Depression and quitting smoking
An information booklet
Contents

Depression and quitting smoking 1
What is depression? 1
Do people with depression smoke more than other people? 2
Why do people smoke? 2
Why do you smoke? 4

Quitting smoking 5
Why do you want to quit? 5
Benefits of quitting 6
Quitting and depression 7

Making a plan to quit 9
When is the right time to quit? 9
Setting a date to quit 9

Ways to quit 11
Treatment and support 11
Individual strategies 13
What to expect when you quit 16
Slip ups 17

Summary of advice 19

Helping a friend or family member to quit 21
What is helpful? 21
What is unhelpful? 22

More information 23

This booklet was produced by beyondblue in collaboration with Quit Victoria. beyondblue would like to thank members of its national reference group, blueVoices, for sharing their personal experiences for this booklet. Their comments are quoted throughout and their feedback has been invaluable.
Depression and quitting smoking

Quitting smoking is one of the most important things you can do to improve your health. Quitting is also likely to improve your mental wellbeing. If you’ve had depression in the past, your chances of quitting for good are about the same as someone who hasn’t had depression. If you’re experiencing depression now, it can make quitting more challenging, but with the right support, you also have a good chance of quitting smoking successfully.

In this booklet, you will find:
• information about the links between smoking and depression
• sources of support to quit
• what your family and friends can do to help.

You can also read the views and experiences of people with depression who want to quit smoking or have quit smoking successfully. These personal experiences were collected from members of blueVoices (beyondblue’s national reference group).

What is depression?
Depression is more than just a low mood — it’s a serious health condition. Depression affects how you feel about yourself. You may lose interest in work, hobbies and doing things you normally enjoy. You may lack energy, have difficulty sleeping or sleep more than usual. Some people feel anxious or irritable and find it difficult to concentrate.

Over one million people in Australia live with depression each year. On average, one in five women and one in eight men will experience depression in their lifetime.¹ The good news is, just like a physical illness, depression can be treated — and with the right treatment, most people recover. The sooner a person with depression seeks help, the better.
Do people with depression smoke more than other people?

Smoking rates among adults in Australia have fallen over the past few decades, mainly due to education about the serious physical, financial and social effects of smoking, as well as the tightening of tobacco laws.

We know that generally smoking is more common in people with depression than in the general population, but the rates vary, depending on the type of depression and how severe it is. Among smokers with depression, the more serious their depression, the more likely it is that they will smoke more heavily than an average smoker.

It’s worth keeping in mind that overall people with depression are more likely to be non-smokers or ex-smokers than smokers. And the moderate increase in smoking among people with depression may be just as likely to be caused by social or cultural factors rather than any biological factors associated with depression.

Why do people smoke?

Smoking is an addiction that is made up of three parts: chemical addiction, habits and emotional ties. You might strongly relate to some aspects of addiction described here, but not so much to others. Every smoker is different. What kind of smoker are you?

Chemical

Nicotine is the addictive drug in tobacco. It affects the chemicals in your brain and you may feel good for a moment or two after a puff. After you’ve been smoking for a while, your body gets used to nicotine and relies on it to feel normal. Do you have any of these signs of nicotine addiction?

- You smoke your first cigarette within 30 minutes of waking up.
- You smoke more than 10 cigarettes per day.
- You have cravings and withdrawal symptoms when trying to quit.

When you go without cigarettes, it’s common to feel irritable and anxious, and to find it hard to focus on what you

“I believe stopping smoking has helped my mental health and management of my depression. I stopped smoking in the peak of my depression... I am so proud of myself for finally doing it and I haven’t looked back.”

— Amanda, 35
are doing. This is because your body is withdrawing from a chemical addiction. Quitting medications help to relieve withdrawal symptoms.

Habits
All smokers have their own smoking habits. These habits are often tied to certain people, activities or places, like smoking with friends, having a cigarette after a meal or when waiting for a bus. Think about when, where and why you smoke. Once you quit, your smoking habits will trigger cravings for a while. Knowing what situations make you want to smoke can help you plan how to deal with trigger situations when you’re quitting.

For example:
• If you usually smoke when you first wake up, have a shower instead.
• If you smoke when you’re drinking, switch to non-alcoholic drinks for a while.

Emotions
How you are feeling can make you want to have a cigarette. Negative moods such as stress, anger, sadness or frustration might make you feel like smoking. You may smoke for pleasure or to increase your concentration. You might feel like a cigarette when you are happy and want to reward yourself with something you enjoy. It’s important to recognise what feelings make you want to smoke and work out another way to deal with these feelings.

For example:
• If you usually smoke when you’re stressed, try using a stress ball instead or talk to someone about it.
• If you reward yourself with a cigarette, relax with a hot drink, have a night out with friends or buy your favourite magazine instead.

