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Up in Smoke

One student's attempt to quit smoking.
by Kari Sodeman
photos by Sara Troy

You know the look. That vacant stare, the numbness, the empty, “Yes, I know.” It’s the practiced way to remove yourself, as a smoker, from people preaching about the dangers of smoking.

We know that cigarettes are evil. We know that smoking is dangerous to everyone who smokes, is around smoke, or is being carried to birth by a smoker. We know all of this, but still, some of us choose to smoke. Then, some of us choose to quit. Both are due to personal reasons. So why do non-smokers keep harassing us? Do they think quitting is as easy as switching from regular soda to diet?

I smoked for four years. I quit smoking a few weeks ago. I went on the patch and joined the Student Health Center’s stop smoking program. Let me tell you, quitting smoking is pretty hard.

“I think most smokers want to quit,” said Linda Dutton, co-facilitator of the Student Health Center’s stop smoking program. “While I was quitting, [people] were watching and listening, wondering, ‘Will she go berserk?’” However, Dutton also said that smokers were most supportive of her move to quit.

Dutton quit smoking last summer after years of being a smoker. She is my hero because she has taught me you can quit smoking and still like your smoking friends. You can quit smoking and not hate your smoking self.

“You have to be able to live in a smoking world, being a non-smoker. But I didn’t want to be ugly,” she said. By “ugly,” she means the type of people smokers loathe. The people that made me, a smoker, want to smoke more. The type that will walk past where you are smoking, waving and coughing, only to get into their cars with the bad exhaust pipes that cloud up the area.

Dutton said one of her pet peeves is non-smokers who would rather complain about the pollution the smoker next to them is creating than what the hog farm down the road is doing to their tap water or the smoke-stack is doing to the air above.

“If everyone in the world quit smoking, do you think our pollution levels would go down?” she asked. “It’s just another excuse to avoid the issues.”

With the goal of not turning into my worst nightmare, I bought the patch and joined the campus stop smoking group.

To tell you the truth, I was very nervous about trying the patch. A two week supply ranges between $40 to $50. “What if it didn’t work?” I asked myself. Could I bear the thought of being ripped off by people playing on my desire to quit smoking?

Now, this is where someone would chirp, “But think of all the money you blow on cigarettes.” Well, my little non-smoking friend, smoking cigarettes is enjoyable. Quitting is hard work.

The patch did work. It didn’t take away the cravings completely, but it did dramatically lower the level of my cravings. I went from a 10 (super intense) to a nice, happy 4 (I felt it, but not too bad). Another good thing about the patch is that you cannot—should not—have a cigarette while you’re on it. According to the warning on the patch package, you can have a heart attack. And that doesn’t just apply to old, heart attack-prone people. Anyone who is on the patch and smokes can have a heart attack. Plus, you cannot rip it off
your body and go have a quick smoke. The package suggests you wait three hours after the removal of the patch before you have a cigarette, or the same risk applies. That scare tactic worked for me.

Other “helpers” include reducing your nicotine intake by switching to low tar cigarettes, chewing nicotine gum or taking the new drug, Zyban.

Zyban, which was just approved by the U.S. Food and Drug Administration this year, is the new prescription drug intended to help people quit smoking. It is to be used two weeks before your quit date and used up to eight weeks after you’ve quit. Unlike the patch, you can smoke while on Zyban. It contains no nicotine, but reduces cravings and helps with depression. One of the women in my quit smoking group is currently using Zyban. She said it wasn’t inexpensive—about $60 for a month’s supply. So far, she said, it was working well.

The stop smoking group on campus has also been a great help to me. It meets once a week for eight weeks. Participants do not quit smoking until the third week of meetings. The weeks prior to quitting help you examine your habits. Funky “pack tracks” help you assess how you feel and how bad you need each cigarette you smoke. Worksheets and personality tests help you discover why you smoke.

One woman in the group said of the pack tracks, “When you actually have to write [your reasons for smoking] down, you find you smoke less.”

Next, we had to pick the top three cigarettes of the day and think of things to do during that time instead of smoking. That was hard. I mean, do you really want to mention your favorite cigarettes?

Then, we shared stories of how we started. One woman told a story similar to many people’s first smoking experience. She and some of her friends had gotten a hold of a pack of cigarettes and decided to learn how to smoke. “We choked and gagged and we just kept doing it,” she said. “I think one girl puked.”

