December 2012

THE EMPIRE PLAN

REPORTING ON

Smoking Cessation

NEW YORK STATE HEALTH INSURANCE PROGRAM (NYSHIP) for Empire Plan enrollees and for their enrolled dependents, COBRA enrollees with their Empire Plan benefits and Young Adult Option enrollees

Health Risks of Smoking

Smoking kills more Americans than alcohol, car accidents, suicide, HIV (Human Immunodeficiency Virus), homicide and illegal drugs combined. According to the American Cancer Society, smoking causes nearly one in five deaths in the United States alone and is also the leading cause of many chronic diseases and other illnesses (e.g., emphysema, bronchitis, asthma, chronic airway obstruction) by damaging the airways and alveoli (small air sacs) of the lungs.

Cancer

Smoking accounts for at least 30 percent of all cancer deaths and is linked to nearly 90 percent of lung cancer deaths. Lung cancer is the leading cause of cancer death in both men and women and remains one of the hardest cancers to treat. Smoking is also linked to an increased risk of the following cancers:

- Larynx (voice box)
- Oral cavity (mouth, tongue and lips)
- Pharynx (throat)
- Esophagus (tube that connects the throat to the stomach)
- Acute Myeloid Leukemia
- Lung
- Stomach
- Pancreas
- Cervix
- Kidney
- Bladder

Based on information from the American Cancer Society

Smoking is the most preventable cause of disease and death in the United States. Each year, approximately 443,000 people die prematurely from a smoking-related illness and another 8 million people suffer from at least one chronic disease caused by smoking.

Despite these risks, over 46 million adults in the United States smoke cigarettes. Although surveys show that 70 percent of smokers want to quit and 35 percent attempt to quit each year, fewer than 5 percent succeed.

Based on information from the Centers for Disease Control and Prevention and the American Lung Association

What's Inside

2 Nicotine: A Physical and Psychological Addiction
3 Help is Available
4 Empire Plan Coverage and Smoking Cessation Treatments
5 Quit Tips
6 Resources

NYSHIP
New York State Health Insurance Program

This issue of *Reporting On* is for information purposes only. Please see your doctor for diagnosis and treatment. Read your plan materials for complete information about coverage.

Cardiovascular Disease

People who smoke are more likely to have heart attacks, high blood pressure, blood clots, strokes, hemorrhages, aneurysms and other disorders of the cardiovascular system. In fact, one out of every five smoking-related deaths is caused by cardiovascular disease. Smokers are two to four times more likely to develop coronary heart disease (CHD), twice as likely to have a stroke and ten times more likely to develop peripheral vascular disease (PVD) than nonsmokers.

Based on information from the University of Virginia Health System

Chronic Obstructive Pulmonary Disease (COPD)

Smoking also increases a person's risk of developing chronic obstructive pulmonary disease (COPD), a term used to describe a group of lung diseases that blocks airflow and makes it increasingly difficult for those suffering from it to breathe. COPD is most commonly associated with emphysema and chronic bronchitis. It affects an estimated 32 million people and is the fourth leading cause of death in the United States.

Based on information from Womack Army Medical Center

Nicotine: A Physical and Psychological Addiction

It's difficult for many smokers to quit smoking because they have become addicted to nicotine, a drug found naturally in tobacco. Nicotine is as addictive as heroin and cocaine and affects many systems and parts of the body, including the heart and blood vessels, hormones, metabolism and brain. Over time, a smoker becomes both physically and psychologically addicted to nicotine.

When smokers stop smoking, it takes time for their bodies to readjust and function normally without nicotine. This can lead to physical withdrawal symptoms such as dizziness, anxiety, headaches and weight gain. Symptoms can last for a few days or up to several weeks. Many people resume smoking to boost the levels of nicotine in their blood, so they no longer experience the withdrawal symptoms.

Overcoming the psychological addiction to smoking can be just as difficult as beating the physical addiction. Smokers develop such a strong association between smoking and everyday activities, that even things as simple as eating, driving and taking coffee breaks at work can trigger the desire or need to smoke.

Smokers must remember that nicotine withdrawal symptoms can be severe, but they are only temporary. Even if their desire to stop smoking is strong, many smokers are unable to quit without help, and often it takes multiple attempts before they succeed.

Smoking Affects the Health of Others

Smoking not only has a negative impact on the health of smokers, but it can also harm those around them. Secondhand smoke, the smoke exhaled by a smoker or emitted from the burning end of a lit cigarette, contains toxins that contribute to various health problems, from cardiovascular disease to cancer.

Dangers of Secondhand Smoke

The dangerous particles in secondhand smoke can linger in the air for hours. Breathing it for a short time can irritate your lungs and reduce the amount of oxygen in your blood.

Prolonged or repeated exposure to secondhand smoke poses more significant health risks. The American Heart Association estimates that approximately 38,000 people die each year from heart and blood vessel disease caused by secondhand smoke.

It's especially dangerous for children to be exposed to secondhand smoke because their lungs are smaller and not fully developed, which makes them more vulnerable to the negative effects. For example, children who live with smokers are more likely to develop middle ear and lower respiratory tract infections, as well as suffer from chronic eye and nose irritation.