“I smoke to relax, think, take a break, take time alone, deep breathing, to reflect, daydream, and excuse myself from the world.”
— Vanessa, 40

“I smoke now because I have become accustomed to most of the people around me smoking at any given social event. I find, because of my depression, that I tend to replace alcohol with cigarettes to avoid mixing alcohol with my antidepressant medication. Smoking gives me something to do with my hands, and feel as if I’m still actively involved in whatever social situation I find myself in.”
— Bec, 20

“I began smoking during a difficult time in my life. I was suffering depression and anxiety, my father was diagnosed with leukaemia and my grandmother passed away. I took up smoking as I felt I needed something to help relieve my pain and stress.”
— Jessica, 25
**Smoking and stress**

Many people who smoke say that smoking helps to calm them down and reduces stress. After you’ve been smoking for a while, your body gets used to nicotine (the addictive drug in tobacco) and relies on it to feel normal. The relief you feel when you smoke comes from having nicotine in your system again. The more you smoke, the more often you will feel the need for a cigarette to relieve the stress of nicotine withdrawal. Quitting breaks this vicious cycle.

Smoking actually causes stress. Having a cigarette is not going to make your problems go away. Research shows that people who start smoking are more likely to become stressed and depressed.² Many people who quit find that, after a while, they feel less stressed and their mood improves.

> “I have found that when I am anxious, I smoke more, but that actually increases my anxiety in the short term.”
> — Alice, 30

**Why do you smoke?**

Find out what triggers your desire to smoke. For one day, write down when you smoke or have a craving. This will help you learn about your smoking. The more you know, the more you’ll be able to anticipate and plan ways to deal with cravings. Example:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Activity/situation</th>
<th>Feeling/mood</th>
<th>Value</th>
<th>Outcome</th>
<th>What I could do instead</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/9</td>
<td>9am</td>
<td>Running late</td>
<td>Stressed</td>
<td>4</td>
<td>1 cigarette</td>
<td>Deep breathing</td>
</tr>
<tr>
<td></td>
<td>10am</td>
<td>Coffee break</td>
<td>OK</td>
<td>3</td>
<td>1 cigarette</td>
<td>Eat an orange</td>
</tr>
<tr>
<td></td>
<td>1pm</td>
<td>Lunch with friend who smokes</td>
<td>Good</td>
<td>4</td>
<td>2 cigarettes</td>
<td>Tell him I don’t smoke anymore</td>
</tr>
<tr>
<td></td>
<td>10pm</td>
<td>Last one before bed</td>
<td>Tired</td>
<td>3</td>
<td>1 cigarette</td>
<td>Listen to relaxation music</td>
</tr>
</tbody>
</table>

**Value:** 1 = I could do without it; 2 = I feel like it; 3 = I need it; 4 = I really need it; 5 = I’m desperate for it

You can download the ‘Smoking diary’ from www.quit.org.au
Quitting smoking

Just as people smoke for different reasons, the reasons why people want to quit vary as well. For example, some people want to quit because of the money they spend on cigarettes, some so they feel healthier, and others for the sake of their families.

People who have quit smoking say it’s important to be clear about your reasons.

“Know why you want to stop. It’s a gift you give yourself.”
— Jodie, 33

“My first attempt at quitting was for pregnancy and my newborn daughter. Eventually, after numerous attempts, I quit because I knew it was bad for me and I was using it as a crutch.”
— Cat, 32

“I find smoking has a negative impact on my exercise, which has been a major part of treating my depression. Being inhibited while exercising, due to smoking, effectively pushes my recovery backwards.”
— Bec, 20

“The cost of smoking is my biggest reason for giving up. If you calculate 40 cigarettes a day over 52 weeks and work out that I would have an extra $7,000 to spend a year — what a huge incentive for me.”
— Carol, 52

“Vanity was my main motivation for quitting — not health or money. You see, I wasn’t adjusting well to getting older and one day I saw an old lady [looked like she was in her 80s] smoking outside a shopping centre. I decided I didn’t want to be that sight.”
— Dale, 66

“I stopped enjoying it — I was often lethargic, plus smoking made me more anxious.”
— Vanessa, 26

Why do you want to quit?

Think carefully about why you want to quit smoking. There are many obvious reasons for quitting, but some will be much more important to you than others. If you work out why you want to stop smoking, this will give you a goal to focus on as you quit.
You could start by working out how much cigarettes cost you each week, and what you could do with the money you’d save by not smoking. Or think about your health. Is smoking stopping you from doing things that you enjoy and that might help to improve your mental health (such as exercise)?

It’s a good idea to list all your reasons and number them in order of importance. Print out your list and stick it on your fridge or another handy space as a reminder.

“Write down your reasons for quitting as you think of them. I finished up with 32 after starting with one. They all add to your resolve when it weakens for whatever reason. We had a saying at our quit support group, ‘If you have a problem and you light up a cigarette to help solve it, you will then have two problems, the original and now you are a smoker again’.”