The group also talked about cravings, triggers and backdoors. Cravings go away in six minutes, Dutton said. Triggers are places, people and situations that make you want to smoke. These should be avoided.

Since a lot of my friends smoke at the Maintenance Shop, I didn’t go there the first week I quit. I didn’t go to a bar until three weeks had passed. At the same time, I wasn’t going to quit being around smoke and smokers forever. I had non-smoker friends who were tolerant of my smoking; I expected myself to show the same respect.

Backdoors are excuses you make for yourself to begin smoking again. Example: “If I gain a lot of weight, I’ll smoke again.” Everyone had them, and we had to confront them.

OK, so patches, gum and groups all help. However, there’s no way around it: Quitting smoking is a long process. There are some negative side effects that no one really talks about. If you smoke, your body is used to smoking and it will act weird when you quit. Expect these symptoms:

- The Foggy Feeling—When you first quit, you may will experience a foggy feeling. You’re awake and not really tired, but you’re in a daze. Everything seems surreal. This will go away in a couple of weeks.
- Insomnia—This happens to some people when they stop smoking. You simply cannot go to sleep. If it lasts more than two days, talk to your doctor.
- Mild Depression—This is actually situational depression. When something bad happens, it seems really bad. If depression is a problem, see your doctor.
- Headaches—Just a reaction to your body adjusting.
- Weight Gain—Now this issue is just a bunch of hype. You don’t have to gain a bunch of weight. The most you will gain (if you don’t replace your cigarettes with Snickers bars) is six pounds. If you go for a walk around the block when you have a craving, you may not gain anything. The weight you gain can be lost quickly. Just think of how much better you will be at the Stairmaster (a smoker’s nightmare). Also, smoking to lose weight is just sick and wrong. I know, because I’ve done it. It won’t work forever.
- Patch Dreams—Those folks on the patch can have patch dreams. These can be weird, vivid dreams that you will have as long as you are on the patch. I found them fun. I enjoyed my T-Rex dream; I haven’t had a dream that lucid since elementary school.
- The “I Smoked” Dream—A vivid, recurring dream in which you will light up, smoke and wake up feeling like you just had a cigarette.
- Hacky-Uppy—You thought that morning hack was bad? Just wait until your lungs really clean themselves out. Yum.
These side effects can be really annoying, but the side effects of light smoking are annoying, too. Even light smoking affects your inner ear passageways, causes heart palpitations and sometimes causes dizziness. A lot of quirky body problems I had slowly disappeared after I quit smoking.

If you smoke, you probably don't want to hear that. I know I was pretty good at turning a deaf ear.

"Most smokers have a sense of invincibility because we started when we were young," Dutton said. "Other programs stem on, 'You're going to have emphysema if you don't stop.' Our program is more positive. This is not a will power issue. It is a physical and emotional addiction."

The program runs every semester and costs $20 with $10 returned for perfect attendance. It is positive, upbeat and not designed to make you kill yourself if you slip up while quitting. If you want to quit, the class explores several ways to help you.

"Smokers are wonderful people," Dutton said. "Many of them are outgoing, friendly people. But smoking is dangerous."

In 1990, 4,816 tobacco-related deaths were reported in Iowa. Half a decade later, the numbers continue to rise in Iowa, as well as across the nation. The following is a brief list of well-known people who have lost their lives to tobacco over the years.

**Nat “King” Cole, singer**
Died at age 45 after surgery for lung cancer (February 15, 1965)

**T.S. Eliot, author/poet**
Died at age 76 of emphysema (January 4, 1965)

**Betty Grable, actress**
Died at age 56 of lung cancer (July 2, 1973)

**Boris Karloff, actor**
Died at age 81 of heart and lung disease (February 2, 1969)

**Ernie Kovacs, TV personality**
Died at age 43 of a skull fracture from an automobile accident caused while he was trying to light his trademark cigar (January 11, 1962)

**Groucho Marx, actor/entertainer**
Died at age 86 of lung cancer (August 19, 1977)

**Robert Mitchum, actor**
Died at age 79 of lung cancer (July 1, 1997)

**Vincent Price, actor**
Died at age 82 of lung cancer (October 26, 1993)

**Ayn Rand, author/philosopher**
Died at age 77 of lung cancer (March 6, 1987)

**Fred “Sonic” Smith, guitarist for MC5**
Died at age 45 of heart failure (November 4, 1994)

**Sarah Vaughan, singer**
Died at age 66 of lung cancer (April 3, 1990)