Exposure to secondhand smoke during pregnancy can be harmful as well. According to the Mayo Clinic, secondhand smoke increases the risk of having a baby who is stillborn or has low birth weight and is linked to a higher risk of sudden infant death syndrome (SIDS).

Smoking during Pregnancy

When you smoke, you inhale poisons such as nicotine and carbon monoxide. When a pregnant woman smokes, these poisons get into the placenta, the tissue that connects the mother to her baby. These poisons keep the baby from getting the proper supply of nutrients and oxygen that it needs to grow.

Babies born to mothers who smoke are more likely to be premature and have low birth weights, learning disabilities and physical growth problems, as well as chronic colds and lung conditions.

Help is Available

Since nicotine causes both psychological and physical addiction, most people find the best way to quit smoking is a combination of behavioral management techniques and medication. There are a wide range of counseling services, self-help materials and medications available today, so smokers have more tools than ever before to help them quit smoking.

New York State Quitline 1-866-NY-QUITS (1-866-697-8487)

Telephone counseling is one of the most convenient support programs available. It doesn't require driving, transportation or child care, and it's accessible 24 hours a day, seven days a week. According to the American Cancer Society, people who use telephone counseling are twice as likely to stop smoking as those who don't get this type of help.

The New York State Quitline is a free service offered by the New York State Department of Health. Trained quit coaches provide support, help callers design personalized quit plans and share information about local smoking cessation programs. Taped support messages are also available 24 hours a day, seven days a week.

Quit Programs, Counseling and Support Groups

Smoking cessation programs are designed to help smokers recognize and cope with problems they face when they are trying to quit. They also offer emotional support and encouragement. Studies have shown that the best programs include either one-on-one or group counseling.

Support groups for quitters can also be helpful. For instance, Nicotine Anonymous is an open support group that offers a way to find others who want to stop smoking. Local branches of the American Cancer Society, American Lung Association, Centers for Disease Control and Prevention and the local health department often sponsor smoking cessation classes, as well.

Nicotine Replacement Therapy (NRT)

Nicotine replacement therapy (NRT) helps relieve some of the physical withdrawal symptoms, so smokers can focus on the psychological aspects of quitting. NRT provides nicotine in the form of gums, patches, sprays, inhalers or lozenges without the other harmful chemicals found in tobacco.

For more information about smoking cessation programs, counseling, support groups and NRT, please contact your health care provider.

Empire Plan Coverage and Smoking Cessation Treatments

To help enrollees with the physical addiction to nicotine, below is information regarding nicotine replacement therapies (NRT) and medications used as an aid in smoking cessation. The Empire Plan Prescription Drug Program covers smoking cessation treatments that require a prescription, subject to applicable copayments. Studies have shown that pairing NRT and/or prescription medication with counseling or help from a support group can more than double one's chance of quitting permanently.

Nasal Sprays

Nicotine nasal sprays deliver nicotine into the nose where it is absorbed into the bloodstream. It relieves withdrawal symptoms very quickly and lets the users control their nicotine cravings. Smokers usually like the nasal spray because it is easy to use.

Inhalers

The nicotine inhaler is a thin plastic tube with a nicotine cartridge inside. When the user takes a puff from the inhaler, the cartridge puts out a nicotine vapor. Unlike other inhalers that deliver most of the medicine to the lungs, the nicotine inhaler delivers most of the nicotine vapor to the mouth. This treatment is a lot like smoking a cigarette, which some smokers find helpful.

Patches

The nicotine patch provides a steady, controlled dose of nicotine throughout the day, which helps reduce the effects of nicotine withdrawal. The strength of the patch is reduced over time, allowing users to wean themselves off nicotine gradually. The patch should be applied in the morning on a clean, dry area of the skin without much hair. It should be placed below the neck and above the waist, for example, on the upper arm or chest. Most patches are available over the counter and do not require a prescription. There are no Empire Plan benefits for over the counter drugs.

Bupropion (generic Zyban®)

Bupropion (generic Zyban®) is a non-nicotine prescription medication. It acts on chemicals in the brain that are related to nicotine craving. It can be used alone or together with nicotine replacement therapy. Bupropion works best if it is started one or two weeks before attempting to quit smoking.

Chantix™

Chantix™ is a prescription medicine that helps people stop smoking by interfering with nicotine receptors in the brain. It works by lessening the pleasant effects a person gets from smoking and reducing nicotine withdrawal symptoms. It is recommended to start taking Chantix one week before attempting to quit smoking.

Ask Your Doctor

There is no evidence that any one type of smoking cessation medication is more effective than another. If you want to quit smoking, talk with your doctor about which prescription drug(s) would work best for you. Be sure your doctor and pharmacist know of any other medications you are taking before trying cessation or nicotine replacement therapies.

Based on information from the American Cancer Society

Quit Tips

Quitting smoking is the most important step that smokers can take to enhance the length and quality of their lives. Quitting is not easy, but it can be done. Nearly half of all adult smokers have quit. There is no one right way to quit, but there are key steps you can take that will increase your likelihood of success.

