# The Empire Plan REPORTING ON

# **SMOKING CESSATION**



Smoking is the most preventable cause of disease and death in the United States. This report describes how The Empire Plan's smoking cessation treatments, counseling and additional resources can help you quit smoking.

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Each year, over 480,000 people die prematurely from a smoking-related illness and another 16 million people suffer from at least one chronic disease caused by smoking.

Despite these risks, over 28 million adults smoke cigarettes and more than 11 million adults use e-cigarettes in the United States. Although surveys show that 68 percent of smokers want to quit and 55.1 percent attempt to quit each year, fewer than one in ten succeed.

# **HEALTH RISKS OF SMOKING**

#### Cancer

Smoking accounts for at least 25 percent of all cancer deaths and is linked to nearly 87 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:

- Bladder
- Blood (acute myeloid leukemia)
- Cervix
- Colon and rectum (colorectal)
- Esophagus (tube that connects the throat to the stomach)
- Kidney
- Larynx (voice box)
- Liver
- Mouth and throat
- Pancreas
- Stomach

#### Cardiovascular Disease

People who smoke are at greater risk for heart attacks, high blood pressure, blood clots, strokes, hemorrhages, aneurysms and other disorders of the cardiovascular system. In fact, one out of every four 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.

# 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 16 million people and is the sixth leading cause of death in the United States.

Based on information from the Centers for Disease Control and Prevention.

# 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 34,000 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.

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 you are pregnant and smoke, these poisons enter the placenta, the tissue that connects you to your baby. These poisons keep your baby from getting the proper supply of nutrients and oxygen that they need to grow.

According to the Centers for Disease Control and Prevention (CDC), babies born to mothers who smoke are at greater risk for early labor, low birth weight, congenital disabilities such as cleft lip/cleft palate and other health problems.

Based on information from the Centers for Disease Control and Prevention and the Mayo Clinic.



# 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 quit 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 tasks 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.



# 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 is a wide range of counseling services, self-help materials and medications available to help people quit smoking.

# New York State Smokers' 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.

The New York State Smokers' Quitline is a free service offered by the New York State Department of Health. Trained guit coaches provide support, help callers design personalized guit 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.

Local branches of the American Cancer Society, American Lung Association, Centers for Disease Control and Prevention (CDC) and the local health department often sponsor smoking cessation classes.

Support groups for quitters can also be helpful. Nicotine Anonymous is an open support group that offers a way to find others who want to stop smoking.



# 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

The Empire Plan Prescription Drug Program covers smoking cessation treatments with a prescription from your doctor, subject to applicable copayments.\* Studies have shown that pairing nicotine replacement therapies (NRT) and/or prescription medication with counseling or help from a support group can more than double one's chance of quitting permanently. Call The Empire Plan toll-free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 4 for the Prescription Drug Program. Check with your health care provider/doctor if you are pregnant or plan to become pregnant and share any medications you currently take before starting medication for guitting smoking. To help enrollees with the physical addiction to nicotine, the following NRT and medications can be used as aids in smoking cessation.

#### **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 medication 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.

#### **Prescription Medications**

Non-nicotine prescription medications are covered under the Patient Protection and Affordable Care Act (PPACA) guidelines.\* They act on chemicals in the brain that are related to nicotine craving. You may be able to start taking one of these medications one or two weeks 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 or over-the-counter 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.

\* Under the PPACA guidelines, there is a 168-day/per year limit on the zero copayment benefit for smoking cessation products.

Based on information from the Centers for Disease Control and Prevention.

# **QUIT TIPS**

Quitting smoking is the single most important step that smokers can take to extend the length and quality of their lives. Quitting is not easy, but it can be done. 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 smokingrelated 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 to use your money for other things?
- Do you have a relative, spouse or friend who 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 co-workers and make a personal pledge to guit on that day.

#### 3. Make a plan

Successful quitting is a matter of planning, preparation and commitment. 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 smoking cessation class, attending Nicotine Anonymous meetings or using a combination of these methods. Whatever method you choose, you need to 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 guit 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 guit and of all 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!

Information on this page is from the American Cancer Society.

