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How to Quit Using Tobacco

The US Surgeon General has said stopping smoking is “the single most important step that people who smoke can take to enhance the length and quality of their lives.”

Quitting is hard. But with help, you can increase your chances of success. In this guide to quitting tobacco, you'll find the tips, tools, and resources to get started.

The Facts About Tobacco

Get the facts about tobacco products. Find out how using tobacco affects your body, and learn more about the health benefits of quitting.

[Health Benefits of Quitting Smoking Over Time](#)

[Why People Start Smoking and Why It's Hard to Stop](#)

[Reasons to Quit Smoking](#)

[Benefits of Quitting Tobacco If You Have Cancer](#)

Preparing to Quit

The right tools, support, and planning are an important part of quitting for good.

[Planning Your Quit Day](#)

[Quitting Smoking or Smokeless Tobacco](#)

[Quitting E-cigarettes \(Vapes, Vape Pens\)](#)

[Talking With Your Cancer Care Team About Tobacco Use](#)

Smoking Cessation: 3 Steps to Quitting

In this short video, learn 3 steps that can lead to quitting smoking for good.

This how-to quit smoking video also includes information about lung cancer screening

with low-dose computed tomography (low-dose LDCT).

[Watch this video on YouTube](#)

Tools and Support

For most people, the best way to quit tobacco is a combination of medicine, a method to change personal habits, and emotional support.

[Nicotine Replacement Therapy](#)

[Prescription Medicines to Help You Quit Tobacco](#)

[Dealing with the Mental Part of Tobacco Addiction](#)

[Are There Other Ways to Quit Tobacco?](#)

[Great American Smokeout](#)

The American Cancer Society's Great American Smokeout is held on the third Thursday in November each year. People who smoke are encouraged to use the date to take an important step toward a healthier life.

[Empowered to Quit](#)

Quitting smoking is hard. But with help, you can be empowered to quit for good. This tailored, email-based program can be a useful resource to support your comprehensive quit-smoking plan.

[Quit 2 Heal](#)

A research study is being conducted to test the effectiveness of a smartphone app in helping people with cancer to quit smoking. Study results are expected soon.

Beyond Your Quit Day

[Help for Cravings and Tough Situations](#)

You will probably go through times when it's especially hard to stay away from tobacco. But there are things you can do to help yourself stay quit.

[Staying Tobacco-free After You Quit](#)

Deciding to quit tobacco is a major milestone. But staying quit is the longest and most important part of the process. Learn about strategies and support to help you get through it.

Helping Someone Quit Tobacco



Studies show that people with strong social support are more likely to quit and stay quit.

If someone you know is trying to quit smoking or other tobacco products, there are many things you can do to help.

[Learn More About Helping Someone Quit](#)

More Resources

[1-800-QUIT-NOW \[CDC\]](#)

Find your state's quitline, plus more resources for quitting smoking and other tobacco products.

[Call the American Cancer Society](#)

Call the American Cancer Society 24/7 to learn more about the available tools for quitting tobacco.

Why People Start Smoking and Why It's Hard to Stop

About 2 out of 3 of people who smoke say they want to quit. Around half try to quit each year, but few succeed without help. This is because nicotine affects behavior, mood, and emotions.

Studies have found that nicotine addiction can be just as strong as addiction to substances like cocaine and alcohol. In fact, tobacco may be even harder for some people to quit.

Learn more about why people start using tobacco, and what makes quitting so difficult.

- [Why do people start using tobacco?](#)
- [Is tobacco really addictive?](#)
- [Who is most likely to become addicted?](#)
- [How nicotine affects you](#)
- [How powerful is nicotine addiction?](#)
- [How much nicotine is in tobacco products?](#)
- [Why is it so hard to quit tobacco?](#)
- [Learn more](#)

Why do people start using tobacco?

Most people who use tobacco start when they are teenagers. Young people are more easily swayed by outside influences to use tobacco, including:

- Peers who use tobacco
- Parents or siblings who use tobacco
- Tobacco use in movies, TV, video games, and on social media
- Tobacco products that are candy or fruit flavored
- Tobacco marketing that uses images to appeal to younger people, including messages that smoking makes you thin
- Price breaks on tobacco products

[E-cigarettes¹](#) and other electronic “vaping” devices have also increased the use of tobacco, especially in young people. Many people think these aren't as harmful as cigarettes, but that isn't true. E-cigarettes and vaping devices might also be easier to

get and use. They are a way for new users to learn how to inhale and become addicted to nicotine, which can lead to smoking cigarettes and using other tobacco products.

Is tobacco really addictive?

Yes. Tobacco products have nicotine in them, and nicotine is known to be addictive. When you use tobacco products regularly, you can become addicted and physically dependent.

It's helpful to understand what we mean by this:

Addiction is a mental or emotional dependence on a substance. When you are addicted to tobacco, you have a strong urge to use it. This urge is hard to resist.

Physical dependence is when your body gets used to a substance. Not using it can cause withdrawal symptoms. For tobacco, this can include symptoms like having trouble sleeping, or feeling anxious, grouchy, or hungrier than usual.

People who are addicted to nicotine will still use tobacco even though they know smoking is bad for them. It can negatively affect their lives, their health, and their families. But most people who use tobacco *want* to quit.

Who is most likely to become addicted?

Anyone who starts using tobacco can become addicted to nicotine (the addictive substance in tobacco products). But the younger you are when you begin using, the more likely you are to become addicted. This is because the brains of young people are still developing. It's easier for them to become dependent on the good feeling they get from nicotine.

- Nearly 9 out of 10 adults who use tobacco started before age 18.
- Almost all started by age 26.
- 8 in 10 people who start using tobacco as youth or young adults will continue smoking in adulthood.

How nicotine affects you

The nicotine in tobacco affects your brain and body in a few important ways.

Dopamine and adrenaline

Nicotine floods your brain's "reward circuits" with a chemical called dopamine. Dopamine causes pleasant feelings and distracts you from unpleasant feelings. This makes you want to use more.

Nicotine also gives you a little bit of an adrenaline rush. It might not be enough to notice, but it can speed up your heart and raise your blood pressure.

Nicotine tolerance

As your body gets used to nicotine, you can develop **tolerance**.

People who use tobacco tend to increase the amount they use each day. When you do this, it raises the amount of nicotine in your blood. Now, you need more tobacco to get the same effect. At this point, you've developed tolerance. To avoid withdrawal symptoms, you have to keep up your tobacco use so the level of nicotine in your blood stays within a comfortable range.

Withdrawal symptoms

When you use tobacco, you can quickly become dependent on nicotine and suffer physical and emotional [withdrawal symptoms](#) when you stop.

Nicotine reaches your brain within seconds after using tobacco, but the effects start to wear off within a few minutes. This is especially true for inhaled tobacco products. You might start to feel irritated and edgy. This is what most often leads you to use more tobacco.

Once you consume more tobacco, the unpleasant feelings go away. If you don't use tobacco again soon, you might have worse withdrawal symptoms. This cycle continues as long as you keep using tobacco.

How powerful is nicotine addiction?

Studies have found that nicotine addiction can be just as strong as addiction to substances like cocaine and alcohol. In fact, tobacco maybe even harder for some people to quit.

About 2 out of 3 of people who smoke say they want to quit. Around half try to quit each year, but few succeed without help. This is because nicotine affects behavior, mood,

and emotions.

If you use tobacco to help manage unpleasant feelings and emotions, it can be more difficult when you try to quit. You may also link tobacco with social situations and other activities. All of this make it hard to quit.

How much nicotine is in tobacco products?

The amount of nicotine you get is based on the type of tobacco product you use and how often you use it.

Nicotine in cigarettes

When you inhale nicotine from cigarettes, it is absorbed quickly through your lungs and the linings of your nose and mouth.

The amount of nicotine you actually take in depends on:

- How many cigarettes you smoke in a day
- How many puffs you take on each cigarette
- How deeply you inhale the smoke

Each cigarette has about 8 milligrams (mg) of nicotine, but only delivers about 1 to 2 mg of nicotine. Regular, menthol, and “light” cigarettes all deliver the same amount of nicotine.

Nicotine in cigars

When you inhale cigar smoke, you absorb nicotine through your lungs, nose, and mouth as quickly as when you smoke cigarettes. If you don't inhale, the nicotine is absorbed more slowly through the lining of your mouth. This means that when you smoke cigars, you can get nicotine without inhaling the smoke directly into your lungs.

Most full-size cigars have as much nicotine as several cigarettes.

Many popular brands of larger cigars have between 100 and 200 mg, or even as much as 444 mg, of nicotine. The amount of nicotine a cigar delivers can vary a great deal, even among people smoking the same type of cigar.

How much nicotine you take in depends on things like:

- How long you smoke the cigar
- How many puffs you take
- Whether or not you inhale the smoke

Given these factors and the large range of cigar sizes, it's almost impossible to make good estimates about the amount of nicotine larger cigars deliver.

Small cigars (or cigarillos) are a similar size and shape to a cigarette and have about the same amount of nicotine. If you smoke these like a cigarette (inhaled), you can expect to get a similar amount of nicotine, around 1 to 2 mg.

Nicotine in smokeless tobacco

There are several types of smokeless tobacco including dip, snuff, snus, and chewing tobacco. Nicotine pouches, recreational lozenges, strips, sticks, and small pouches of tobacco are also considered smokeless tobacco. They all provide nicotine when you use them.

Nicotine from smokeless tobacco products enters your bloodstream from your mouth or nose. From there, it's carried throughout your body.

The amount of nicotine in smokeless tobacco products can vary greatly. How much nicotine you get also depends on things like:

- The type of smokeless tobacco and the product brand
- Product pH level (how acidic it is)
- The amount you use

Studies have shown that the blood levels of nicotine in people who use smokeless tobacco are very similar to the levels in people who smoke cigarettes.

Nicotine in e-cigarettes

The liquid in most e-cigarettes (vapes) has nicotine, but nicotine levels vary greatly between e-cigarette brands and refills.

There is no standard way of listing nicotine levels in e-cigarette product labels. And sometimes, product labels don't list the true nicotine content. There are some e-cigarette brands that claim to be nicotine-free but have been found to contain nicotine.

Why is it so hard to quit tobacco?

Stopping or cutting back on tobacco causes symptoms of nicotine withdrawal. Withdrawal is physical, mental, and emotional.

Physically, your body is reacting to the absence of nicotine. Mentally, you are faced with giving up a habit, which calls for a major change in your behavior. Emotionally, you might grieve the loss of the habit and how it made you feel.

Studies have shown that smokeless tobacco users have as much trouble giving up tobacco as people who want to quit smoking or using e-cigarettes.

If you've used tobacco regularly for at least a few weeks, you'll have withdrawal symptoms when you suddenly stop or greatly reduce the amount of tobacco you use. There's no danger in nicotine withdrawal, but the symptoms can be uncomfortable.

Withdrawal symptoms usually start within a few hours and peak about 2 to 3 days later, when most of the nicotine is out of your body. Withdrawal symptoms can last from a few days to several weeks. They get better every day you stay tobacco-free.

Nicotine withdrawal symptoms can include:

- Urges or cravings for tobacco
- Feeling irritated, frustrated, or grouchy
- Trouble focusing
- Feeling restless or bored
- Having a hard time sleeping, including trouble falling asleep and staying asleep
- Having bad dreams or nightmares
- Feeling more hungry
- Gaining weight
- Feeling anxious
- Feeling sad or depressed
- Cough
- Mouth ulcers
- Headaches

These symptoms can be hard to deal with, and they might cause you start using (or want to start using) tobacco again. It takes most people several tries to quit for good. But there are resources available to help you through the most difficult parts of quitting.

Learn more

[Guide to Quitting Tobacco](#)

Tobacco addiction is both mental and physical. For most people, the best way to quit is some combination of medicine, a method to change personal habits, and emotional support.

[Staying Tobacco-free After You Quit](#)

Deciding to quit tobacco is a major milestone. But staying quit is the final, longest, and most important part of the process.

Hyperlinks

1. www.cancer.org/cancer/risk-prevention/tobacco/e-cigarettes-vaping.html

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Reasons to Quit Smoking

Lots of studies show the benefits of quitting smoking. This includes health and financial benefits that can save lives and money. While it's best to quit as early in life as possible, quitting at any age can lead to a better lifestyle and health.

- [Quitting can make you look, feel, and be healthier](#)
- [Quitting can help you save money](#)
- [Quitting can improve your self-confidence and lead to a better lifestyle](#)

Quitting can make you look, feel, and be healthier

- Using tobacco leads to disease and disability and harms nearly every organ of your body.
- Smoking is the leading cause of preventable death.
- Quitting helps stop the damage that tobacco can have on how you look, including, gum disease, tooth loss, and premature wrinkling of your skin.
- Secondhand smoke is dangerous and can harm the health of your friends and family.

Quitting can help you save money

- Cigarettes and other tobacco products are expensive. At about \$8 per pack of cigarettes, smoking a pack a day costs you about \$2,900 in a year.
- Quitting lowers your risk of getting colds and other respiratory problems. This means fewer doctor visits, less money spent on medicines, and fewer sick days off work.
- Cleaning and home repairs might cost less since clothes, furniture, curtains, and the car won't smell like tobacco.

Quitting can improve your self-confidence and lead to a better lifestyle

- Not using tobacco products helps keep your family safe.
- You may have more energy to enjoy quality family and leisure time.
- Quitting can set a good example for others who might need help quitting.
- Family and friends will likely be proud of your progress in quitting and staying quit.

