

Smoking.

The facts.

About 106,000 people in the UK die each year due to smoking. Smoking-related deaths are mainly due to cancers, COPD (chronic obstructive pulmonary disease) and heart disease. About half of all smokers die from smoking-related diseases. If you are a long-term smoker, on average your life expectancy is about 8-12 years less than a non-smoker. Put another way, in the UK about 8 in 10 non-smokers live past the age of 70, but only about half of long-term smokers live past 70.

The younger you are when you start smoking, the more likely you are to smoke for longer and to die early from smoking. Many smoking-related deaths are not 'quick deaths'. For example, if you develop COPD you can expect several years of illness and distressing symptoms before you die. Smoking increases the risk of developing a number of other diseases (listed below). Many of these may not be fatal, but they can cause years of unpleasant symptoms.

The good news is that stopping smoking now can make a big difference to your health. It is never too late to stop smoking to greatly benefit your health. For example, if you stop smoking in middle age, before having cancer or some other serious disease, you avoid most of the increased risk of death due to smoking. Many people have given up smoking. In 1972 just under half of adults in the UK were smokers. By 1990 this had fallen to just under a third. At present, just over a quarter of UK adults are smokers. Help is available if you want to stop smoking but are finding it difficult.

Cigarette smoke contains the following:

- Nicotine - a drug that stimulates the brain. If you are a regular smoker, when the blood level of nicotine falls, you usually develop withdrawal symptoms such as craving, anxiety, restlessness, headaches, irritability, hunger, difficulty with concentration, or just feeling awful. These symptoms are relieved by the next cigarette. So, most smokers need to smoke regularly to feel 'normal', and to prevent withdrawal symptoms
- Other chemicals in the 'tar' of the smoke. These deposit in the lungs and can get into the blood vessels and be carried to other parts of the body. Cigarette smoke contains over 4000 chemicals, including over 50 known carcinogens (causes of cancer) and other poisons.



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Which diseases are caused or made worse by smoking?

- **Lung cancer.** 34,000 people in the UK die from lung cancer each year. More than 8 in 10 cases are directly related to smoking
- **Chronic obstructive pulmonary disease or COPD.** About 25,000 people in the UK die each year from this serious lung disease. More than 8 in 10 of these deaths are directly linked to smoking. People who die of COPD are usually quite unwell for several years before they die
- **Heart disease** is the biggest killer illness in the UK. About 120,000 people in the UK die each year from heart disease. About 1 in 7 of these deaths are due to smoking
- **Other cancers** – of the mouth, nose, throat, larynx, gullet (oesophagus), pancreas, bladder, cervix, blood (leukaemia), and kidney are all more common in smokers
- **Circulation.** The chemicals in tobacco can damage the lining of the blood vessels and affect the level of lipids (fats) in the bloodstream. This increases the risk of atheroma forming (sometimes called 'hardening' of the arteries). Atheroma is the main cause of heart disease. It is also the main cause of strokes, peripheral vascular disease (poor circulation of the legs), and aneurysms (swollen arteries which can burst causing internal bleeding). All of these atheroma-related diseases are more common in smokers
- **Sexual problems.** Smokers are more likely than non-smokers to become impotent or have difficulty in maintaining an erection in middle life. This is thought to be due to smoking-related damage of the blood vessels to the penis
- **Ageing.** Smokers tend to develop more 'lines' on their face at an earlier age than non-smokers. This often makes smokers look older than they really are
- **Fertility** is reduced in smokers (both male and female)
- **Menopause.** On average, women who smoke have a menopause nearly two years earlier than non-smokers
- Other conditions where smoking often causes worse or more prolonged symptoms include: asthma, the common cold, flu, chest infections, tuberculosis, chronic rhinitis, diabetic retinopathy, hyperthyroidism, multiple sclerosis, optic neuritis, and Crohn's disease
- Smoking increases the risk of developing various other conditions including: optic neuropathy, cataract, macular degeneration, cryptogenic fibrosing alveolitis, psoriasis, gum disease, tooth loss, osteoporosis and Raynaud's phenomenon.