# E-CIGARETTES AND LUNG HEALTH

Electronic cigarettes, or e-cigarettes, are popular tobacco products that contain substances that can cause lung diseases. E-cigarettes are sometimes called vapes, vape pens, mods, tanks and e-cigs. Using an e-cigarette is sometimes called vaping.

E-cigarettes are devices that allow users to inhale an aerosol (vapor) containing nicotine or other substances. Unlike traditional cigarettes, e-cigarettes generally are battery-operated and use a heating element to heat e-liquid from a refillable cartridge, releasing a chemical-filled aerosol.

#### What Is in E-Cigarettes?

Many e-cigarette cartridges and tanks are made up of nicotine extracted from tobacco mixed with a base (usually propylene glycol) and may also include flavorings, colorings and other chemicals. Because there is limited government oversight, we do not know all of the chemicals that are contained in e-liquids or how e-cigarette use might affect long-term health.

Early studies show that e-cigarettes contain nicotine, propylene glycol, formaldehyde, acrolein, diacetyl, diethylene glycol, heavy metals, cadmium and benzene. Nicotine is a highly addictive substance and many of the other chemicals are toxic. For example, acrolein can cause COPD, asthma and lung cancer.

# Secondhand Emissions from E-Cigarettes

As public spaces increasingly become smoke-free, some people are using e-cigarettes indoors and in smoke-free public spaces. While e-cigarettes do not produce smoke, they do expose others to secondhand emissions. Little is known about these emissions or the potential harm they may cause, but initial studies have found formaldehyde, benzene and tobacco-specific nitrosamines (all carcinogens) coming from those emissions. There is no evidence that shows that secondhand aerosol from e-cigarettes is safe for non-users to inhale.

# Can E-Cigarettes Help Someone Quit Smoking?

Many e-cigarette companies market their product as a tool to help smokers quit. However, the FDA's Center for Drug Evaluation and Research has not approved e-cigarettes as a safe or effective method to help smokers quit. Instead of quitting, many people continue using e-cigarettes while still smoking conventional cigarettes. Until the FDA approves a specific electronic nicotine delivery system or e-cigarettes as safe and effective for use as a tobacco cessation aid, the American Lung Association does not support using them for cessation, nor does it support any direct or implied claims that e-cigarettes help smokers quit.



# Youth and E-Cigarettes

Youth are using e-cigarettes at increasing and alarming rates. According to the American Lung Association, more than 10 percent of middle school students and more than 27 percent of high school students in the United States use e-cigarettes. Marketing campaigns often target younger age groups. They use advertising techniques that "glamorize" or lure the user by comparing the taste to sweet "candy-like flavors." They also offer information about online access for purchasing e-cigarettes.

#### **Bottom Line**

Scientists are still learning about the long-term harmful effects to the lungs from the ingredients in e-cigarettes. However, the CDC and American Lung Association have determined that the use of e-cigarettes, or vaping, is unsafe and dangerous for kids, teens and young adults. The FDA's Youth Tobacco Prevention Plan includes actions to stop youth use of tobacco products, especially e-cigarettes, by preventing youth access to these products, curbing marketing aimed at youth and educating teens about the dangers of using e-cigarettes.

Based on information from the American Lung Association.





# A 15-YEAR TIMELINE -WHAT HAPPENS AFTER **A SMOKER QUITS**

The U.S. Surgeon General has stated, "Smoking cessation represents the single most important step that smokers can take to enhance the length and quality of their lives." It's hard to quit smoking, but when you do, the health benefits begin as soon as 20 minutes after your last cigarette.

Within 20 minutes: Your heart rate returns to normal.

Within 12 to 24 hours: The carbon monoxide level in your blood returns to normal.

Within two weeks to three months: Your risk of heart attack drops and your lung capacity improves.

Within one to nine months: You experience a substantial decrease in shortness of breath and coughing.

One year after quitting: Your added risk of coronary heart disease is cut in half.

Five years after quitting: Your risk of stroke is the same as a non-smoker and your risk of mouth, throat and esophagus cancers is cut in half.

10 years after quitting: Your risk of dying from lung cancer is cut in half, your risk of bladder cancer is cut in half and your risk of cervical, larynx, kidney and pancreas cancers is reduced.