Quitting Smoking or Smokeless Tobacco

Quitting tobacco (tobacco cessation) is a lot like losing weight. It takes a strong commitment over a long time.

Making a Plan to Quit and Preparing for Your Quit Day

There's no one right way to quit tobacco or nicotine products. But there are steps you can take to help make your decision to quit a success.

Dealing with the Mental Part of Tobacco Addiction

Quitting tobacco causes withdrawal symptoms. These can be physical, but also mental and emotional. There are steps you can take to prepare yourself for this.

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Health Benefits of Quitting Smoking Over Time

It's never too late to quit using tobacco. The sooner you quit, the more you can reduce

your chances of getting cancer and other diseases.

- [Within minutes of smoking your last cigarette, your body begins to recover:](#)
- [Are there other benefits of quitting that I'll notice right away?](#)

Within minutes of smoking your last cigarette, your body begins to recover:

**20 minutes
after quitting**



Your heart rate and blood pressure drop.

**12 hours after
quitting**



The carbon monoxide level in your blood drops to normal.

**2 weeks to 3
months after
quitting**



Your circulation improves and your lung function increases. Your risk of a heart attack starts to decrease.

**1 to 9 months
after quitting**



Coughing and shortness of breath decrease.

**1 year after
quitting**



Your risk of heart disease is cut in half.

**2 to 5 years
after quitting**

Your risk of cancers of the mouth, throat, esophagus, and bladder is cut in half. Your stroke risk drops to that of a person who doesn't smoke.



10 years after quitting



You are half as likely to die from lung cancer than a person who is still smoking. Your risk of cancer of the pancreas and kidney decreases.

15 years after quitting



Your risk of coronary heart disease is the same as someone who doesn't smoke.

These are just a few of the health benefits of quitting smoking, but there are others, too.

Quitting smoking lowers your risk of other cancers over time, including cancers of the stomach, liver, cervix, colon, and rectum as well as acute myeloid leukemia (AML).

Quitting also lowers your risk of heart and lung problems such as chronic obstructive pulmonary disease (COPD), lung infections, and circulation around your heart and other body parts.

People who quit smoking can also add as much as 10 years to their life, compared to people who continue to smoke.

Quitting while you're younger can reduce your health risks more (for example, quitting before the age of 40 reduces the risk of dying from smoking-related disease by about 90%). But quitting at any age can give back years of life that would be lost by continuing to smoke.

Are there other benefits of quitting that I'll notice right away?

Kicking the tobacco habit offers other rewards that you'll notice right away and some that will show up over time.

Right away you'll save the money you would have spent on tobacco. You may also

notice these benefits:

- Food tastes better.
- Your sense of smell returns to normal.
- Your breath, hair, and clothes smell better.
- Your teeth and fingernails stop yellowing.
- Ordinary activities (like climbing stairs or light housework) leave you less out of breath.
- You can be in smoke-free buildings without having to go outside to smoke.

Guide to Quitting Tobacco

Tobacco addiction is both mental and physical. For most people, the best way to quit is some combination of medicine, a method to change personal habits, and emotional support.

Staying Tobacco-free After You Quit

Deciding to quit tobacco is a major milestone. But staying quit is the final, longest, and most important part of the process.

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Benefits of Quitting Tobacco If You Have Cancer

There are many benefits of quitting tobacco after you've been told you have cancer. Quitting can lead to longer survival and a better quality of life. Tobacco use can also worsen the side effects of some cancer treatments.

- [Benefits of quitting tobacco](#)
- [Risks of continuing to use tobacco](#)
- [Myths about quitting tobacco](#)

Benefits of quitting tobacco

If you quit tobacco, you might have:

- Better response to your cancer treatment
- Fewer and less-serious side effects from treatment
- Faster recovery from treatment
- Lower risk of infection
- Easier breathing
- More energy

You will also be less likely to get a second cancer in the future.

Risks of continuing to use tobacco

There are risks if you continue using tobacco after finding out you have cancer. If you keep using tobacco, you are at greater risk of:

- Worse side effects from surgery, such as heart and lung problems and a slower recovery
- Worse side effects from chemotherapy, such as infection, fatigue, heart and lung problems, and weight loss
- Worse side effects from radiation therapy, such as mouth sores, loss of taste, worse voice quality, and bone and soft tissue problems
- Your cancer coming back after treatment
- Other serious illnesses caused by tobacco use, such as heart and lung diseases or a second cancer

Myths about quitting tobacco

Here are some of the most common myths about quitting tobacco when you have cancer.

Myth: There is no point in quitting smoking now that I have cancer.

Fact: It's never too late to quit smoking.

People who quit smoking after a cancer diagnosis have many benefits that people who continue to smoke don't:

- Longer life
- A better chance of successful treatment
- Fewer side effects from treatment
- Faster recovery
- Better quality of life

Myth: Quitting smoking is too stressful for people getting treated for cancer.

Fact: The benefits outweigh the challenges.

Nicotine addiction is hard to break. And you may find the withdrawal process tough. But the benefits of quitting tobacco outweigh the challenges. Ask your doctor or cancer care team about [how to best quit and manage your symptoms](#).

Myth: People can quit by themselves. They don't need help from a health care professional.**Fact: Support increases your chances of quitting.**

Many people can and do quit by themselves. But you can increase your chances of quitting with the help of your health care team. They can offer support, information, and medication to help you quit for good.

Myth: Most medications used to quit smoking don't work.**Fact: There are prescription medicines that have been shown to help people quit tobacco.**

Many studies show that several medications can lower nicotine withdrawal symptoms and increase your chances of quitting. Your health care team can recommend the right medicine for you.

[Health Benefits of Quitting Smoking Over Time](#)

It's never too late to quit using tobacco. Within minutes of smoking your last cigarette, your body begins to recover.

[Talking With Your Cancer Care Team About Tobacco Use](#)

It can be hard to talk to your cancer care team about your tobacco use. But it will help them support you better.

[Making a Plan to Quit and Preparing for Your Quit Day](#)

There's no one right way to quit tobacco or nicotine products. But there are steps you can take to help make your decision to quit a success.

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Making a Plan to Quit and Preparing for Your Quit Day

When you're ready to quit tobacco (known as tobacco cessation), you have many options. There's no one right way to quit. But there are steps you can take to help make your decision to quit a success. These steps can help no matter what type of tobacco or nicotine product you're trying to quit.

- [Make the decision to quit tobacco](#)
- [Set a date for your Quit Day](#)
- [Prepare for your Quit Day](#)
- [Other steps you can take before your Quit Day](#)
- [On your Quit Day](#)
- [Learn more](#)

Make the decision to quit tobacco

The decision to quit smoking or using smokeless tobacco is one that only you can make. Others may want you to quit, but you must make the commitment.

Think about [why you want to quit](#).

- Are you worried you could get a [tobacco-related disease](#)¹?
- Do you believe the [benefits of quitting](#) outweigh the benefits of continuing to use tobacco?
- Do you know someone who's had health problems because of using tobacco or being around it a lot?
- Are you interested in saving the money you now spend on cigarettes, cigars, vapes, chew, dip, or snuff?
- Are you hoping to improve your health and have more energy for upcoming events, like a family wedding?
- Are you ready to make a serious try at quitting?

Write down your reasons so you can look at them every time you want to smoke or dip.

Set a date for your Quit Day

After you make the decision to quit tobacco, the next step is picking a date for your Quit Day.

Why is it important to pick a Quit Day?

Once you decide to quit, you need to pick a quit date. This is a key step. Choose a day within the next month. Picking a date too far away gives you time to change your mind. Still, you need to give yourself enough time to prepare.

You might choose a date with a special meaning like a birthday or anniversary, or the date of the [Great American Smokeout](#)² (the third Thursday in November each year). Or you might want to just pick a random date.

Once you decide on a date, circle it on your calendar. Make a strong, personal commitment to quit on that day. Let others know your plan.

How do you plan to quit?

There are many ways to quit, and some ways work better than others. Nicotine replacement therapy, prescription medicines, counseling, support groups, and [other methods](#) are helpful for quitting tobacco.

Learn more about ways to quit so you can find the method (or methods) that best suit

you. It's also a good idea to talk to your doctor or pharmacist. Ask if they have information and resources to help you quit. . Also check with your insurance company about coverage for quit programs and quit aids, such as medicines and counseling.

Support is another key part of your plan. In-person or virtual quit programs, advice from health care professionals, telephone quit lines, phone reminder apps, Nicotine Anonymous meetings, self-help materials such as books and pamphlets, and counselors can be a great help. Online support groups where you can connect with others who are quitting may also help. And tell your family, friends, and co-workers that you're quitting. They can give you help and encouragement, which increases your chances of quitting for good.

Combining 2 or more of these types of quit aids may work better than using just 1.

[Nicotine Replacement Therapy](#)

Nicotine replacement therapy (NRT) can help with the cravings and physical withdrawal symptoms from quitting tobacco. Studies show NRT can almost double the chances of quitting smoking.

[Prescription Medicines to Help You Quit Tobacco](#)

There are prescription medicines that have been shown to help people quit tobacco. These medicines are often started in the weeks before your Quit Day.

[Dealing with the Mental Part of Tobacco Addiction](#)

Quitting tobacco causes withdrawal symptoms. These can be physical, but also mental and emotional. There are steps you can take to prepare yourself for this.

Prepare for your Quit Day

Here are some steps to help you get ready for your Quit Day:

Make a quit plan.

- Pick the date and mark it on your calendar.
- Think about attending a [quit class](#) to help you decide on a plan and get support.
- Decide on a plan. Will you use nicotine replacement therapy (NRT) or other medicines? Will you get counseling or call a telephone Quitline?
- Talk to your doctor or pharmacist about what might work best for you.
- Check with your insurance company about coverage for programs and medicines.

- Come up with ways to deal with triggers (situations that bring on cravings to use tobacco).
- If you're using bupropion or varenicline, take your prescribed dose each day leading up to your Quit Day.
- Think about your past attempts to quit. Try to figure out what worked and what didn't.

Remove temptations.

- Get rid of all the cigarettes, vape pens, and ashtrays, and all the smokeless tobacco products in your home, car, and at work.
- Stock up on oral substitutes like sugarless gum, carrot sticks, hard candy, cinnamon sticks, coffee stirrers, straws, and/or toothpicks.
- Practice saying, "No thank you, I don't use tobacco."
- Ask family and friends who still use tobacco not to use it around you, and not to leave any tobacco products where you can see them.

Get the support you need.

- Tell friends and family about your Quit Day.
- Set up a support system. This could be a support group, or a friend or family member who has successfully quit and is willing to help you.
- Call a [Quitline](#)³ to talk with a coach. They can help you with a quit plan and give you tips on how to stay tobacco free.
- Think about working with a counselor to support your efforts to quit.

Successful quitting requires planning and commitment. Decide now on your own plan.

Tobacco Quitlines

Quitlines are available in every U.S. state, the District of Columbia, Puerto Rico, and Guam.

- 1-800-QUIT-NOW (1-800-784-8669)
- 1-855-DÉJELO-YA (1-855-335-3569) (Español, Spanish)

Other steps you can take before your Quit Day

Cutting down, cutting back, and delaying your tobacco use can also help you prepare for your quit day.

Cut down on how much you use

One way to cut back before quitting is to reduce the number of cigarettes or cigars you smoke each day or cut down on the amount you vape, dip or chew. This helps you slowly reduce the amount of nicotine in your body.

Try cutting back to half of your usual amount before your quit day. If you usually carry a supply with you, try leaving it behind. Carry something else to put in your mouth instead.

Cut back on when and where you use

You can also try cutting back on when and where you smoke, vape, dip, or chew. This gives you a chance to notice when your cravings are the worst. It's easier to come up with an action plan if you know what triggers your cravings.

Once you've decided not to use tobacco at a certain place, leave it at home when you go there. Try your substitutes instead.

Put off using tobacco when you have a craving

Go as long as you can without giving in to a craving. Start by trying for at least 10 minutes, then longer and longer as you near your Quit Day. Pick your 3 biggest triggers and stop using tobacco at those times. This will be hard at first, but practice will make it easier.

On your Quit Day

Over time, using tobacco becomes a strong habit. Daily events like waking up in the morning, finishing a meal, drinking coffee, or taking a break at work may trigger your urge to use it. Breaking the link between the trigger and tobacco use will help you stop.

On your Quit Day, go down this list:

- Do not use tobacco. This means not at all – not even one puff!
- Stay busy. Try walking, short bursts of exercise, or other activities and hobbies.
- Drink lots of water and juices.
- Start using nicotine replacement if that's part of your plan.

- Don't use e-cigarettes to help you quit. They are not a safe option and can also cause nicotine addiction.
- Avoid situations where the craving to use tobacco is strong.
- Stay away from people who are using tobacco.
- Drink less alcohol or avoid it completely.
- 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.

Be prepared to feel the craving to use tobacco. The urge will likely be pretty strong. But it's important to remember that a craving will pass whether you give in to it or not.

Use the 4 D's to help fight the urge:

- **Delay** for 10 minutes. Repeat if needed.
- **Deep breathe.** Close your eyes, slowly breathe in through your nose and out through your mouth. Picture your lungs filling with fresh, clean air.
- **Drink water** slowly, sip by sip.
- **Do something else.** Some activities trigger cravings. Get up and move around.

Often, this simple trick will allow you to move beyond the strong urge to use tobacco.

