Stress Management Tips

Take a deep breath!

Stress often causes us to breathe shallowly, and this in turn almost always causes more stress! Mentally scan your body for physical tension. Does your chest feel tight? You may be holding your breath without even knowing it. Shallow breathing puts less oxygen in the blood stream, producing an increase in muscle tension. You may experience headaches or you may feel more anxious and uptight.

The next time you feel “uptight,” try taking a minute to slow down and breathe deeply. Breathe in through your nose and out through your mouth. Try to inhale enough so that your lower abdomen rises and falls. Count to six as you slowly exhale.

Manage time

One of the greatest sources of stress is over-commitment or poor time management. Plan ahead. Make a reasonable schedule for yourself and include time for stress reduction as a regular part of your schedule.

Trying to take care of everything at once can seem overwhelming. As a result, you may not accomplish anything. Instead, make a list of what tasks you have to do, then do them; one at a time, checking them off as they’re completed. Recognize when you are most stressed and allow yourself some reasonable breaks. When things feel especially difficult, take a walk or otherwise change your scenery.

Get physical

Physical activity plays a key role in reducing and preventing the effects of stress. Many jobs are often sedentary, and sitting around can mean letting stress accumulate in your body. When you feel nervous, angry or upset, release the pressure through exercise or physical activity.

Try to find something you enjoy and make regular time for it. Running, walking or swimming are good options for some people, while others prefer dance or martial arts. Working in the garden, washing your car, or playing with your dog can relieve that “uptight” feeling, relax you, and often will actually energize you! Remember, your body and mind work together.

How does smoking cause wrinkles?

QUESTION:
Can you explain the effects of smoking on the skin?

ANSWER:
Most wrinkles are due to age-related changes in the skin. Heredity plays a major role in the degree of skin aging and wrinkling. But environmental factors, such as sun exposure and exposure to cigarette smoke can accelerate this aging process.

Smoking reduces blood flow to the skin and decreases the amount of vitamins in the skin, such as vitamin A. These factors increase damage to elastic fibers and collagen in the skin from sun exposure. It’s also possible that repeated exposure to the heat from a burning cigarette may also damage facial skin over time.

These skin changes can be seen in young adults with only a 10-year smoking history.
There is No Such Thing as Just one Cigarette

As they say, cigarettes travel in packs. The only way to keep the beast at bay is to keep nicotine out of your system. If you decide to go ahead and smoke just one, chances are you’ll be back to your old habit in short order. You may even find yourself smoking MORE than you used to. There is no such thing as just one cigarette.

If you absolutely cannot get thoughts of smoking out of your mind and you fear you’re about to cave in and smoke, stop everything! Grab some paper and something to write with, sit down, and answer the following questions with honesty and as much detail as you can muster.

• Why did I quit smoking?
• How long did I smoke?
• How long have I been smoke free?
• How long do I think it should take to be free of this habit?
• If I go back to smoking, will I want to quit again?

• How long will it be before I do? (Weeks... months...years? When illness strikes?)
• Will quitting be any easier next time around?
• What benefits will smoking give me?
• Is it worth giving up what I've worked so hard to do?

Some of these questions are hard to think about, but the fact is, people who return to smoking run a very real risk of not quitting again for years or before a smoking-related illness strikes. Keep your memory green and don’t lose sight of the reasons you quit smoking. They are no less true today than they were when you quit, but if you’re not careful, they can feel less crucial.

But What If I Lapse?
Here’s a few tips to make sure you don’t give up on giving up...

Stopping smoking is a process. Many ex-smokers have had momentary slips and then continued to stop smoking with success.

Research shows that the sooner you stop again, the more likely you are to stop for good. Don’t beat yourself up about it but equally don’t let it be an excuse to go straight back to smoking 20 a day. You made a mistake - use the experience to strengthen your resolve not to let it happen again. Here’s a few tips to make sure you don’t give up on giving up...