1. Make the decision to quit

The decision to quit smoking is one that only you can make. Others may want you to quit, but the real commitment must come from you. Think about why you want to quit and use those reasons as motivators.

- Are you worried that you will get a smoking-related disease?
- Do you want to set a good example for your children?
- Do you want to protect your family from the dangers of secondhand smoke?
- Do you need/want your money for other things?
- Do you have a relative, spouse or friend that developed a smoking-related illness?

2. Choose a Quit Day

Once you've decided to quit, choose a specific day within the next month as your Quit Day. Give yourself enough time to come up with a plan and prepare. Circle the date on your calendar, share it with your family, friends and coworkers, and make a strong, personal pledge to quit on that day.

3. Make a plan

Successful quitting is a matter of planning, preparation and commitment, not luck. Decide on your own plan now. If you've tried to quit before, think back to your past attempts. Try to remember what worked for you and what didn't. Think about what you could do differently this time. Consider using nicotine replacement therapy, joining a stop-smoking class, going to Nicotine Anonymous meetings or using a combination of these methods. Whatever method that you choose, plan, prepare and stay committed.

4. Prepare

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

- Get rid of all the cigarettes, lighters and ashtrays in your home, car and workplace.
- Stock up on oral substitutes – sugarless gum, carrot sticks, hard candy, cinnamon sticks, coffee stirrers, straws and/or toothpicks.
- Set up a support system. This could be a group class, Nicotine Anonymous, or a friend or family member who wants to quit with you or has successfully quit and is willing to help you.
- Plan activities for the first couple of weeks following your Quit Day to take your mind off smoking. Quitting will be easier if you keep yourself busy.

5. Follow through

Your Quit Day has arrived! What to do:

- Avoid places and situations where you normally smoke and situations with people where you will be tempted to smoke.
- Keep reminding yourself why you decided to quit and of all of the benefits of quitting.
- Call on your support system for help.
- Remember that there will be times when you will feel anxious, uneasy or unable to concentrate. This is normal, but will pass if you stay committed!

Based on information from the American Cancer Society

Recovering from slips

If you slip and start to smoke again, don't give up! Studies show that it can take several attempts at quitting before a smoker is done with smoking forever.

Be patient with yourself and realize that you are fighting a tough addiction. Take this opportunity to review what strategies have helped you during your smoke-free period and what has not, and then make adjustments.

Do not put off quitting, because if you get back into the habit of smoking, your body will get used to the nicotine again.

The following checklist outlines what to do if you find yourself smoking again:

1. Get rid of any cigarettes.
2. Think of that first cigarette as a "slip" rather than a "relapse."
3. Do not feel bad and give up.
4. Use behavioral and psychological coping skills. (Leave the situation, call a friend, and/or list your reasons for quitting.)
5. Commit to quitting again right away.
6. Learn from your slip. Be better prepared next time.

Based on information produced by the Tobacco Research and Intervention Program at the H. Lee Moffitt Cancer Center & Research Institute at the University of South Florida

Smoking Cessation Benefits

The U.S. Public Health Service has recommended medications and individual counseling as effective in helping smokers quit. Research shows that smokers are more likely to make a quit attempt and, most importantly, to succeed when they have easy access to smoking cessation treatments.

Through The Empire Plan Prescription Drug Program, you have access to prescription drugs that can help you to quit smoking.

Talk to your doctor about which prescription drug(s) would be appropriate for you. If Medicare is your primary insurance, individual smoking cessation counseling is covered through Medicare.

And if you have asthma and want to quit smoking, you can contact the New York Smokers' Quitline and the North American Quitline Consortium at the numbers listed below. Call today.

Based on information from Partnership for Prevention®

Help to Quit

For more information on smoking cessation, visit the customized Empire Plan Mental Health and Substance Abuse web site at www.liveandworkwell.com (use access code Empire on the homepage). You have access to educational and supportive articles, as well as resources to help you quit smoking.

Resources

American Heart Association
1-800-242-8721
www.americanheart.org

American Stroke Association
1-888-478-7653
www.strokeassociation.org

American Lung Association
1-800-548-8252
www.lungusa.org
www.ffsonline.org

Centers for Disease Control and Prevention: Smoking and Tobacco Use
1-800-232-4636
www.cdc.gov/tobacco

Environmental Protection Agency (EPA)
www.epa.gov/smokefree

National Cancer Institute
1-877-44U-QUIT
(1-877-448-7848)
www.smokefree.gov

Nicotine Anonymous
1-877-879-6422
www.nicotine-anonymous.org

New York State Smokers' Quitline
NY Residents:
1-866-NY-QUITS
(1-866-697-8487)
for free assistance
www.nysmokefree.com

National Smokers' Quitline
Residents of other states:
1-800-QUIT-NOW
(1-800-784-8669)

QuitNet
www.quitnet.com

New York State Department of Civil Service, Employee Benefits Division, Albany, New York 12239 ▪ https://www.cs.ny.gov

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AL 1189 *RO Smoking Cessation/December 2012*