Learn more

[Quitting Smoking or Smokeless Tobacco](#)

Quitting tobacco (tobacco cessation) is a lot like losing weight. It takes a strong commitment over a long time.

[Quitting E-cigarettes \(vapes, vape pens\)](#)

Most experts agree more research is needed about the best ways to quit e-cigarettes. But in many ways, quitting e-cigarettes is a lot like quitting other tobacco products.

[Staying Tobacco-free After You Quit](#)

Deciding to quit tobacco is a major milestone. But staying quit is the final, longest, and most important part of the process. It's important to have strategies and support to help you get through it.

Hyperlinks

1. www.cancer.org/cancer/risk-prevention/tobacco/health-risks-of-smoking-tobacco.html
2. www.cancer.org/cancer/risk-prevention/tobacco/great-american-smokeout.html
3. www.cdc.gov/tobacco/hcp/patient-care/quitlines-and-other-resources.html

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Last Revised: October 28, 2024

Quitting Smoking or Smokeless Tobacco

Quitting tobacco (tobacco cessation) is a lot like losing weight. It takes a strong commitment over a long time.

For people who smoke cigarettes, the quitting process is known as smoking cessation. But quitting one tobacco product is a lot like quitting another. For example, quitting smokeless tobacco can be a lot like quitting smoking. Both products contain nicotine and involve the physical, mental, and emotional parts of addiction.

Many of the ways to handle the mental hurdles of quitting are the same, no matter which tobacco products you use.

- [Where to start](#)
- [Do quit programs really work?](#)
- [What about medicines to help me quit?](#)
- [Can e-cigarettes help me quit tobacco?](#)
- [What can I do to increase my chances of quitting?](#)

Where to start

It's best to talk with your doctor about a plan that's right for you. Talking to a pharmacist might be helpful, too. Don't forget to check with your insurance company to see what

they cover for quit programs and products. You can also learn more about taking the first steps here: [Planning Your Quit Day](#).

Do quit programs really work?

As you look into different quit programs, you may want to ask about each program's success rate and the methods they use to help people quit. Success rates are hard to figure out for many reasons. Not all quit programs define success in the same way. Find out more about the goals of each program and how they measure success.

For example, you can ask these questions:

- Does success mean a person isn't using tobacco at the end of the program? After 3 months? 6 months? 1 year?
- Does using tobacco less (rather than stopping completely) count as success?
- What is the program's success rate?
- What kind of follow-up is done to confirm the success rate?

Quitting is hard. Studies show that rates of quitting without any help are only about 4% to 7%. But many quit programs report higher rates of quitting among those who complete their program. So, finding a program that fits your needs can make a difference.

What about medicines to help me quit?

For many people trying to quit cigarettes, combining prescription medicines and nicotine replacement therapy (NRT) can work better than using just one. There may also be some benefit to [using medicines](#) when you're quitting smokeless tobacco.

Talk to your doctor or pharmacist about what might work best for you. Ask your insurance company about coverage for these medicines as well.

Can e-cigarettes help me quit tobacco?

[E-cigarettes](#)¹ are not approved by the FDA as aids to help stop smoking or using smokeless tobacco. This is because there's not enough research yet on the long-term health effects of e-cigarettes.

In contrast, there is a large body of evidence clearly showing that FDA-approved

medications are a safe and effective way to help people quit smoking, especially when combined with counseling.

What can I do to increase my chances of quitting?

Support is a key part of a quit plan. Along with quit programs, counseling and other types of emotional support show success rates higher than medicines alone. Behavioral and supportive therapies may increase success rates even further. They can also help you stay tobacco-free.

Check the package insert of any product you use to see if the manufacturer provides free telephone-based counseling. There are also free Quitlines offered by different organizations. Talk to a health care provider or contact American Cancer Society to find free telephone-based counseling.

[Cancer Help](#) ²

Contact the ACS cancer helpline to get answers and information

[Search for resources](#) ³

Find free or low-cost resources from ACS and other organizations.

Hyperlinks

1. www.cancer.org/cancer/risk-prevention/tobacco/e-cigarettes-vaping.html
2. www.cancer.org/about-us/what-we-do/providing-support.html
3. www.cancer.org/support-programs-and-services/resource-search.html

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Quitting E-cigarettes (Vapes, Vape Pens)

Most experts agree more research is needed about the best ways to quit e-cigarettes (also known as vaping or vape pens). But in many ways, quitting e-cigarettes is a lot like quitting other tobacco products.

- [What is the best way to quit e-cigarettes?](#)
- [Is quitting e-cigarettes easier than quitting other tobacco products?](#)
- [Can e-cigarettes be used to help quit smoking?](#)
- [Learn more](#)

What is the best way to quit e-cigarettes?

[E-cigarettes](#)¹ don't contain tobacco, but many of them contain nicotine. (Nicotine is the addictive part of tobacco.) Even though they don't contain tobacco, the Food and Drug Administration (FDA) classifies e-cigarettes as "tobacco products" because the nicotine in them usually comes from tobacco.

Quitting e-cigarettes is a lot like quitting any other tobacco product that contains nicotine. This is because the physical, mental, and emotional parts of quitting are mostly caused by nicotine addiction.

Many of the ways to handle the mental hurdles of quitting are the same, no matter which product you're trying to quit. But most experts agree more research is needed about the best ways to quit e-cigarettes.

Is quitting e-cigarettes easier than quitting other tobacco products?

Quitting e-cigarettes is most likely as difficult as quitting other tobacco products. The Centers for Disease Control and Prevention (CDC) recommends using one of the ways already known to help people quit other tobacco products.

Learn more about these methods:

- [Making a Plan to Quit and Planning a Quit Day](#)
- [Quitting Smoking or Smokeless Tobacco](#)

Get help quitting e-cigarettes

If you're having trouble quitting e-cigarettes on your own, talk to your doctor or pharmacist. You can also get help from other support services:

- Your state Quitline (1-800-QUIT-NOW)
- The American Cancer Society (1-800-ACS-2345)

Can e-cigarettes be used to help quit smoking?

Some people choose to try e-cigarettes to help them stop smoking. But studies have not proven that e-cigarettes are more effective than other available methods for helping people quit tobacco products.

Some studies suggest that people who use e-cigarettes to quit smoking continue to have nicotine addiction. This makes it harder to then stop using e-cigarettes. Some

people may end up using both e-cigarettes *and* other tobacco products.

The American Cancer Society does not recommend the use of e-cigarettes as a method to quit other tobacco products. No e-cigarette has been approved by the FDA as a safe and effective cessation product. And the safety of long-term e-cigarette use hasn't been proven.

People who switch to e-cigarettes when trying to quit other tobacco products are still at risk of serious health problems. To reduce health risks and avoid staying addicted to nicotine, it's best to stop using all tobacco products, including e-cigarettes, as soon as possible.

Learn more

[Dealing with the Mental Part of Tobacco Addiction](#)

Quitting tobacco causes withdrawal symptoms. These can be physical, but also mental and emotional. There are steps you can take to prepare yourself for this.

[Help for Cravings and Tough Situations While You're Quitting Tobacco](#)

You will likely have strong cravings. Sometimes it will be especially hard to stay away from tobacco. But there are things you can do to help yourself stay quit.

Hyperlinks

1. www.cancer.org/cancer/risk-prevention/tobacco/e-cigarettes-vaping.html

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Nicotine Replacement Therapy to Help You Quit Tobacco

Nicotine replacement therapy (NRT) can help with the cravings and physical withdrawal symptoms from quitting tobacco. Studies show NRT can almost double the chances of quitting smoking.

- [What is nicotine replacement therapy \(NRT\)?](#)
- [Who should consider using NRT?](#)
- [How does nicotine replacement therapy work?](#)
- [When can I start using it?](#)
- [Getting the most from nicotine replacement therapy](#)
- [Is nicotine replacement therapy safe for everyone?](#)
- [Types of nicotine replacement therapy](#)
- [Choosing and using the right nicotine replacement therapy for you](#)
- [Can you get too much nicotine from NRT?](#)
- [Does nicotine cause cancer?](#)
- [Stopping nicotine replacement therapy](#)
- [Long-term nicotine replacement therapy dependence](#)
- [Learn more](#)

What is nicotine replacement therapy (NRT)?

Nicotine is the substance in tobacco that causes addiction. If you use tobacco, many parts of your body get used to the effects of nicotine. You become physically dependent on it. When you quit tobacco, you also stop getting nicotine. You will likely have withdrawal symptoms, because now your body has to get used to *not* having nicotine.

Nicotine replacement therapy (NRT) gives you nicotine without the other harmful chemicals in tobacco. This nicotine comes in the form of gum, patches, sprays, inhalers, or lozenges.

NRT can help relieve some of the physical withdrawal symptoms so you can focus on the [mental and emotional parts of quitting](#).

Many studies have shown using NRT can almost double the chances of quitting smoking. It hasn't been studied as much for quitting smokeless tobacco, but NRT lozenges may help with this.

Who should consider using NRT?

People who smoke* and are highly dependent on nicotine should consider nicotine replacement or [prescription medicine](#) therapy to help them quit. Signs of severe nicotine dependence include:

- Smoking more than 1 pack a day
- Smoking within 5 minutes of waking up
- Smoking even while sick
- Waking up at night to smoke
- Smoking to ease symptoms of withdrawal

The more of these that apply, the more serious the nicotine dependence.

NRT has not yet been proven to help people who smoke fewer than 10 cigarettes a day. But many tobacco treatment centers use NRT for people who are "light smokers." If you smoke less than that 10 cigarettes a day but feel you need nicotine replacement, talk with your health care provider about a lower dose of NRT.

****NRT is not approved for pregnant women or teens. It also might not be safe for adults with certain other health problems.***

How does nicotine replacement therapy work?

Nicotine replacement therapy (NRT) can help with the withdrawal symptoms and cravings that most people say is their only reason for not quitting tobacco. Using NRT reduces these symptoms.

Many people can quit tobacco without nicotine replacement therapy. But most people

who attempt quitting don't succeed on the first try. In fact, people trying to quit usually need many attempts before they're able to quit for good.

Most people who try to quit on their own go back to smoking within the first month of quitting. This is often because of the withdrawal symptoms. **But the good news is that many people do succeed. In fact, there are now more people who formerly smoked than people who currently smoke.**

Together with counseling or other support, NRT may also help increase the number of smokeless tobacco users who quit.

The Food and Drug Administration (FDA) has approved the NRT products discussed here as effective aids for helping people quit smoking. None of these products has been FDA-approved specifically to help people quit smokeless tobacco. But some studies have shown the lozenge form of NRT might help.

When can I start using it?

You can start using nicotine replacement therapy as soon as you throw away your tobacco. You don't need to wait before you put on the patch or start using the gum, lozenge, nasal spray, or inhaler.

Double-check this information with the instructions on your chosen method of nicotine replacement. But in general, there's no need to wait to start using NRT.

Getting the most from nicotine replacement therapy

Nicotine replacement therapy (NRT) only helps with physical dependence. It's not meant to be the only thing you use to help you quit tobacco. You'll need other ways to manage the emotional and mental part of stopping tobacco, such as a quit program.

Use a quit program or other support system during treatment with NRT and for at least a few months after you quit.

Studies show that pairing NRT with a program that helps change behavior can improve your chances of quitting and staying quit (compared to using only one method).

The best time to start NRT is when you first quit.

Some people first try to quit tobacco on their own then decide to try NRT a day or more into quitting. This doesn't give you the greatest chance of success. But if you already

did this, don't let it discourage you. There are many options for quitting and staying quit.

Quitting Smoking or Smokeless Tobacco

Quitting tobacco (tobacco cessation) is a lot like losing weight. It takes a strong commitment over a long time.

Making a Plan to Quit and Preparing for Your Quit Day

There's no one right way to quit tobacco or nicotine products. But there are steps you can take to help make your decision to quit a success.

Dealing with the Mental Part of Tobacco Addiction

Quitting tobacco causes withdrawal symptoms. These can be physical, but also mental and emotional. There are steps you can take to prepare yourself for this.

Is nicotine replacement therapy safe for everyone?

The US Food and Drug Administration (FDA) has approved 5 forms of NRT for adults who want to quit smoking. **These approvals are not for pregnant women and teens.**

Pregnant women

It is not clear if NRT is safe for pregnant women who are trying to quit smoking. Experts suggest that women who are pregnant focus their quit efforts on behavioral and support methods.

If behavioral methods are not working for a pregnant woman, NRT might be an option in some situations. But pregnant women should only use NRT under a doctor's care.

Teenagers and adolescents

NRT products are not currently approved by the FDA for people under the age of 18. But the American Academy of Pediatrics (AAP) states that NRT is safer than cigarettes, e-cigarettes, and other tobacco products.

Teens and adolescents who use tobacco products should work with their doctor to come up with a plan to quit tobacco. If the doctor thinks NRT can be tried, they must write a prescription.

People who are still smoking or using any other form of tobacco

NRT products may not be safe while still using tobacco. The FDA has not approved them to be used in this way. Talk to a health care provider if you want to use NRT while continuing to smoke or chew as part of your quit plan.

People with heart problems now or in the past

If you've had a heart attack in the last two weeks, have a heart rhythm problem, or get check pain (angina), talk to your health care team about whether it's safe for you to use NRT. You might still be able to use NRT, but your doctor may want to adjust doses or watch you closely.