• If you’ve just had a cigarette, change your surroundings - if possible, by leaving the situation.
• Throw away any remaining cigarettes.
• Feelings of failure, shame, guilt and anger after lapsing are normal. Turn these emotions into something positive and be careful not to give the cigarette too much power. Use these emotions to get back on track - remember, you are in control.
• Look at what time, situation or feelings caused the lapse. Did the cigarette help? Did it make the problem go away? How else could you deal with the problem? Use this analysis as an indicator of what to avoid in the future and how to deal with those high-risk situations effectively. Imagine yourself handling the relapse situation without a cigarette.
• Don’t view your lapse as failure. Think of all the cigarettes you didn’t smoke!
• Get encouragement from friends, family, or a support line.
• Re-read your diary. Add to it if necessary, describing whatever it was that led to your lapse. Remind yourself that one cigarette (or one pack or ten packs - whatever it was) doesn’t make you a smoker again any more than that first cigarette made you a smoker in the first place.

Be patient with yourself and allow the healing process to take place, regardless of how long it takes. Nurture and protect your quit program because it’s the path to a healthier and happier YOU.
Think about the following questions before you try to stop smoking. You may want to talk about your answers with your health care provider.

1. Why do you want to quit?
2. When you tried to quit in the past, what helped and what didn’t?
3. What will be the most difficult situations for you after you quit? How will you plan to handle them?
4. Who can help you through the tough times? Your family? Friends? Health care provider?
5. What pleasures do you get from smoking? What ways can you still get pleasure if you quit?

Here are some questions to ask your Health Care Provider

1. How can you help me to be successful at quitting?
2. What medication do you think would be best for me and how should I take it?
3. What should I do if I need more help?
4. What is smoking withdrawal like? How can I get information on withdrawal?

What Type of Nicotine Replacement is for You?

The Food and Drug Administration has approved six first-line medications to help smokers quit:

Five are nicotine replacement therapies that relieve withdrawal symptoms. They include nicotine gum, patch, nasal spray, inhaler and lozenge.

The sixth medication, Bupropion SR (sustained release), is a non-nicotine medication that is thought to reduce the urge to smoke by affecting the same chemical messengers in the brain that are affected by nicotine.

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<tr>
<th>Type</th>
<th>Form</th>
<th>Common Brand Name(s)</th>
<th>Availability</th>
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<tbody>
<tr>
<td>Nicotine Replacement Therapy</td>
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<td>Nicorette®</td>
<td>Over-the-counter (OTC)</td>
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<td></td>
<td>Patch</td>
<td>Nicoderm®, Habitrol®, Prostep®, Nicotrol®</td>
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<tr>
<td>Bupropion SR</td>
<td>Pill</td>
<td>Zyban®, Wellbutrin®</td>
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Smoking & Headaches

Smoking and secondhand smoke from cigarettes, cigars and pipes can contribute to headaches for both the smoker and the non-smoker. Nicotine, one of the components of tobacco, stimulates the blood vessels in the brain to constrict (narrow). Smoking also stimulates the nerves in the back of the throat, contributing to headache pain. Usually, by removing the stimulus (nicotine), headaches will be relieved. Quitting smoking or reducing exposure to secondhand smoke is especially helpful for those with cluster headaches. In one study of people with these painful, frequent headaches, those who reduced their tobacco use by less than one-half pack of cigarettes per day found their headaches decreased by 50 percent.

How does Secondhand Smoke Harm Children?

Babies and children exposed to a smoky atmosphere are:
- Twice as likely to have asthma attacks and chest infections
- More likely to need hospital care in their first year of life
- Off sick from school more often
- More likely to get more coughs, colds and wheezes

Medical research also shows children have:
- Much higher risk of S.I.D.S. death than the children of non-smokers
- Increased risk of meningitis
- Higher chances of getting ear infections and ‘glue ear’, which can lead to partial deafness

What can you do to protect babies and children?

You can help protect them by keeping their play, sleep and eating areas completely smoke free.
- Always smoke outside - well away from children
- When out and about with the family, find non-smoking areas

Additional resources to help you quit:

**Tobacco Free Nurses**
- The first national program focused on helping nurses and student nurses stop smoking.
  www.tobaccofreenurses.org

**Centers for Disease Control and Prevention** - Tobacco Information and Prevention Source.
  www.cdc.gov/tobacco

**Surgeon General** - ‘You Can Quit Smoking’ Consumer Guide.
  www.surgeongeneral.gov/tobacco/default.htm

**American Cancer Society** - Guide to Quitting Smoking.
  www.cancer.org

Tobacco Free Press - Vol. 1
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