
- If you are using bupropion or varenicline, take your dose each day of the week leading up to your Quit Day.
- Think back to your past attempts to quit. Try to figure out what worked and what did not work for you.

YOUR QUIT DAY

On your Quit Day:

- Do not smoke. This means none at all—not even one puff!
- Keep active. Try walking, exercising, or hobbies.
- Drink lots of water and juices.
- Begin using nicotine replacement if that is your choice.
- Attend a stop-smoking class or follow your self-help plan.
- Avoid situations where the urge to smoke is strong.
- Avoid people who are smoking.
- Reduce or avoid alcohol.
- Think about how you can change your routine. Use a different route to go to work, drink tea instead of coffee, eat breakfast in a different place, or eat different foods.

DEALING WITH WITHDRAWAL

Nicotine replacement and other medicines can help reduce many of the physical symptoms of withdrawal. Most smokers find that the bigger challenge is the mental part of quitting.

If you have been smoking for any length of time, smoking has become linked with nearly everything you do—waking up in the morning, eating, and drinking coffee. It will take time to "un-link" smoking from these activities, which is why, even if you are using a nicotine replacement, you may still have strong urges to smoke.

This information is published to educate you about preparing for your surgical procedures. It is not intended to take the place of a discussion with a qualified surgeon who is familiar with your situation. It is important to remember that each individual is different, and the reasons and outcomes of any operation depend upon the patient's individual condition.

The American College of Surgeons is a scientific and educational organization that is dedicated to the ethical and competent practice of surgery; it was founded to raise the standards of surgical practice and to improve the quality of care for the surgical patient. The ACS has endeavored to present information for prospective surgical patients based on current scientific information; there is no warranty on the timeliness, accuracy, or usefulness of this content.

Successful quitting is a matter of planning and commitment, not luck. Decide now on your own plan.



RESOURCES TO HELP YOU QUIT

Talk to your health care provider about the best option to help you with quitting, but know how truly important it is that you quit before your operation.

The National Alliance for Tobacco Cessation provides the latest information on how to quit smoking with its program called "Become an EX." Proven methods to teach smokers how to quit and stay quit are provided.

<http://www.becomeanex.org/>

The American Lung Association has information and plans like its "Freedom from Smoking" program, an online program that takes you through modules and provides you with the tools you need to quit.

<http://www.lungusa.org/stop-smoking/>

The American Cancer Society has helpful detailed information and a hotline number on its website.

Call the American Cancer Society at 1-800-227-2345 or visit <http://www.cancer.org/Healthy/StayAwayfromTobacco/GuidetoQuittingSmoking/index>

Extensive help resources from government and professional associations offering quit help.

www.CDC.gov/tobacco

Support by phone or Internet including "talk to an expert."

www.smokefree.gov

"I CAN QUIT" LOG

Use this space to record your plan and smoking triggers (a cup of coffee, your morning commute) and the distractions that keep you from smoking (taking a walk, chewing sugarless gum).

Your Quit Smoking Plan

Prepare to Quit

- My quit smoking date is:

Plans for Quitting: Get Help

- Talk to my doctor about medications
 - » Nicotine medication: gum, nasal spray, patch, lozenge
 - » Other medication: Bupropion, Varenicline
 - » My medication plan is:
- » Support groups
- » Expert help online or by phone (1-800-227-2345)
- » Local or hospital support group
- » Counseling
- Alternative approaches: hypnosis
- Cold turkey

Plans for Coping

- My exercise plan includes:
- My quit partner or family support is:
- I will remove all temptations (ash trays and cigarettes) from the home
- My substitution items are: sugarless gum/candy, crunchy vegetables, fiddle items (such as squeeze balls, paperclip, pen)