

Summary sheet 10

Stopping smoking



How does smoking damage your heart and circulation?

If you're a smoker, stopping smoking is the single most important step you can take to reduce your risk of having a heart attack – and to live longer. Smokers are almost twice as likely to have a heart attack as people who have never smoked¹.

Smokers also cause damage to the health of their families, who have to inhale their smoke. This is known as second-hand or passive smoking, which is also harmful. Research shows that non-smokers who live with smokers have a greater risk of heart disease than those who don't live with smokers¹.

Smoking damages the lining of the arteries. This can lead to the build-up of **atheroma** (fatty material) in the artery walls, which restricts blood flow.

The **carbon monoxide** in tobacco smoke reduces the amount of oxygen that the blood carries to the heart and around the body.

The **nicotine** in cigarettes stimulates the body to produce adrenaline, which increases the heart rate and raises blood pressure, making the heart work harder.

Smoking may also increase the tendency of the blood to clot. All of these things increase the risk of developing coronary heart disease, or of having a heart attack or a stroke.

Is shisha smoking and chewing tobacco harmful?

Besides smoking cigarettes, cigars or a pipe, there are other ways that people smoke or take tobacco.

Shisha smoking

A shisha is a water pipe with a long, flexible stem, which is arranged so that the smoke is cooled by being passed through water. It is also called a hookah or nargile.

Recent research has shown that shisha smoke contains large quantities of the chemicals that can lead to addiction, heart disease and cancer in cigarette smokers².

And shisha smoking has three further health risks:

- Shisha smokers inhale up to 200 times more smoke in a one-hour shisha session than they would from smoking a cigarette.
- The flavoured tobacco is smoked over coals, and the coal fumes add new toxins to the already dangerous smoke. Although some people use electric shishas, which don't use coals, smoking using an electrical shisha is still harmful to health.
- People at a shisha smoking session inhale high levels of highly dangerous 'second-hand smoke', even if they don't smoke shisha themselves. So shisha smokers and those around them are put at greater risk³.

Chewing tobacco (smokeless tobacco)

Chewing tobacco is also known as smokeless tobacco or tobacco for oral use. Some people believe that smokeless tobacco is a harmless alternative to smoking cigarettes. However, smokeless tobacco contains as much, if not more, nicotine than smoked tobacco products. And, like cigarettes, it is highly addictive⁴. People who chew tobacco are also more likely to develop mouth cancers⁵.

Are there any practical tips to help you stop smoking?

Quitting smoking has huge health benefits and it's never too late to give up. Most smokers want to stop smoking. Some people find it hard to give up, but around 11 million people in the UK have successfully given up for good⁶. Being determined is essential, but there are also ways of increasing your chances of getting smoke-free for good.

Make a date to give up. And stick to it! Throw away all your cigarettes or tobacco, lighters and ashtrays.

Make a plan. Think about what methods could help you stop smoking and have them ready before your quit date.

Keep busy. It'll help take your mind off smoking. Try and change your routine, and avoid the shop where you usually buy cigarettes or tobacco.

Get support. Talking to friends and relatives who have stopped can be helpful. Ask your doctor or nurse for advice on ways to stop smoking. These may include:

- using nicotine replacement products
- taking medication
- having counselling
- joining a support clinic or group
- calling a helpline – QUIT and the NHS smoking helpline both offer confidential help and support. Asian Quitline provides confidential help and advice in five South Asian languages.

Treat yourself. Use the money you are saving by not smoking to buy yourself something special.

For more information

bhf.org.uk

BHF services:

Sign up for free 'quit smoking' email support at **bhf.org.uk/heartmatters** or call **0300 330 3300**. This service is available in English only.

website: **bhf.org.uk/smoking**

BHF booklets:

Stop smoking (in English)

Smoking and your heart (in English)

Looking after your heart (aimed at South Asians, in English and five South Asian languages)

Smoking, shisha and chewing tobacco – how to stop (aimed at South Asians, in English and five South Asian languages)

BHF DVDs:

Risking it (English soundtrack and subtitles)

To order these *free* resources, call the **BHF Orderline** on **0870 600 6566**

Other organisations:

NHS Smoking Helpline phone: **0800 022 4332**

QUIT Quitline: **0800 00 22 00** website **www.quit.org.uk**

QUIT also has helplines in different languages:

Bengali 0800 00 22 44 (Mondays 1pm to 9pm)

Gujarati 0800 00 22 55 (Tuesdays 1pm to 9pm)

Hindi 0800 00 22 66 (Wednesdays 1pm to 9pm)

Punjabi 0800 00 22 77 (Thursdays 1pm to 9pm)

Urdu 0800 00 22 88 (Sundays 1pm to 9pm)

1. Scarborough P, Bhatnagar P, et al (2010). Coronary Heart Disease Statistics 2010 edition. British Heart Foundation: London.
2. WHO Study Group on Tobacco Product Regulation. 2005. Waterpipe Tobacco Smoking: Health Effects, Research Needs and Recommended Actions by Regulators. Geneva: WHO.
3. American Lung Association. 2007. An Emerging Deadly Trend: Waterpipe Tobacco Use. American Lung Association. http://slati.lungusa.org/alerts/Trend%20Alert_Waterpipes.pdf
4. Benowitz, N., Pharmacology of smokeless tobacco use: nicotine addiction and nicotine-related health consequences, in NCI Smoking and Tobacco Control Monograph. 1993. p. 219-228.
5. Critchley, J. and B. Unal, Health effects associated with smokeless tobacco: a systematic review. *Thorax*, 2003. 58: p. 435-43.
6. Office for National Statistics. 2002. General Household Survey 1001: Mid-2001 Population Estimates: Great Britain. London: Office for National Statistics.