It's best for anyone to discuss NRT use with your health care provider before starting it. You may have medical problems that should be considered. When deciding whether to use NRT, the benefits of quitting tobacco must outweigh the potential health risks for each person.

Types of nicotine replacement therapy

The US Food and Drug Administration (FDA) has approved 5 forms of nicotine replacement therapy (NRT):

- Patch
- Gum
- Nasal spray
- Inhaler
- Lozenges

NRT patches, gum, and lozenges can be purchased over the counter. Nasal sprays and inhalers require a prescription.

The most important thing to do with any form of NRT is read and follow the package instructions very carefully.

Stop using NRT right away if:

For all NRT products, stop using right away and contact your health care provider if you have any of the following symptoms. These may be signs that you've gotten too much nicotine.

- Racing heart

- Nervousness or shakiness
- Nausea with or without vomiting
- Headache
- Trouble breathing
- Drooling

Nicotine patches (transdermal nicotine systems)

Nicotine patches can be bought by people over 18 years of age with or without a prescription.

Patches give a measured dose of nicotine through your skin. Nicotine is slowly released over a 24-hour period, so you get a steady dose. You're weaned off nicotine by switching to lower-dose patches over a period of weeks.

Many different types and strengths of patches are available including 7, 14, and 21 milligram patches. Which dose you should use depends on how many cigarettes you smoke each day. Package instructions tell you how to use them. They also list safety concerns and possible side effects.

How to use nicotine patches

Depending on smoking habits, most people who smoke should start using a full-strength patch (21 mg of nicotine) daily for several weeks and then use a weaker patch (14 mg of nicotine) for another several weeks.

The patch is changed every day. It should be put on in the morning on a clean, dry area of your skin without much hair. It should be placed below your neck and above your waist (for example, on your upper arm or chest).

The FDA has approved using the patch for a total of 3 to 5 months, but using it longer is better than going back to smoking. Talk to your health care team if you think you need to use the patch for longer.

Possible side effects

- Skin irritation (redness, itching or burning)
- Headache
- Sleep problems or unusual dreams

No one has all the side effects, and some people have none. Stop using the patch and talk to your health care provider if you have any of these symptoms. You could also have nicotine withdrawal symptoms if your NRT dose is too low.

What to do about side effects

- Try a different brand of patch if your skin becomes irritated.
- Reduce the amount of nicotine by using a lower-dose patch.
- Sleep problems may go away in 3 or 4 days. If not, try removing your patch before you go to bed.
- Stop using the patch and try a different form of NRT.

Nicotine gum (nicotine polacrilex)

Nicotine gum can be bought over the counter (without a prescription).

Nicotine gum is a fast-acting form of NRT. Nicotine is taken in through the lining of the mouth. It comes in 2 mg and 4 mg strengths.

The dose of nicotine gum you use will depend on when you normally smoke your first cigarette after waking up. If you normally smoke your first cigarette within 30 minutes of waking up, use 4 mg nicotine gum. If you normally smoke your first cigarette more than 30 minutes after waking up, use 2 mg-nicotine gum.

How to use nicotine gum

Before you start using nicotine gum, be sure to read any instructions that come with the package. Nicotine gum is not meant to be used like regular gum. To get the best effect:

- Chew the gum slowly until you feel a tingling in your mouth.
- Then tuck it inside your cheek until the taste fades.
- Chew the gum again to get the tingling feeling back and tuck it inside your cheek again.
- Do this off and on for 20 to 30 minutes until the tingling feeling stops.
- Don't eat or drink for at least 15 minutes before and during gum use. (Some drinks can reduce how well the gum works.)

These steps are important because if you chew it like regular gum, it may not have the

desired effect.

How often to use it

To start, it's suggested that you use nicotine gum every 1-2 hours on a regular schedule. To ease withdrawal symptoms, try to use at least 9 pieces of gum each day for the first 6 weeks. You can use it more often if you have cravings in between.

Chew no more than 24 pieces of gum in one day.

Nicotine gum is usually recommended for 6 to 12 weeks, with the maximum being 6 months. Tapering down the amount of gum you use as you approach 3 months may help you stop using it. But it is better to keep using the gum rather than starting to smoke again.

Possible side effects

- Bad taste
- Mouth or jaw soreness or irritation
- Upset stomach, hiccups, or too much saliva
- Nausea or vomiting
- Feeling lightheaded

Stomach and jaw discomfort are usually caused by improper use of the gum, such as swallowing the nicotine or chewing too fast. The gum can also stick to and damage dentures and dental work.

No one has all the side effects, and some people have none. If your heart is racing or beating irregularly, stop using the gum and talk to your health care provider. You could also have nicotine withdrawal symptoms if your NRT dose is too low.

Nicotine lozenges

Nicotine lozenges can be bought over the counter (without a prescription).

The lozenge is available in 2 strengths: 2 mg and 4 mg. The dose of nicotine lozenge you use will depend on when you normally smoke your first cigarette after waking up.

If you smoke your first cigarette within 30 minutes of waking up, use 4 mg nicotine lozenges. If you smoke your first cigarette more than 30 minutes after waking up, use 2

mg-nicotine lozenges.

Some people who use NRT prefer lozenges to the gum because they are less conspicuous.

How to use nicotine lozenges

The recommended dose for nicotine lozenges is:

- The first 6 weeks: 1 lozenge every 1 to 2 hours
- Weeks 7 to 9: 1 lozenge every 2 to 4 hours
- Weeks 10 to 12: 1 lozenge every 4 to 8 hours

To ease withdrawal symptoms, try to use at least 9 lozenges each day for the first 6 weeks. You can use it more often if you have cravings in between.

The lozenge makers also recommend:

- Do not eat or drink for at least 15 minutes before using a lozenge or while using a lozenge. (Some drinks can reduce how well the lozenge works.)
- Do not use more than 1 lozenge at a time and do not use one right after another.
- Suck on the lozenge until it is fully dissolved, about 20 to 30 minutes. Move it from side to side in your mouth.
- Do not bite or chew it like a hard candy, and don't swallow it. The nicotine absorbs through the mucous membranes of your mouth.
- Do not use more than 5 lozenges in 6 hours, or more than 20 lozenges per day.
- Stop using lozenges after 12 weeks. If you still feel you need to use them, talk to your doctor.

Possible side effects

- Nausea
- Hiccups
- Heartburn
- Trouble sleeping
- Headache
- Cough

If you have trouble sleeping when using nicotine lozenges, try not to use them for several hours before you go to sleep.

Nicotine nasal spray

Nicotine nasal spray is only available by prescription.

Nicotine in the nasal spray is absorbed through your nose. It relieves withdrawal symptoms quickly and helps you control your nicotine cravings.

How to use nicotine nasal spray

Most people are told to use 1 to 2 doses per hour. (1 dose = 2 sprays, 1 in each nostril.) You may need to take at least 8 doses (16 sprays) each day when you first start. Instructions can vary. Talk to your provider about the plan that's best for you.

Don't use more than 40 doses (80 sprays) per day. Using more than that can cause more serious side effects. The FDA recommends nicotine spray not be used for longer than 6 months.

Possible side effects

Common side effects of nicotine spray get better in 1 to 2 weeks. These side effects can include:

- Nose and throat irritation (hot, peppery feeling)
- Runny nose
- Watery eyes
- Sneezing
- Coughing

No one has all the side effects, and some people have none.

Some side effects, like racing heart, may happen because you've gotten too much nicotine. If this happens, stop using the spray to see if the feelings get better and talk to your health care provider.. You may need to use it less often. You could also have nicotine withdrawal symptoms if your NRT dose is too low.

If you have asthma, allergies, nasal polyps, or sinus problems, your provider may suggest another form of NRT.

Safety note:

This form of NRT poses a more serious risk to small children and pets because the empty bottles of nasal spray contain enough nicotine to harm them. Do not get the liquid on your skin. If there is any skin contact, rinse thoroughly with plain water right away. If a bottle breaks or liquid leaks out, put on plastic or rubber gloves to clean it up.

Call Poison Control and get emergency help if there's any question of overdose.

Nicotine inhalers

Nicotine inhalers are only available by prescription.

The nicotine inhaler is a thin plastic tube with a nicotine cartridge inside. This is different from other inhalers which carry most of the medicine to the lungs. Nicotine inhalers give most of the nicotine vapor to the mouth and throat, where it's absorbed.

Nicotine inhalers are the FDA-approved nicotine replacement method that's most like smoking a cigarette. Some people trying to quit find this helpful. They are not the same as electronic cigarettes, which are not approved by the FDA to help people quit smoking.

How to use the nicotine oral inhaler

Take short, shallow puffs on the inhaler. This pulls nicotine vapor into your mouth. You may use up the cartridge all at once over about 20 minutes, or puff on it for about 5 minutes at a time. The suggested dose is at least 6 but no more than 16 cartridges a day, slowly tapering off over 6 months.

Possible side effects

The most common side effects, especially when first using the inhaler, include:

- Coughing
- Mouth and/or throat irritation
- Runny nose
- Headache
- Hiccups or upset stomach

No one has all the side effects, and some people have none.

Some side effects, such as racing heart, may happen because you've gotten too much nicotine. If this happens, stop using the inhaler to see if the feelings get better and talk to your health care provider. You may need to use it less often.

You might also have nicotine withdrawal symptoms if your NRT dose is too low.

Safety note:

Nicotine inhalers pose an extra risk to small children and pets. The used cartridges have enough nicotine left in them to cause harm if it gets on skin or mucous membranes (for example, if licked or touched to the eyes, mouth, or other mucous membrane). Be sure to store and dispose of the cartridges away from children and pets.

Call Poison Control and get emergency help if there's any question of overdose.

Choosing and using the right nicotine replacement therapy for you

When deciding on a type of nicotine replacement therapy, think about which method best fits your lifestyle and pattern of smoking or using smokeless tobacco. For example, do you want/need something in your mouth or something to keep your hands busy? Are you looking for once-a-day convenience? How strong are your cravings for nicotine?

Here are some things to think about as you decide:

- Nicotine gums, lozenges, and inhalers are put into your mouth and let you control your dosage to help you deal with cravings.
- Nicotine gums and lozenges are generally sugar-free. But if you're diabetic and have any doubts, check the package or contact the manufacturer.
- Nicotine nasal spray works very quickly.
- Nicotine inhalers allow you to mimic the use of cigarettes by puffing and holding the inhaler. They also work very quickly.
- Nicotine patches are convenient and only have to be put on once a day. They provide a steady level of nicotine for 24 hours.
- Inhalers and nasal sprays require a doctor's prescription.
- Some people may not be able to use patches, inhalers, or nasal sprays because of allergies or other conditions.
- Nicotine gum may stick to dentures or dental work, making it hard to chew before you place them between your cheek and gums.

Whatever type you use, take your NRT at the recommended dose. Taking too little

won't give you the relief from cravings that you need. If you take too much, you may have serious side effects.

NRT is not recommended for long-term use, but if it's needed to prevent relapse, continuing to use it is preferable to returning to smoking. If you stop taking NRT too soon, the cravings might make you return to smoking again.

If you smoke very heavily, very lightly, or are a smokeless tobacco user, talk with your health care provider about how to get the NRT dose that is most likely to help you.

What is light, average, and heavy smoking?

Many nicotine replacement therapy (NRT) product recommendations are based on how much you smoke. But there's no formal method that defines how much smoking is light, average, or heavy smoking.

These are general guidelines:

- Light smoking: Fewer than 10 cigarettes per day
- Heavy smoking: A pack a day or more
- Average smoking falls in between.

How do I know what NRT dose to use to help me quit smokeless tobacco?

Your NRT dose should roughly match the amount of nicotine you take in each day. It can be more of a challenge to get the dose right for smokeless tobacco users, since NRT products are labeled for people who smoke.

Certain types of NRT may help more than others. For example, nicotine gum and lozenges are most like using smokeless tobacco. They also let you control your dose to help keep nicotine cravings down. To avoid withdrawal symptoms, you want to aim for a nicotine dose fairly close to what you got from snuff or tobacco use.

Your actual dose might be different. But as a general guideline, if you use:

- **More than 3 cans of snuff or pouches of tobacco per week:** Start with the higher dose of NRT (the dose for people who smoke heavily).
- **Between 2 to 3 cans or pouches per week:** Start with the moderate dose.
- **Less than 2 cans or pouches per week:** Start with the lowest dose.

If you've decided to try NRT, discuss your dose with a health care provider before you quit tobacco.

Smokefreevet has an online calculator that suggests NRT dosing for people who use smokeless tobacco. The suggested dosing is based on how much tobacco you use and when you place your first dip. Make sure you choose the Dip or Chew Tobacco tab.

[Smokefreevet NRT Dosing Calculator](#) ¹

If you are quitting smokeless tobacco, use this calculator to figure out the right dose for your nicotine replacement therapy.

Combining the patch and other nicotine replacement products

Many people use the nicotine patch along with shorter-acting products like gum, lozenges, nasal sprays, or inhalers. This provides a steady dose of nicotine from the patch along with the shorter-acting products when you have strong cravings.

In general, people who have smoked heavily or used more smokeless tobacco do better by combining these products. If you're thinking about using more than one NRT product, be sure to talk to your health care provider first.

Can you get too much nicotine from NRT?

Nicotine overdose is rare, but it can happen. NRT products are labeled to help you match the amount of nicotine you get from the NRT to what you were getting from tobacco.