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Smoking in pregnancy increases the risk of:

- Miscarriage
- Complications of pregnancy, including bleeding during pregnancy, detachment of the placenta, premature birth, and ectopic pregnancy
- Low birth weight. Babies born to women who smoke are on average 200 grams (8 oz) lighter than babies born to comparable non-smoking mothers. Premature and low birth weight babies are more prone to illness and infections
- Congenital defects in the baby – such as cleft palate
- Stillbirth or death within the first week of life – the risk is increased by about one-third
- Poorer long-term growth, development, and health of the child. On average, compared to children born to non-smokers, children born to smokers are smaller, have lower achievements in reading and maths, and have an increased risk of developing asthma.

How does smoking affect other people?

- Children and babies who live in a home where there is a smoker:
 - Are more prone to asthma and ear, nose and chest infections. About 17,000 children under five years old in England and Wales are admitted to hospital each year due to illnesses caused by their parents smoking
 - Have an increased risk of dying from cot death (sudden infant death syndrome)
 - Are more likely than average to become smokers themselves when older
 - On average, do less well at reading and reasoning skills compared to children in smoke-free homes, even at low levels of smoke exposure

– Are at increased risk of developing chronic obstructive pulmonary disease and cancer as adults

- Passive smoking of adults. You have an increased risk of lung cancer and heart disease if you are exposed to other people smoking for long periods of time. Tobacco smoke is also an irritant, and can make asthma and other conditions worse
- Unborn babies. Described in pregnancy section above.

Other problems with smoking

- Your breath, clothes, hair, skin, and home smell of stale tobacco. You do not notice the smell if you smoke, but to non-smokers the smell is usually obvious and unpleasant
- Your sense of taste and smell are dulled. Enjoyment of food and drink may be reduced
- Smoking is expensive
- Life insurance is more expensive
- Finding a job may be more difficult as employers know that smokers are more likely to have sick leave than non-smokers. More than 34 million working days (1% of total) are lost each year because of smoking-related sick leave
- Potential friendships and romances may be at risk. (Smoking is not the attractive thing that cigarette advertisers portray).

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What are the benefits of stopping smoking?

The benefits begin straight away. You reduce your risk of getting serious disease no matter what age you give up. However, the sooner you stop, the greater the reduction in your risk.

If you have smoked since being a teenager or young adult:

- if you stop smoking before the age of about 35, your life expectancy is only slightly less than people who have never smoked
- If you stop smoking before the age of 50, you decrease the risk of dying from smoking related diseases by 50%
- It is never too late to stop smoking to gain health benefits. Even if you already have COPD or heart disease, your outlook (prognosis) is much improved if you stop smoking.

Other benefits of stopping smoking include the following:

- Breathing improves
- Chest infections and colds become less frequent
- Reduction in 'smoker's cough'
- The smell of stale tobacco goes from your breath, clothes, hair, and face
- Foods and drinks taste and smell much better
- Finances improve. You will save well over £1000 per year if you smoked 20 a day
- You are likely to feel good about yourself.

How can I stop smoking?

About 2 in 3 smokers want to stop smoking. Some people can give up easily. Willpower and determination are the most important aspects when giving up smoking. However, nicotine is a drug of addiction and many people find giving up a struggle.

Help is available with:

- GPs, practice nurses, or pharmacists who can provide help, information, encouragement, and tips on stopping smoking. Also, many parts of the country now have specialist NHS 'Stop Smoking Clinics' which have a good success rate in helping people to stop smoking. Your doctor may refer you to one if you are keen to stop smoking but are finding it difficult to do so
- Nicotine Replacement Therapy (NRT) can help if withdrawal symptoms are troublesome. Nicotine gum, sprays, patches, tablets, lozenges, and inhalers are available. Using one of these roughly doubles your chance of stopping smoking if you really want to stop. A pharmacist, GP, practice nurse, or Stop Smoking Clinic can advise about NRT
- A medicine called bupropion (trade name 'Zyban') is another option. It also roughly doubles your chance of stopping smoking if you really want to stop. It helps to reduce the symptoms of nicotine withdrawal. It may be advised by a GP or Stop Smoking Clinic if you are determined to stop smoking, but are finding it difficult.

Further help and information

Quit - a charity that helps people to stop smoking. Quitline: 0800 00 22 00

Web: www.quit.org.uk

NHS smoking helpline: 0800 169 0 169 and website www.givingupsmoking.co.uk