Smoking withdrawal symptoms and how to quit [1]

Hi Alice...

I would like to know all the withdrawal symptoms of quitting smoking. Also how long do these symptoms last and do they come all at once or one by one? Without using nicotine replacements, how does one deal with them? Plus, any suggestions to avoid weight gain?

How long does it take to get rid of withdrawal symptoms? What do you do if you have a headache? have a normal pain killer or what?

Answer

Dear Reader,

It's great that you're considering quitting, and that you're learning about what you might experience. Preparation can help you to anticipate and avoid some of the common set-backs that many people encounter when trying to stop smoking.

Most of the physical symptoms that result from quitting stem from nicotine withdrawal. Nicotine, an addictive drug naturally occurring in tobacco and added to most cigarettes and tobacco products, produces pleasant feelings in the body. Overtime, more and more nicotine is required to produce those feelings. When the body doesn't receive the nicotine it craves, uncomfortable withdrawal symptoms can set in. These typically include:

- Intense craving for nicotine
- Tension
- Irritability
- Headaches
- Difficulty concentrating
- Drowsiness and trouble sleeping
- Increased appetite and weight gain
Almost all smokers who quit suffer some form of nicotine withdrawal, and it's generally more intense for people who have used tobacco for a long time. Luckily, the discomfort of withdrawal is often short-lived, lasting from a few days to a few weeks. Withdrawal symptoms will probably be most noticeable within the first few days after quitting, and gradually subside. Nicotine supplementation in the form of gum, a patch, or pills can be helpful in mitigating the physical dependence in the short-term and lessening the symptoms of withdrawal. The U.S. Food and Drug Administration (FDA) has also approved several medications for smoking cessation, including antidepressants.

If you're not interested in using nicotine replacements or other medications, some people report that acupuncture, hypnosis, yoga, or meditation have helped them quit. As for the issue of gaining weight, think about ways to include physical activity in your daily routine, and pay extra attention to eating healthful meals and snacks. Overall, a few extra pounds put on while quitting are less harmful than continuing to smoke.

In addition to the physical symptoms of withdrawal, there exist behavioral components of quitting that should be addressed in order to stay tobacco-free. If you have been smoking for any length of time, it may have become an activity linked to many parts of your life, like waking up, eating, or taking breaks at school or work. It will take time and strategizing to un-link smoking from these activities. Because some people experience strong cravings in certain situations associated with smoking, The American Cancer Society suggests that it might be helpful, at least in the beginning, to keep these suggestions in mind:

- Avoid people and places where you are tempted to smoke. This may mean taking a different route to work or school, or going for a walk at breaks instead of going to the area where people smoke.
- Replace cigarettes with oral substitutes, such as sugar-free gum, carrot or celery sticks, or sunflower seeds.
- Exercise more, which can help you reduce stress and avoid weight gain.
- Delay. If you feel that you are about to light up, tell yourself you must wait at least ten minutes. Often this simple trick will allow you to move beyond the strong urge to smoke.
- Breathe deeply. When you were smoking, you breathed deeply as you took a drag. When the urge strikes now, breathe deeply and picture your lungs filling with fresh, clean air, and remind yourself of your reasons for quitting.

Quitting smoking can be difficult, but reminding yourself why you're undertaking such a challenge can prove extremely useful. Many people know that smoking can cause lung cancer, but few realize it can also cause cancers of the mouth, voice box (larynx), throat (pharynx), esophagus, breast, bladder, kidney, pancreas, cervix, and colon. Smoking also increases your risk of heart attack, thyroid disease, blindness, impotence, rheumatoid arthritis, lupus, and lung diseases such as emphysema and chronic bronchitis. More superficial problems, like wrinkling of the skin, bad breath, and yellow fingernails and hair, are all results of long-term smoking. Mothers who smoke put their children at an increased risk of SIDS and colic. And women over 35 who smoke and use birth control pills are in a higher-risk group for heart attack, stroke, and blood clots of the legs.

If that long list of smoking-related diseases doesn't provide enough incentive to give up the habit, check out the American Cancer Society's list of benefits in their Guide to Quitting Smoking that you can expect almost immediately upon your last inhale of smoke:
- **20 minutes after quitting**: Heart rate and blood pressure drops.
- **12 hours after quitting**: The carbon monoxide level in your blood drops to normal.
- **2 weeks to 3 months after quitting**: Circulation improves and lung function increases.
- **1 to 9 months after quitting**: Food tastes better. Your sense of smell returns to normal. Ordinary activities (climbing stairs, housework) no longer leave you out of breath. Coughing and shortness of breath decrease; cilia (tiny hair-like structures that move mucus out of the lungs) regain normal function in the lungs, increasing the ability to handle mucus, clean the lungs, and reduce the risk of infection.
- **1 year after quitting**: The excess risk of coronary heart disease is half that of a smoker's.
- **5 years after quitting**: Your stroke risk is reduced to that of a nonsmoker 5 to 15 years after quitting.
- **10 years after quitting**: The lung cancer death rate is about half that of a continuing smoker's. The risk of cancer of the mouth, throat, esophagus, bladder, cervix, and pancreas decrease.
- **15 years after quitting**: The risk of coronary heart disease is that of a nonsmoker's.

Smokers wanting to quit can make use of another non-medical strategy: getting support from an array of groups and phone counseling programs. Smokefree.gov [7] and QuitNet [8] is an online resource of information on smoking, quitting techniques, and withdrawal and cessation support. If you’re a student or staff at a university, check out your campus’s health services, as many schools and companies offer similar programs.

In the end, the decision to quit, and stay quit, is up to you. Wishing you the utmost determination and success in this important and challenging endeavor,

Alice!

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