If used this way, you should be able to get a pretty similar dose of nicotine. Taking higher doses of nicotine can be harmful. To avoid this, follow dosing instructions carefully. Talk to your health care provider if your dose doesn't help with the tobacco cravings.

Don't use heat (like a heating pad or heat lamp) on the skin near your nicotine patch. This can increase blood flow to the area and cause the nicotine to be absorbed more quickly than is safe.

Be careful how you store and dispose of your NRT. Keep NRT and used gum, patches, empty cartridges, bottles, etc. safely away from children and pets. Never drop them on the street or in open trash cans where kids and animals can reach them.

Nicotine can be absorbed through skin and mucous membranes, which can lead to overdose if NRT materials are not handled carefully. Overdose is more of a problem in children and pets because of their smaller size.

Symptoms of nicotine overdose

Here are some symptoms of too much nicotine:

- Headache
- Nausea and vomiting
- Belly pain
- Diarrhea
- Agitation, restlessness
- Fast or irregular heartbeat
- Cold sweat
- Pale skin and mouth
- Weakness
- Tremors (shaking)
- Confusion
- Disturbed vision and hearing
- Weakness
- High blood pressure, which then drops
- Dizziness or faintness due to low blood pressure
- Seizures
- Fast breathing in early poisoning, breathing may stop later

Call Poison Control and get emergency help if you think your or someone else might have a nicotine overdose. If you're taking NRT as prescribed and are still having mild symptoms such as headache, vomiting, diarrhea, or sweating, lower your dose and talk to your health care provider.

Does nicotine cause cancer?

No, nicotine has not been found to cause cancer. Nicotine is the addictive substance in tobacco, but some of the other substances in tobacco are what can cause cancer. Using NRT to quit tobacco doesn't increase your risk of cancer. In fact, it can lower your risk if it helps you stop using tobacco.

Stopping nicotine replacement therapy

Nicotine replacement therapy is meant to be used for a limited amount of time. You should taper down the dose you're taking before you stop using NRT completely. So far, studies haven't shown that extending NRT use beyond the recommended time greatly impacts quit success. But long-term NRT use is still preferable to smoking.

Research is still being done to refine the use of nicotine replacement therapy. If you feel you need NRT for a different length of time than what is recommended, it's best to discuss this with your health care provider.

Long-term nicotine replacement therapy dependence

Nicotine replacement therapy (NRT) has the potential for long-term dependence. Nicotine is addictive, and people can transfer their dependence from tobacco to the nicotine replacement therapy.

Use NRT only as long as you need it, as prescribed by your health care provider. Talk to your provider if you're having trouble stopping NRT.

Learn more

[Staying Tobacco-free After You Quit](#)

Deciding to quit tobacco is a major milestone. But staying quit is the longest and most important part of the process. It's important to have strategies and support to help you get through it.

[Help for Cravings and Tough Situations While You're Quitting Tobacco](#)

You will likely have strong cravings. Sometimes it will be especially hard to stay away from tobacco. But there are things you can do to help yourself stay quit.

Hyperlinks

1. veterans.smokefree.gov/

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Prescription Medicines to Help You Quit

Tobacco

There are prescription medicines that have been shown to help people quit tobacco. Some can be used along with [nicotine replacement therapy \(NRT\)](#). These medicines are often started in the weeks before your Quit Day (the day you plan to quit).

- [Is quit-tobacco medicine right for me?](#)
- [Before you start](#)
- [Varenicline \(Chantix\)](#)
- [Bupropion \(Zyban\)](#)
- [Other prescription medicines used to help people quit tobacco](#)
- [Other medicines being studied to help people quit tobacco](#)

Is quit-tobacco medicine right for me?

People who are dependent on nicotine should think about nicotine replacement and/or medicine therapy to help them quit. Signs of nicotine dependence in people who smoke include:

- Smoking more than 1 pack a day
- Smoking within 5 minutes of waking up
- Smoking even while sick
- Waking up at night to smoke
- Smoking to ease symptoms of withdrawal

The more of these that apply, the more serious the dependence.

Before you start

Talk to your health care provider if you think you might want to use one of these medicines to help you quit tobacco. You'll need a prescription. It's also a good idea to talk to your health insurance about coverage for these medicines.

If you plan to use a prescription medicine to quit tobacco, talk with your health care provider about when to start the medicine and how to use it. Also, ask what side effects you should watch for and report.

Create a reminder (like a calendar note or phone alarm) to help you remember when to

start the medicine.

Varenicline (Chantix)

Varenicline (also called Chantix) is a prescription medicine FDA-approved to help people stop smoking. It has 2 effects:

- Lessens the pleasure a person gets from smoking
- Reduces the symptoms of nicotine withdrawal

Varenicline has also shown to be helpful for people trying to quit smokeless tobacco. It can increase the chance of quitting when compared to taking no medicines at all, at least in the short term. (Some studies have also found [NRT lozenges](#) can help.)

How to use varenicline

You typically start taking varenicline (a pill) a week before your Quit Day. Or, you can start taking varenicline and then pick a quit date in the next few weeks. Be sure to quit using tobacco on the date you choose.

Take it after meals, with food or a full glass of water. The daily dose increases over the first 8 days you take it. If you have problems with the higher doses, a lower dose may be used while you try to quit.

Typically, varenicline is given for 12 weeks, but people who quit during that time may get another 12 weeks of treatment to boost their chances of staying off tobacco. It's important to keep up with [other support systems](#) during this time and for at least a few months after quitting.

Before you start varenicline, tell your provider about any medical conditions and allergies you have, including if you have kidney problems or might be pregnant.

Side effects of varenicline

Reported side effects of varenicline include:

- Nausea or vomiting
- Headache
- Trouble sleeping, vivid dreams, or sleepwalking
- Constipation

- Gas and diarrhea
- Changes in taste
- Skin rashes
- Heart or blood vessel problems (mostly in people who already have these problems)
- Mood or behavior changes such as depression, hallucinations, delusions, aggression, hostility, agitation, anxiety, panic, or suicidal thoughts

Ask your health care team about what to expect while taking this medicine, and what to do if you have side effects.

Be sure to let your provider know if you've ever had depression or other mental health problems, or if you start feeling depressed or have thoughts about suicide while taking varenicline.

Be careful driving or using heavy machinery as varenicline causes some people to feel sleepy or dizzy.

Using varenicline along with NRT (nicotine patch) or bupropion

Using varenicline along with the nicotine patch has shown better outcomes than using varenicline alone. More people quit tobacco with this combination, and side effects appear to be about the same.

Studies are also looking at the use of varenicline and bupropion (another FDA-approved medicine, see below) together for quitting tobacco. This combination is not usually suggested right away, but it may benefit people who need more help when one medicine isn't enough.

While there may be a benefit to combining the medicines, more research is needed to better understand the side effects that can happen when doing so.

Bupropion (Zyban)

Bupropion (also called Zyban) is another FDA-approved medicine for quitting tobacco. It's a prescription antidepressant in an extended-release form that helps reduce cravings and symptoms of nicotine withdrawal. It acts on chemicals in the brain that are related to nicotine craving.

There are other forms of bupropion (such as Wellbutrin or Aplenzin) but these are not

approved by the FDA for tobacco cessation.

How to use bupropion

Bupropion works best if it's started 1 to 2 weeks before your quit date. The usual dosage is one or two 150 mg tablets per day.

If you've quit tobacco and are still quit after taking bupropion for 12 weeks, your provider may have you keep taking it for a while longer to help stop you from going back to smoking. Keep up with your other support systems during this time and for at least a few months after you quit.

You should not take bupropion if you have:

- Seizures (it can cause or worsen seizures)
- Heavy alcohol use
- Liver disease
- Bipolar (manic-depressive) illness
- Anorexia or bulimia (eating disorders)
- Treatment with monoamine oxidase inhibitor (MAOI, an older type of antidepressant)

You should also not take bupropion if you recently stopped or plan to stop using:

- Alcohol
- Certain sedatives and anti-anxiety medicines
- Medicines for epilepsy (seizures)

Before you start bupropion, tell your health care team if you plan to stop drinking or taking any of these medicines. Tell them about any allergies or medical conditions, including if you might be pregnant.

Side effects of bupropion

Reported side effects of bupropion include:

- Dry mouth
- Stuffy nose
- Trouble sleeping

- Tiredness
- Trouble focusing
- Constipation
- Nausea
- Dizziness
- Rash
- High blood pressure
- Risk of seizures
- Feeling depressed, anxious, agitated, hostile, aggressive, overly excited or hyperactive, or confused; or having suicidal thoughts

If you use bupropion, call your health care provider if you feel depressed or start thinking of suicide. Also be sure to ask what to expect while taking this drug, and what to do if you have side effects.

Bupropion can cause medicine interactions and shouldn't be used with certain other medicines or supplements. Be sure your provider knows about everything you take, such as prescription medicines, vitamins, herbs, supplements, and any medicines you take on your own.

Examples of medicines you shouldn't take without checking with your doctor include acetaminophen (Tylenol), diphenhydramine (Benadryl) or aspirin. Also be sure to tell every provider you see that you're taking bupropion.

Using bupropion along with NRT (nicotine patch) or varenicline for quitting smoking

There is some consensus that using bupropion along with nicotine patches might increase the odds of quitting.

Using bupropion at the same time as varenicline is not usually suggested for initial treatment. But this combination may benefit people who need more help when one medicine is not enough. While there may be a benefit to combining the medicines, more research is needed to better understand side effects that can happen when doing so.

Other prescription medicines used to help people quit tobacco

If you can't use bupropion or varenicline to help you quit, or if you haven't been able to quit using them, other medicines have shown some promise.

These medicines are recommended by the Agency for Healthcare Research and Quality for this kind of use, but they haven't been approved by the FDA for this purpose, so they are used "[off-label](#)"¹. They are only available with a prescription and are not recommended for pregnant women, teens, or people who smoke fewer than 10 cigarettes a day.

Nortriptyline

Nortriptyline is an anti-depressant medicine that helps reduce tobacco withdrawal symptoms. It has been found to increase chances of success in quitting smoking when compared to those taking no medicine.

Nortriptyline is usually started 10 to 28 days before your quit day to allow it to reach a stable level in your body.

Some people have side effects like dry mouth, sleepiness, nausea, weakness, anxiety, trouble urinating, constipation, changes in appetite or weight, and changes in sex drive. This medicine can affect your ability to drive or operate machinery, and certain medicines can't be used along with it.

If you and your health care provider decide to try this medicine, be sure your provider and pharmacist know what other medicines you're taking before you start.

Also be sure you understand how to take it and how to taper off when you're ready to stop. **The dose of nortriptyline must be slowly lowered. It cannot be stopped suddenly without the risk of serious effects.**

People with heart disease should use this medicine cautiously. Be sure to tell all your health care providers that you are taking this drug.

Clonidine

Clonidine is another medicine that has been tried to help people quit. It isn't used often, but it may be an option for people when nicotine replacement therapy and other prescription medicines don't work.

If you plan to use this drug, be sure your health care provider and pharmacist know exactly what else you're taking before you start.

The most common side effects of clonidine are constipation, dizziness, dry mouth, and unusual tiredness or weakness. Your health care team might want to watch your blood

pressure while you are on this drug. The medicine can also affect your ability to drive or operate machinery.

You can start taking clonidine 2 to 3 days before you quit smoking. **It shouldn't be stopped suddenly.** The dose must be lowered over a few days to prevent tremors, confusion, agitation, or a rapid increase in blood pressure.

Other medicines being studied to help people quit tobacco

A plant-based medicine called cytisine has been used in other countries for quitting tobacco. It is now being studied in the United States.

Nicotine **vaccines** have also been tested as a way to help people quit tobacco. So far that have not been shown to help

[Making a Plan to Quit and Preparing for Your Quit Day](#)

There's no one right way to quit tobacco or nicotine products. But there are steps you can take to help make your decision to quit a success.

[Help for Cravings and Tough Situations While You're Quitting Tobacco](#)

You will likely have strong cravings. Sometimes it will be especially hard to stay away from tobacco. But there are things you can do to help yourself stay quit.

[Staying Tobacco-free After You Quit](#)

Deciding to quit tobacco is a major milestone. But staying quit is the final, longest, and most important part of the process. It's important to have strategies and support to help you get through it.

Hyperlinks

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Dealing with the Mental Part of Tobacco Addiction

The nicotine in tobacco is the main reason it's hard to quit. Nicotine causes pleasant feelings and distracts from unpleasant feelings. But it can also affect your brain, making you dependent on it over time.

Quitting tobacco causes withdrawal symptoms. These can be physical, but also mental and emotional. There are steps you can take to prepare yourself for this.

- [What you might feel when you quit tobacco](#)

- [What you can do](#)
- [Quit-tobacco programs](#)
- [What to look for in a quit-tobacco program](#)
- [Support from family and friends](#)
- [Learn more](#)

What you might feel when you quit tobacco

- Urges or cravings to use tobacco
- Anxious
- Sad or depressed
- Irritated or grouchy
- Trouble concentrating
- Restless or bored
- Hard time sleeping
- Hungrier than usual

What you can do

There are a lot of tools to help you quit tobacco for good.

Many people who use tobacco know about the physical symptoms of tobacco withdrawal. You may already be thinking about things like [nicotine replacement therapies](#) and [medicines](#) to help with these symptoms. But a lot of people are not prepared for the mental effects. These can be harder to overcome.

The emotional and mental dependence makes it hard to stay away from nicotine after you quit.