15 years after quitting: Your risk of coronary heart disease is the same as a non-smoker.

#### If you find yourself smoking again:

- 1. Get rid of any cigarettes and e-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 from the American Lung Association.

# SMOKING CESSATION BENEFITS

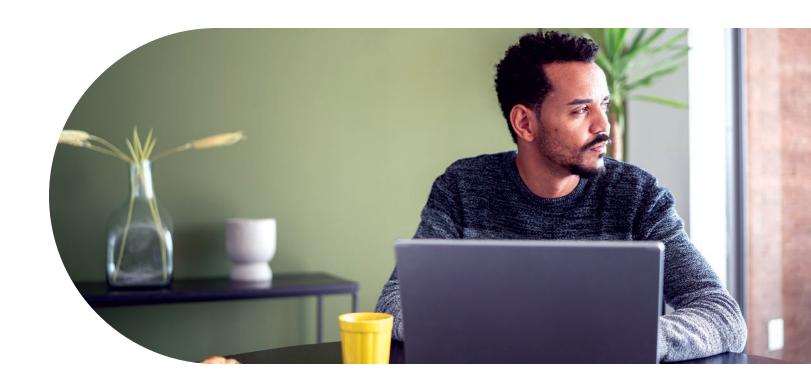
The U.S. Public Health Service has recommended medications and individual counseling as effective ways to help smokers quit. Research shows that smokers are more likely to make a guit attempt and, most importantly, to succeed when they have easy access to smoking cessation treatments.

Through the Empire Plan Prescription Drug Program, you have access to prescription drugs that can help you quit smoking. Talk to your doctor about which prescription or over-the-counter drug(s) would be appropriate for you.

The Patient Protection and Affordable Care Act (PPACA) covers preventive services, including tobacco use counseling for smokers. Contact The Empire Plan for more information. You can also contact the New York State Smokers' Quitline at 1-866-NY-QUITS (1-866-697-8487). If Medicare is your primary insurance, individual smoking cessation counseling is covered through Medicare. Medicare Part B coverage for smoking cessation counseling is limited to eight visits in a 12-month period. For more information, go to https://www.medicare.gov/coverage/counselingto-prevent-tobacco-use-tobacco-caused-disease.

# HELP TO QUIT

For more information on smoking cessation, visit the customized Empire Plan Mental Health and Substance Use Program website at www.achievesolutions.net/empireplan. Here you can access educational and supportive articles, as well as resources to help you quit smoking.



# **RESOURCES**

# The Empire Plan

1-877-7-NYSHIP (1-877-769-7447)

Press or say 1 for the Medical/ Surgical Program

Press or say 2 for the Hospital Program

Press or say 3 for the Mental Health and Substance Use Program

Press or say 4 for the Prescription Drug Program

Press or say 5 for the Empire Plan NurseLine<sup>SM</sup>

# **American Cancer Society**

1-800-227-2345

www.cancer.org

# **American Heart Association**

1-800-AHA-USA-1 (1-800-242-8721)

www.heart.org

# **American Lung Association**

1-800-LUNGUSA (1-800-586-4872)

www.lung.org www.freedomfromsmoking.org

# **American** Stroke Association

1-888-4-STROKE (1-888-478-7653)

www.stroke.org

# Centers for Disease **Control and Prevention:** Smoking and Tobacco Use

1-800-QUIT-NOW (1-800-784-8669)

www.cdc.gov/tobacco

# Center for Tobacco Products (CTP) Food and Drug Administration 1-877-287-1373

www.fda.gov/tobacco-products

# FDA's Youth Tobacco **Prevention Plan**

www.fda.gov/tobacco-products/ youth-and-tobacco/fdas-youthtobacco-prevention-plan

#### **National Cancer Institute**

1-877-44U-QUIT (1-877-448-7848)

www.cancer.gov smokefree.gov

# **New York State** Smokers' Quitline

1-866-NY-QUITS (1-866-697-8487)

www.nysmokefree.com

# Nicotine Anonymous (NicA)

1-877-TRY-NICA (1-877-879-6422)

www.nicotine-anonymous.org

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.

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