But there are counseling services, self-help materials, apps for your cell phone or tablet, and support services that can help you get through this time. And just like the physical symptoms, the emotional challenges get better over time.

You can prepare yourself for the mental effects of tobacco withdrawal.

Quit-tobacco programs

There are several types of quit-tobacco programs that can help you manage the mental

and emotional effects of withdrawal.

Telephone Quitlines

Each state and the District of Columbia offers a free, telephone-based program that links callers with trained coaches.

People who use telephone counseling along with quit-smoking medicines have twice the success rate as those who don't get this help. Research shows that telephone counseling also helps people who are trying to quit smokeless tobacco.

Connect with your state's tobacco quitline

Quitlines are available in every U.S. state, the District of Columbia, Puerto Rico, and Guam.

- 1-800-QUIT-NOW (1-800-784-8669)
- 1-855-DÉJELO-YA (1-855-335-3569) (Español, Spanish)

When you call the Quitline, you'll connect with a coach who can help plan a quit method that fits your pattern of tobacco use. Your coach might suggest a combination of methods including medicines, local classes, self-help brochures, mobile reminder apps, and a network of family and friends.

Help from a coach can keep you from making many common mistakes. Telephone coaching is also easier to use than some other support programs. It doesn't require driving, transportation, or childcare, and it's available nights and weekends.

Your Quitline might offer free vouchers or coupons for nicotine replacement therapy (NRT). Coaches might also be able to help you get other quit-smoking medicines through your health insurance or program in your community. This may vary by state and type of health insurance coverage.

Mobile apps, email, and text services

Some newer quit tobacco options include mobile apps, email, and text services.

These offer another easy-to-use support resource if you are trying to quit. This type of service can give encouragement, as well as helpful information and tips about quitting tobacco. A lot of mobile apps also give you the option of interacting with other people who are trying to quit.

These types of programs have been shown to increase a person's chance of quitting tobacco. Many of these services are from the US government and non-profits. Some examples include:

Try a mobile app, text, or email service

SmokefreeTXT¹: A text service from the National Cancer Institute (NCI). There is a general version, as well as separate apps for teens, Native Americans, veterans with VA healthcare benefits, pregnant women, and people who use smokeless tobacco. The general app and veterans' option are also available in Spanish.

Empowered to Quit²: An email service from the American Cancer Society (ACS). You'll get short, personalized emails spread over 2 months.

quitSTART app³: A smartphone app from SmokeFree.gov. The app helps you quit smoking with tailored tips, inspiration, and challenges.

There are other mobile apps and services available also. But before you use one, check to see if studies have been done to show that it is effective.

Most programs start sending emails or texts before your quit day and continue sending messages for a couple of months after your quit day. If you use a mobile app, you can go into the app any time you wish to set up a quit plan and continue getting support.

Support groups

Support groups can help you quit tobacco through structured quit programs and support from other people who have recently quit or who are trying to quit.

Nicotine Anonymous[®] (***NicA***)

Nicotine Anonymous[®] (NicA) has offered peer support for many years. This group hosts regular meetings that follow the same 12-step program developed by Alcoholics Anonymous (AA). NicA offers in-person meetings, video conference and telephone meetings, and group support through email and mail.

People new to NicA may choose a sponsor to help them through the steps and when they are tempted to use tobacco. NicA meetings are free, but donations are collected to help cover expenses. NicA also offers online support.

Find a NicA group or meeting near you

- Visit www.nicotine-anonymous.org/find-a-meeting⁴
- Or call 1-877-879-6422

Other quit-tobacco support groups

Some workplaces, hospitals, and wellness centers have quit-tobacco programs, groups, or classes. They may be led by professionals and focus on information and education, or they may be run by volunteers.

Some programs are set up like classes, while others focus on group members sharing how they are doing. Some groups run for a few weeks. Others continue on as needed. Some groups are in person, but many other options are now available, such as online or by telephone.

There are lots of options, and different types of groups work better for different people. Find one that works for you. Check with your employer, health insurance company, or local hospital to find a support group that fit your needs.

Get help finding a quit-tobacco program

Call the American Cancer Society at 1-800-227-2345 for help finding the support you need.

What to look for in a quit-tobacco program

Tobacco cessation or quit programs are designed to help people you cope with problems that come up when quitting. They should offer support to help you avoid many of the common pitfalls of quitting so you can stay tobacco free.

When you look for a quit program, try to find one that helps with:

- Withdrawal symptoms and how to manage them
- Common triggers and how to handle them
- Coping skills, stress management, and relaxation
- How to find support to help with quitting and staying quit

Quit programs that offer counseling

Studies show that the best programs include either one-on-one or group counseling.

There's a strong link between how often and how long counseling lasts (its intensity) and the success rate. Overall, the more intense the program, the greater the chance of success.

Make sure the leader of the group is trained in smoking cessation.

The intensity of counseling can be increased by having more sessions or longer sessions. The number of weeks over which the sessions are given can also be increased.

If you want a program with counseling, try to find one that has:

- Sessions that last at least 10 minutes
- At least 4 sessions in total
- Counseling that lasts at least 2 weeks (longer is usually better)
- Ongoing support after the sessions. (This can be helpful even after you've quit.)

What to watch out for

Not all quit programs include the steps and support described above. Be careful about quit programs or products that promise 100% success rates or easy success with no withdrawal symptoms.

Also be careful about taking herbal supplements or products with "secret" ingredients. Always talk to your health care team before taking any supplement or other products so you can find out if they are safe for you to take.

Support from family and friends

Many former tobacco users say a support network of family and friends was very important during their quit attempt. Other people, like your co-workers and your health care team, may offer support as well.

Tell your friends and family about your plans to quit.

Try to spend time with people who don't use tobacco and former tobacco users who support your efforts to quit. Talk with them about what you need. For example: patience as you go through cravings, taking your late-night or early-morning phone calls, and making plans to do things in places where it's harder to use tobacco.

Find out what you can count on each friend or family member to do. You can also suggest that they read [How To Help Someone Quit Smoking: Do's and Don'ts](#).

Learn more

[Making a Plan to Quit and Preparing for Your Quit Day](#)

There's no one right way to quit tobacco or nicotine products. But there are steps you can take to help make your decision to quit a success.

[Help for Cravings and Tough Situations While You're Quitting Tobacco](#)

You will likely have strong cravings. Sometimes it will be especially hard to stay away from tobacco. But there are things you can do to help yourself stay quit.

[Staying Tobacco-free After You Quit](#)

Deciding to quit tobacco is a major milestone. But staying quit is the final, longest, and most important part of the process. It's important to have strategies and support to help you get through it.

Hyperlinks

1. smokefree.gov/tools-tips/text-programs/quit-for-good/
2. www.cancer.org/cancer/risk-prevention/tobacco/empowered-to-quit.html
3. smokefree.gov/tools-tips/quitstart
4. www.nicotine-anonymous.org/find-a-meeting

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Are There Other Ways to Quit Tobacco?

You've probably heard about other ways to quit tobacco. Different methods work for different people. **There is no one right way to quit.**

But some tools and methods you read or hear about are unproven. Some might even cause health risks. It's important to understand which quit-tobacco methods have been proven safe and effective and which have not.

- [Does it work to quit cold turkey or with gradual withdrawal?](#)

- [What about smoking deterrents?](#)
- [Is it safe to use filters and other types of nicotine to stop smoking?](#)
- [Non-invasive brain stimulation](#)
- [Hypnosis](#)
- [Acupuncture and acupressure](#)
- [Herbs and supplements](#)
- [Mind-body practices](#)

Does it work to quit cold turkey or with gradual withdrawal?

Many people who smoke quit cold turkey – they stop completely, all at once, with no medicines or nicotine replacement. More people quit cold turkey than by using assistance. But the chances of a successful quit attempt are much higher if you use assistance.

Another way to quit is with gradual withdrawal – cutting down on the number of cigarettes you smoke a little bit each day. This way, you slowly reduce the amount of nicotine in your body. You might cut out cigarettes smoked with a cup of coffee, or you might decide to smoke only at certain times of the day.

It makes sense to cut down before your quit date in order to reduce withdrawal symptoms, but this can be hard to do. It's important to know that just cutting back and not quitting has minimal health benefits.

What about smoking deterrents?

Other methods have been used to help stop smoking, such as over-the-counter products that change the taste of tobacco, stop-smoking diets that curb nicotine cravings, and combinations of vitamins. At this time there's no research that any of these work.

Is it safe to use filters and other types of nicotine to stop smoking?

Some people try to quit smoking by switching to filters or other ways to get nicotine that have not been approved by the FDA. These products have not been proven safe and effective.

Filters

Filters that reduce tar and nicotine in cigarettes do not help people quit smoking. They also don't reduce the health risks from smoking.

Electronic cigarettes (e-cigarettes)

E-cigarettes (vape pens) and similar devices are not approved by the FDA for use as smoking cessation aids (aids to help people stop smoking). This is because there's just not enough research or evidence yet.

Still, some people who smoke choose to try e-cigarettes to help them stop smoking. But people who switch from smoking cigarettes to using e-cigarettes still expose themselves to potentially serious ongoing health risks. It's important to stop using all tobacco products, including e-cigarettes, as soon as possible both to reduce health risks and to avoid staying addicted to nicotine.

Some people use tobacco cigarettes and e-cigarettes at the same time on an ongoing basis, whether they are trying to quit or not. This is known as "dual use."

The dual use of e-cigarettes and tobacco cigarettes can lead to significant health risks because smoking any amount of regular cigarettes is very harmful. People should not use both products at the same time and are strongly encouraged to completely stop using all tobacco products.

Tobacco lozenges and pouches

The FDA has ruled that lozenges, pouches, strips, sticks that contain nicotine, and small pouches of tobacco that you hold in your mouth are all considered [smokeless tobacco products](#)¹ and are not smoking cessation aids. This includes products like Snus and Zyn pouches.

There's no evidence that these products can help a person quit smoking. Studies also show that these products can cause nicotine addiction and may contain chemicals that can increase the risk of cancer.

Nicotine lollipops, lip balms, drinks, and straws

Nicotine has been added to drinks, lollipops, straws, and lip balms which are marketed as quit tools. None of these are approved by the FDA. In fact, some of these products are illegal in the US. None have been shown to help people quit smoking.

They also pose a risk for children and pets if they are not well-labeled, carefully stored,

and disposed of safely.

Non-invasive brain stimulation

Studies looking at the use of non-invasive brain stimulation (NIBS) have shown some promise. The FDA cleared the use of one system for this purpose: deep repetitive transcranial magnetic stimulation (Deep TMS™). This is different than FDA approval. It only means the system was found safe to use in people.

Studies are still being done to find out who would most benefit from this approach and how long people stay quit after using it to stop smoking.

Hypnosis

Hypnosis methods vary a great deal. This makes it hard to study as a way to stop smoking. Most studies of hypnosis for quitting tobacco have not shown it to work better than other counseling methods.

Still, some people say it helps. If you'd like to try it, ask your health care provider to recommend a licensed therapist who does hypnotherapy.

Acupuncture and acupressure

[Acupuncture and acupressure²](#) have been studied separately and together. These methods have been used to quit smoking, but there's little evidence to show that they work.

Auricular acupressure (magnets and seeds)

One acupressure method involves placing seeds or magnets on specific parts of the ears. Studies to date have not shown that this type of acupressure helps people stop smoking, especially in the long term.

There are many on-line companies that sell these magnets, and they report various "success" rates. But there's no research data to back up these claims.

Cold laser therapy

Cold laser therapy (also called low level laser therapy) is related to acupuncture. In this method, cold lasers are used instead of needles for acupuncture. Despite claims of

success by some cold laser therapy providers, there is no scientific evidence that shows it helps people stop smoking.

Herbs and supplements

There is little scientific evidence to support the use of homeopathic aids and herbal supplements as stop-smoking aids. Because they are marketed as dietary supplements (not medicines), they don't need FDA approval to be sold. This means manufacturers don't have to prove they work, or even that they're safe.

Be sure to look closely at the label of any product that claims it can help you stop smoking. No dietary supplement has been proven to help people quit smoking. Most of these supplements include combinations of herbs, but not nicotine. They have no proven track record of helping people stop smoking.

Mind-body practices

Some studies have looked at smoking cessation programs that use yoga, mindfulness, and meditation. Results were not clearly in favor of these methods, but some did show lower cravings and less smoking.

More research is needed, and studies of these practices are still going on. Cognitive processing methods (cognitive-behavioral approaches) are also being studied.

[Making a Plan to Quit and Preparing for Your Quit Day](#)

There's no one right way to quit tobacco or nicotine products. But there are steps you can take to help make your decision to quit a success.

[Nicotine Replacement Therapy](#)

Nicotine replacement therapy (NRT) can help with the cravings and physical withdrawal symptoms from quitting tobacco. Studies show NRT can almost double the chances of quitting smoking.

[Prescription Medicines to Help You Quit Tobacco](#)

There are prescription medicines that have been shown to help people quit tobacco. These medicines are often started in the weeks before your Quit Day.

Hyperlinks

1. www.cancer.org/cancer/risk-prevention/tobacco/smokeless-tobacco.html
2. www.cancer.org/cancer/managing-cancer/treatment-types/complementary-and-integrative-medicine/complementary-and-alternative-methods-and-cancer/which-methods-are-likely-safe.html

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Staying Tobacco-free After You Quit

Deciding to quit tobacco is a major milestone. But *staying* quit is the longest and most important part of the process. It's important to have strategies and support to help you get through it.

- [Dealing with nicotine withdrawal](#)
- [Noticing excuses](#)
- [Ideas to help you stay committed to quitting](#)
- [Staying tobacco-free](#)
- [Recovering from slips](#)
- [Weight gain after quitting smoking](#)
- [Managing stress after quitting tobacco](#)
- [Taking care of yourself](#)
- [Learn more](#)

Dealing with nicotine withdrawal

Nicotine is the addictive substance in tobacco. When you use tobacco, many parts of your body get used to the nicotine. When you quit tobacco, you also quit nicotine. You will likely have withdrawal symptoms, because now your body has to get used to *not* having nicotine.

Withdrawal from nicotine can be uncomfortable. It has 2 parts: the physical and the

mental.

The physical symptoms are annoying, but not life-threatening. Still, if you're not ready to resist them, they can tempt you to go back to smoking or chewing. Nicotine replacement and other medicines can help reduce a lot of these symptoms.

Many people who use tobacco find that the mental part of quitting is harder than the physical part. When you use tobacco, it often becomes linked with a lot of the things you do – waking up in the morning, eating, reading, watching TV, drinking coffee. It will take time to “un-link” tobacco from these activities.

This is why, even if you use [nicotine replacement therapy](#), you may still have strong urges to smoke or chew. There are strategies that can help you with this.

Noticing excuses

One way to overcome urges or cravings is to notice excuses for smoking as they come up. An excuse is a false thought that seems to make sense at the time but isn't true. If you choose to believe in such a thought, even for a short time, it can serve as an excuse to use tobacco.

If you've tried to quit before, you might recognize many of these common excuses:

- “I can have just one and it won't hurt.”
- “I'll just do it once to get through this rough spot.”
- “Today isn't a good day. I'll quit tomorrow.”
- “If I don't have a cigarette, I'm going to go crazy!”
- “How bad is smoking/chewing, really? Uncle Harry smoked/chewed all his life, and he lived to be over 90.”
- “You've got to die of something.”
- “Life is no fun without tobacco.”

You can probably add more to the list. As you go through the first few days without tobacco, write down excuses as they come up and see them for what they are – messages that can trick you into going back to smoking/chewing.

Look out for them, because they always show up when you're trying to quit. After you write down the excuse, let it go and move on. Be ready with a distraction, a plan of action, and other ways to re-direct your thoughts.

Ideas to help you stay committed to quitting

Avoid temptation. Stay away from people and places that tempt you to smoke or chew. Later on, you'll be able to handle these more easily.

Change your habits. Switch to juice or water instead of alcohol or coffee. Choose foods that don't make you want to smoke or chew. Take a different route to work. Take a brisk walk instead of a tobacco break.

Choose other things for your mouth. Use substitutes you can put in your mouth like sugarless gum or hard candy, raw vegetables such as carrot sticks, or sunflower seeds. Some people chew on a coffee stirrer or a straw.

Get active. Do something to reduce your stress. Exercise or find an activity that keeps your hands busy, like needlepoint or woodworking, to help distract you from the urge to use tobacco. Clean out a closet, vacuum the floors, go for a walk, or work in the yard.

Breathe deeply. When you smoked, you breathed deeply as you inhaled. When the urge strikes now, breathe deeply and picture your lungs filling with fresh, clean air. Remember your reasons for quitting and the benefits you'll gain when you do. Deep breathing can also help you remember that you're cleaning the toxins from tobacco out of your body.

Delay. If you feel that you're about to light a cigarette, hold off. Tell yourself you must wait at least 10 minutes. Often this simple trick will allow you to move beyond the strong urge to smoke. This works for smokeless tobacco too: wait 10 minutes until the urge lessens.

Reward yourself. What you're doing isn't easy, and you deserve a reward. Put the money you would have spent on cigarettes or tobacco in a jar every day and then buy yourself a weekly treat. Buy a book or some new music, go out to eat, start a new hobby, or join a gym. Or save the money for a major purchase.

You can also reward yourself in ways that don't cost money. Visit a park or go to the library. Check local news listings for museums, community centers, and colleges that have free classes, exhibits, films, and other things to do.

Staying tobacco-free

Staying quit is the final, longest, and most important part of the process. If you've quit before, you can use the same methods to help you through withdrawal, or you can try

something new. Try to anticipate times when you may be tempted to smoke or chew. Plan on how you'll use other ways to cope with those situations.

Unexpected strong desires to smoke or chew can sometimes happen months or even years after you've quit. Excuses can show up then, too. To get through these without relapse, try to:

- Remember your reasons for quitting. Think of all the benefits to your health, your finances, and your family.
- Ask your tobacco-using friends for support. Tell them to **not** share their cigarettes or tobacco with you, no matter what!
- Remind yourself that there is no such thing as just one dip or one cigarette, or even just one puff.
- Ride out the desire to smoke or chew. It will go away, but don't fool yourself into thinking you can have just one.
- Avoid alcohol. Drinking lowers your chance of success.
- If you're worried about weight gain, put some energy into planning a healthy diet and finding ways to exercise and stay active.
- Keep getting the counseling and support that has helped you so far.

Recovering from slips

What if you *do* smoke or chew? Here's the difference between a slip and a relapse: A slip is a one-time mistake that's quickly corrected. A relapse is going back to using tobacco.

You can use the slip as an excuse to go back to using tobacco, or you can look at what went wrong and renew your commitment to staying away from tobacco for good.

Even if you do relapse, try not to get too discouraged. Very few people are able to quit for good on the first try. In fact, it takes most people several tries. The important thing is to figure out what helped you when you tried to quit and what worked against you. Use this information to make a stronger attempt at quitting the next time.

Weight gain after quitting smoking

Some people who quit tobacco gain weight, but the weight gain that follows quitting is usually small. The average gain is less than 10 pounds in most studies. Remember that

it's much worse for your health to keep smoking than it is to gain a small amount of weight.

You're more likely to quit tobacco for good if you deal with quitting first, and then take steps to lose weight. While you're quitting, try to focus on ways to stay healthy, rather than on your weight.

Stressing about your weight could make it harder to quit. Healthy living through a healthy diet and exercise can limit your weight gain and help you lose any weight you do put on.

Follow a healthy eating pattern. Try to eat a variety of colorful fruits and vegetables, whole grains, lean meats, and low-fat dairy products. Also try to avoid or limit red and processed meats, sugar-sweetened beverages, and highly processed foods. Be sure to drink plenty of water.

Get regular physical activity. Walking is a great way to be physically active and increase your chances of not smoking. Walking can help you by: reducing stress, burning calories and toning muscles, and giving you something to do instead of thinking about smoking.

All most people need for walking is a pair of comfortable shoes, and most people can walk pretty much anytime. You can use these ideas as starting points and come up with more of your own:

- Walk around a shopping mall
- Get off the bus one stop before you usually do
- Find a buddy to walk with during lunch time at work
- Take the stairs instead of the elevator
- Walk with a friend, family member, or neighbor after dinner
- Push your baby in a stroller
- Take your dog (or maybe a neighbor's) out for a walk

The [American Cancer Society recommends](#)¹ getting 150-300 minutes of moderate intensity or 75-150 minutes of vigorous physical activity each week. Getting more is even better. But if you don't already exercise regularly, check with your health care provider before you start.

Also try to get enough sleep. This can help reduce your stress, which can support your quit and healthy living efforts.

Managing stress after quitting tobacco

People who use tobacco often mention stress as one of the reasons for going back to using.

Stress is part of life for everyone. The difference is that people use nicotine (the addictive substance in tobacco) to help cope with stress and unpleasant emotions. When you quit, you have to learn new ways of handling stress that don't involve nicotine.

Nicotine replacement can help for a while, but over the long term you'll need other methods.

Physical activity and other stress-management techniques

Physical activity is a good stress-reducer. It can also help with the feelings of depression or loss that some people have for a while after they quit. There are also stress-management classes and self-help books. Check your community newspaper, library, or bookstore.

Spirituality

Spirituality can give you a sense of purpose and help you remember why you want to stay tobacco-free. Spiritual practices involve being part of something greater than yourself. These types of practices might include:

- Prayer
- Meditation
- Religious practices or church work
- Music
- Being outside in nature
- Creative or artistic activities
- Volunteering to help others

Think about how you can deal with stress and not use tobacco. Look at the resources around you and plan on how you'll handle the stressors that come your way.

Taking care of yourself

Tell your health care team if you currently use any type of tobacco, or if you've used in the past. This will help you get the preventive health care you need. Using tobacco puts you at risk for many health issues. Part of your health care should focus on screening for these issues and taking steps to stay as healthy as possible.

Check the inside of your mouth

Regularly check the inside of your mouth for any changes.

If you notice any changes or problems, have your doctor or dentist look at your mouth, tongue, gums, and throat. You might be able to find some changes early (such as leukoplakia, white patches on the mouth tissues). Early detection might prevent oral cancer or help your health care team find it at a stage that's easier to treat.

Watch for other symptoms

Smokers should also be aware of any of these changes:

- Change in cough
- A new cough
- Coughing up blood
- Hoarseness
- Trouble breathing
- Wheezing
- Headaches
- Chest pain
- Loss of appetite
- Weight loss
- General tiredness
- Frequent lung infections

Any of these could be signs of lung cancer or other lung problems. Tell your health care team right away if you notice any of these changes.

Stay up to date on cancer screenings

[Lung cancer screening](#)² is recommended for people at high risk due to smoking history. American Cancer Society recommends annual screening with a low dose computed tomography (LDCT) scan for people who:

- Are 50-80 years of age
- Currently smoke or smoked in the past **AND**
- Have a smoking history of 20 or more pack years*

*A **pack-year** is equal to smoking 1 pack (or about 20 cigarettes) per day for a year. For example, a person could have a 20 pack-year history by smoking 1 pack a day for 20 years, or by smoking 2 packs a day for 10 years.

If this describes you, talk with your health care team about your lung cancer risk and the potential benefits and risks of lung cancer screening. To prepare you for a discussion with your health care provider, you can read more about the current screening guidelines.

Learn more: [American Cancer Society guidelines for early detection of lung cancer](#)³

Remember that tobacco users have a higher risk for many cancers, not only lung cancer. If you have any health concerns that may be related to your tobacco use, see a health care provider as soon as possible.

Taking care of yourself and getting treatment for problems early on will give you the best chance for successful treatment. But the best way to take care of yourself and decrease your risk for life-threatening health problems is to quit using tobacco.

Learn more

[Help for Cravings and Tough Situations While You're Quitting Tobacco](#)

You will likely have strong cravings. Sometimes it will be especially hard to stay away from tobacco. But there are things you can do to help yourself stay quit.

Hyperlinks

1. www.cancer.org/cancer/risk-prevention/diet-physical-activity/acs-guidelines-nutrition-physical-activity-cancer-prevention/guidelines.html
2. www.cancer.org/cancer/types/lung-cancer/detection-diagnosis-staging/detection.html
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Help for Cravings and Tough Situations While You're Quitting Tobacco

Quitting tobacco can be a long, hard process. You will likely have strong cravings. You will probably go through times when it's especially hard to stay away from tobacco. But there are things you can do to help yourself stay quit.

- [How do I get through the rough spots after I quit?](#)
- [When you get cravings](#)
- [Other ways to stay active](#)
- [Staying tobacco-free over holidays](#)
- [More suggestions](#)
- [Get support you can count on](#)

How do I get through the rough spots after I quit?

When you quit, and whenever you're having a rough time, try to avoid things that may trigger your cravings.

Create new habits and a tobacco-free environment around you.

- Spend as much free time as you can in public places where tobacco products aren't allowed. Libraries, stores, museums, theaters, restaurants without bars or patios, and churches are most often smoke-free.
- Stay away from activities, people, and places you link with using tobacco.
- Don't drink alcohol, coffee, or any other drinks you link with using tobacco. Instead, try different types of water, sports drinks, or 100% fruit juices. Choose drinks that are low- or no-calorie.
- Stay away from foods that trigger cravings to use tobacco. Sugary or spicy foods can be triggers.

Practice self-care to ease your stress and cravings.

- Eat 4 to 6 small meals during the day. This keeps your blood sugar levels steady, your energy balanced, and helps prevent urges to smoke or chew.
- Take extra care of yourself. Drink water, eat well, and get enough sleep. This might help you have the energy you need to handle extra stress.
- Take deep breaths to relax. Picture your lungs filling with fresh, clean air.
- Exercise in short bursts (try alternately tensing and relaxing your muscles, doing push-ups or lunges, walking up the stairs, or touching your toes).

- Brush your teeth and enjoy that fresh taste.
- Call a friend or family member, use a mobile app that connects you with others, or a telephone Quitline when you need extra help or support.

Replace habits from before you quit.

- If you miss the feeling of having a cigarette in your hand, hold something else like a pencil, paper clip, coin, or marble.
- If you miss the feeling of having something in your mouth, try toothpicks, cinnamon sticks, sugarless gum, sugar-free lollipops, or celery. Some people chew on a straw or stir stick.
- Take deep breaths to relax. Picture your lungs filling with fresh, clean air.

Remember why you quit tobacco.

- Remember your goal and the fact that the urge will lessen over time.
- Think about how great it is that you're getting healthier.
- Remember that quitting is a learning process. Be patient with yourself.
- Think of all the important reasons you decided to quit.
- As a reminder, put a picture of the people who are most important to you somewhere you see it every day, or keep one handy on your phone.

Above all, reward yourself for doing your best. Give yourself rewards often if that's what it takes to keep going. Plan to do something fun.

When you get cravings

Cravings are real. It's not just your imagination. When you feel a strong urge to use tobacco, you may also notice that your mood changes. Your heart rate and blood pressure might go up, too.

Try these tips to get through it. Hang in there – the cravings will get better.

Keep distractions on hand.

- Keep substitutes handy that you can suck or chew on, such as carrots, pickles,

- apples, celery, raisins, or sugar-free gum or hard candy.
- Light incense or a candle instead of a cigarette.
- Wear a rubber band around your wrist. When you think about smoking or chewing, snap it against your wrist to remind yourself of all the reasons you quit. Then remember that you won't always need a rubber band to help you stay with your plans to quit.

Remind yourself it will get easier.

- Emotions like anger, frustration, anxiety, irritability, and even depression are normal after quitting. They will get better as you learn ways to cope that don't involve tobacco. See your doctor if these feelings last for more than a month.
- Tell yourself, "No." Say it out loud. Practice doing this a few times and listen to yourself.

Practice positive self talk.

- "I'm too strong to give in to cravings."
- "I don't use tobacco anymore."
- "I will not let my friends and family down."
- And most important, "I will not let myself down."

Learn to relax quickly and deeply.

- Go for a walk. Exercise can improve your mood and relieve stress.
- Take a shower or bath.
- Think about a calming, peaceful place, and imagine you are there. Get away from it all for a moment. Focus on that peaceful place and nothing else.

Other ways to stay active

You might have a lot of pent-up energy while trying to quit and stay tobacco-free. When you're looking for something to do, think about ways you can be active and productive.

- Do yardwork or housework.
- Organize or clean out a closet, a room, or even the entire basement.
- Get involved in a new sport or hobby.

Some of these distractions can help keep you from gaining weight after quitting, too.

Find activities that are cheap or free. You can find programs online or streaming through a TV or mobile app for beginner's yoga, tai chi, or aerobics. You could also borrow a video or book about them from the library.

A walk in a park, on a trail, a local mall, or around your neighborhood are all good ways to get moving, too. You'll notice over time that it gets easier to do these things. And watch how much better you can breathe as each day passes.

Staying tobacco-free over holidays

The first few weeks after quitting can be hard for anyone. And staying away from tobacco may be extra tough during a holiday season, when stress and the temptation to overindulge are often worse.

Some special efforts can help you celebrate the holidays without giving into the urge. Many of these ideas can also help throughout the year.

Celebrate being tobacco-free and try these tips to keep your mind off smoking:

- **Think about hosting holiday dinner.** This will keep you busy. Shopping and cooking will take up a lot of your time. If you prefer being a guest, consider making a special dish to share.
- **Don't overdo it.** You might be inclined to go overboard with the holiday feasting. Be aware of how much you eat and drink; it may be easy to give into these other temptations. If you do overdo it, forgive yourself. Remember, next year it won't be as hard.
- **Try to stay away from alcohol.** Stick to sugar-free seltzer, punch without alcohol, club soda, or apple cider. This will curb the urge to light up when drinking and can also help keep off extra pounds.
- **Avoid spicy and sugary foods.** Spicy and sugary foods tend to make people crave cigarettes more.
- **Nibble on low-calorie foods.** Low-calorie foods like carrot sticks, apples, and other healthy snacks can satisfy your need for crunch without adding extra pounds.

- **Stretch out meals.** Eat slowly and pause between bites to make a meal more satisfying. For dessert, grab a piece of fruit, or crack some nuts – something that will keep your hands busy, too.
- **Keep busy at parties.** Serving snacks and meeting guests will help keep your mind off smoking. If the urge to smoke or chew presents itself, put something else in your hand.
- **Treat yourself to something special.** Celebrate staying quit. Think about buying yourself something special you've been wanting.
- **Learn to cope with frustration.** Any added frustration can leave you wanting a cigarette or a dip. Take along your favorite magazine or book, check your email, or text a friend while waiting in lines. When you feel you're about to lose control, stop and think. Take hold of yourself and start talking with someone in line next to you, or start looking at what you brought with you.

If you have a weak moment and slip during the holidays, don't panic.

Take a deep breath. Remind yourself of your commitment to quit and all the reasons you quit in the first place. Commit to going back to your quit program right away. Destroy any tobacco products you have before you're tempted again. Try to figure out why you had a setback and learn from it.

More suggestions

Here are more ideas that have helped others kick their tobacco habit for good:

- **Take one day at a time.** When you wake up each morning, make the promise you won't smoke or chew that day. A day at a time keeps the whole thing more manageable.
- **Picture and plan for your success.** Plan ahead and think of how you'll deal with stressful situations with other alternatives.
- **Take a breather.** Relaxation exercises can help relieve your urge to smoke or chew. Take a deep breath, hold it for a second, then release it very slowly. Or stand up and stretch while you take a few deep breaths. Remember, the urge is only temporary. It will pass.
- **Work out.** Physical activity helps relieve tension and the urge to smoke or chew. Exercise will also help burn off any extra weight.
- **Make friends with people who don't smoke, chew or use tobacco products.** They can be your partners to help keep you busy. Plan time together and explore

new activities you might enjoy. Remember, you're learning to be tobacco-free, and you need to find new places and activities to replace your old ones.

Get support you can count on

If you're thinking about reaching for a cigarette or other tobacco product, reach for help instead. Ask your friends and family to encourage the new healthier you, reach out to a support group, visit Nicotine Anonymous, or call 1-800-QUIT NOW.

You can always call American Cancer Society at 1-800-227-2345. We want you to quit tobacco and we're here to help you do it.

Dealing with the Mental Part of Tobacco Addiction

Quitting tobacco causes withdrawal symptoms. These can be physical, but also mental and emotional. There are steps you can take to prepare yourself for this.

Staying Tobacco-free After You Quit

Deciding to quit tobacco is a major milestone. But staying quit is the final, longest, and most important part of the process. It's important to have strategies and support to help you get through it.

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Talking With Your Cancer Care Team About Tobacco Use

It can be hard to talk to your cancer care team about your tobacco use. But it's an important conversation to have, and it will help them support you better.

- [Why it's important to talk about your tobacco use](#)
- [Facts to share with your cancer care team](#)
- [Questions to ask](#)
- [Learn more](#)

Why it's important to talk about your tobacco use

There are several reasons people sometimes hold back from telling their cancer care team about their tobacco use, including:

- Concern that the care team might judge them
- Concern that they might receive less support for their cancer
- Belief that quitting tobacco after a cancer diagnosis is pointless
- Belief that using tobacco can help relieve the stress of a cancer diagnosis

Tobacco products contain nicotine, which is addictive. This makes it hard to stop smoking, even if you are motivated to quit. Your cancer care team understands this. They won't judge you or provide less cancer care because you use tobacco.

Instead, if they know you use tobacco, they can help you get the support you need to quit. They can also help you understand how your tobacco use might affect your cancer treatment.

It is never too late to stop using tobacco. Quitting has many health benefits, even after a cancer diagnosis. Your cancer care team wants to help you reach this goal.

Facts to share with your cancer care team

Share information about your tobacco history and current use. This will help your cancer care team make your treatment plan.

Let them know if:

- You currently smoke cigarettes or use other tobacco products
- People in your household smoke or use other forms of tobacco
- Smoking is allowed in your workplace

Tell them about your current or former use:

- Do you use tobacco within the first 30 minutes after waking up?
- On most days, how many cigarettes do you smoke?
- Or how many pouches/cans of smokeless tobacco do you use?
- How many years have you used (or did you previously use) tobacco?
- At what age did you begin using tobacco?

Also give them information about:

- How long it's been since you last used tobacco regularly, if you've stopped
- How many times you've tried to quit
- How long you were successful with each attempt to quit
- What methods you've used (or are using now) to try to quit
- Whether your tobacco use has changed after being told you have cancer

Questions to ask

Consider asking your cancer care team these questions:

- How will continuing to use tobacco affect my cancer treatment?
- How is using tobacco hurting my general health?
- What are the health benefits of quitting tobacco?
- If I continue using tobacco during cancer treatment, will I have more (or different) treatment side effects?
- How can I make a plan to stop using tobacco?
- What medicines are there to help me quit?
- Where can I find resources, like counseling and support groups?

- How can I manage or avoid situations that make me want to smoke or use tobacco?
- How can my health care team help me with this?
- How can my family and friends help me?
- Who can help me understand the costs of programs to help me quit using tobacco?
- How often should you and I discuss my progress?

Also consider telling your health care team about your fears or other barriers to quitting. Together, you can find ways to deal with your concerns.

Learn more

[Quitting Smoking or Smokeless Tobacco](#)

Quitting tobacco (tobacco cessation) is a lot like losing weight. It takes a strong commitment over a long time.

[Health Benefits of Quitting Smoking Over Time](#)

It's never too late to quit using tobacco. Within minutes of smoking your last cigarette, your body begins to recover.

[Benefits of Quitting Tobacco If You Have Cancer](#)

Quitting tobacco can lead to longer survival and a better quality of life. Tobacco use can also worsen the side effects of some cancer treatments.

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How to Help Someone Quit Smoking

Quitting tobacco is hard. But having support from partners, friends, and family members can really help a person trying to quit. Studies show that people with strong social support are more likely to quit and stay quit.

If someone you know is trying to quit smoking or other tobacco products, there are many things you can do to help.

- [What friends and family can do](#)
- [What to avoid](#)
- [If the person who's quitting "slips"](#)
- [If the person who's quitting relapses](#)
- [If you use tobacco and are in contact with someone trying to quit](#)

What friends and family can do

Respect that the person trying to quit is in charge. This is their lifestyle change and their challenge, not yours.

Ask whether they want you to check in regularly to see how they're doing. When you check in, ask how they're feeling, not just whether they've stayed quit.

Let them know that it's OK to talk to you whenever they need to hear encouraging words.

Help them get what they need, such as hard candy to suck on, straws to chew on, and fresh veggies cut up and kept in the refrigerator.

Spend time doing things with the person who's quitting to keep their mind off smoking. Go to the movies, take a walk to get past a craving, or take a bike ride together.

Try to see it from their point of view. Their habit may feel like an old friend who's always been there when times were tough. It's hard to give that up.

Make your home smoke free, meaning that no one can smoke in any part of the house.

Remove all lighters and ash trays from your home. Remove anything that reminds them of smoking.

Wash clothes that smell like smoke. Clean carpets and drapes. Use air fresheners to help get rid of the tobacco smells. Don't forget the car, too.

Offer to help with a few chores, childcare, cooking, running errands – whatever will help lighten the stress of quitting.

Celebrate progress along the way. Quitting smoking is a BIG DEAL!

Thank the person who's quitting for not exposing others to harmful secondhand smoke.

What to avoid

Don't doubt their ability to quit. Your faith in the person who's quitting helps remind them they can do it.

Don't judge, nag, preach, tease, or scold. This may make the person who's quitting feel worse. You don't want your loved one to turn to a cigarette to soothe hurt feelings.

Don't take grumpiness personally when the person who's quitting is having nicotine withdrawal. Be patient and positive. Remind them withdrawal symptoms won't last forever. The symptoms usually get better in a few weeks.

Don't offer advice. Just ask how you can help with the plan or program they are using.

If the person who's quitting “slips”

Don't:

- Assume they will start back smoking like before. A “slip” (taking a puff or smoking a cigarette or two) is pretty common when a person is quitting.
- Scold, tease, nag, blame, or make them feel guilty. Be sure they know that you care about them, whether or not they smoke.

Do:

- Remind them how long they went without a cigarette before the slip.
- Help them remember all the reasons they wanted to quit.
- Help them figure out the reason they slipped and help them create a plan in case it

happens again.

- Help them keep track of situations and places that make quitting harder.
- Continue offering support and encouragement.
- Congratulate them for making a quit attempt and remind them that it can take many attempts before quitting for good.

If the person who's quitting relapses

Most people try to quit tobacco several times before they succeed. This is called a relapse. If a relapse happens, think of it as practice for the next time. Don't give up your efforts to encourage and support your loved one.

If the person you care about fails to quit or starts smoking again:

Praise them for trying to quit, and for whatever length of time (days, weeks, or months) they didn't use tobacco.

Remind them that they didn't fail, they are just learning how to quit. Let them know you're going to be there for them the next time and as many times as it takes.

Encourage them to try again.

Don't say, "If you try again..." **Instead say**, "When you try again..." Studies show most people who don't succeed in quitting are ready to try again in the near future.

Encourage them to learn from the attempt. Things a person learns from a failed attempt to quit may help them quit for good next time. It takes time and skills to learn to how to be a person who doesn't use tobacco.

Tell them, "It's normal to not succeed the first few times you try to quit. You didn't smoke for (length of time) this time. Now you know you can do that much. You can get even further next time." Most people understand this and know that they have to try to quit again.

If you use tobacco and are in contact with someone trying to quit

Do smoke outside and always away from the person trying to quit.

Do keep your tobacco products and things like lighters, matches, and ash trays out of

sight. They might be triggers.

Don't ever offer the person trying to quit a smoke or any other form of tobacco, even as a joke! It's not funny and could make it harder for them to stay quit.

Do join the person in their effort to quit. It's better for your health and might be easier to do with someone else who is trying to quit, too.

Call the American Cancer Society at 1-800-227-2345 to find out what resources might be available to help someone quit and stay quit.

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