— Dale, 66

Benefits of quitting

Here are just some of the benefits people who have quit smoking report:

**Mental health**

After a while you will be less stressed, feel less guilty, be able to think more clearly and feel more in control, as well as having a great sense of achievement.

**Physical health**

You will be in better overall health, breathe more easily, be better able to exercise, have more energy, have better skin and hair, and you will sleep better.

**Financial**

You will have more money in your pocket for day-to-day essentials, as well as treats.

**Social**

You will feel more comfortable spending time with others in smokefree environments, such as cinemas or cafes.
“Quitting helped my mental health. I had more control in my life and instead of having a smoke when things were bad, I talked and thought about what was wrong, and looked for solutions.” — Cat, 32

“Quitting made me healthier and able to breathe more easily, leading to me being able to exercise more and be more active. Plus, I had more dollars in the pocket!” — Graeme, 45

“It definitely improved my health. I was able to put a few words together without stopping to take a deep breath. I was able to walk a little further, but more important, I realised I could do anything I set my mind to. It enabled me to accept any invitation without wondering if there would be a ‘smoko break’. “ — Jackie, 76

“I was able to think a lot clearer and also slept better — and the headaches stopped. My sense of smell and taste returned. My stress levels reduced tremendously. I have a much better relationship with my husband and friends. I am in control of my emotions and deal with them accordingly without cigarettes. I joined a choir, which taught and enabled me to breathe much better. My time is my own, not time for a coffee and cigarette or time for a drink and cigarette or time for a smoke because some idiot upset me.” — Christina, 54

“When I exercise, I feel alive. I can take long, deep breaths right into my lungs and blow long hard fresh air back out. I love that feeling. I just completed my first ever mini-marathon — I would have been lucky to run 2kms straight in my smoking days.” — Amanda, 35

**Quitting and depression**

**Will it be harder for you to quit if you have depression?**

Studies show that people with depression want to quit and can quit. If you’ve had depression in the past, your chances of quitting for good are about the same as someone who has never had depression.

If you’re experiencing depression now it can make quitting more challenging, but with the right support you have a good chance of quitting smoking successfully. Depression may leave you with less mental energy to make changes to your life so you can cope without cigarettes. The encouraging news is that some of the strategies that help with improving mood are also very useful for quitting smoking e.g. relaxation, exercise, scheduling activities you enjoy. It’s a good idea to talk to your doctor, who will be able to provide advice and options about how to quit.
“Quitting was difficult, but it also allowed me to see the light at the end of the depression tunnel. Every day I went without one made me feel better and stronger.” — Liz, 35

“A lot of my anxiety and depression seemed to dissipate after a few weeks of quitting. There’s a whole lot of psychological stuff that goes on with smoking. I found it difficult to quit because my smoking was habitual, which fed my anxiety and depression. It’s really a vicious cycle that once you’re in, it can be hard to break.” — Vanessa, 26

Will quitting make your depression better or worse?

At the beginning, it can feel like not smoking is making your depression worse. It can be hard to tell the difference between nicotine withdrawal and symptoms of depression — mood swings or depression-like feelings are a normal part of withdrawal. If after quitting, you experience worsened symptoms of depression (every day for two weeks or more), see your doctor.

Quitting smoking can improve quality of life and reduce depression, anxiety and stress for both people with and without a mental health condition. These improvements are equal to or larger than those of anti-depressant treatment for mood and anxiety conditions. While mood improvements are usual, occasionally people do experience depression in the months after quitting smoking. Sometimes these feelings may be related to quitting, but often they’re not.

You could be more vulnerable to developing depression after quitting if:

- you’ve had symptoms of depression following previous attempts to quit
- you’ve had an increase in symptoms of depression just before quitting
- you’re in the process of changing your medication
- you have current or past problems with drugs and alcohol.

It’s important to talk to your doctor about any concerns you may have. Overall the benefits of quitting for people with depression are far greater than any possible risks of quitting.

“I don’t think that not smoking cigarettes improved my mental health. I think it was the internal work I did to decide I was worth it, and the stress management and dealing with the people in my life that were not really very good friends that made an improvement.” — Victoria, 30
Making a plan to quit

A good plan will help you to deal with situations and habits that might trigger the urge to smoke. If you’ve tried to quit before, it can be helpful to review the things that worked for you and the things that didn’t. You can use what you learned to improve your plan.

Many people see quitting as a private battle between themselves and cigarettes, but getting help increases your chance of success. There are many options available depending on your needs (see Ways to quit section on page 11). It’s a good idea to write up your plan — use the online tool at www.quit.org.au

When is the right time to quit?

Chances are, there will never be a magic moment or ‘right time’ to quit, but there are some times that are better than others.

If you have depression, it’s important to choose a time when you feel stable enough to make a plan and stick to it. Your doctor can assess your mental state and advise you about the right time to quit.

“‘If you are in some sort of crisis, I wouldn’t choose to stop right then. Pick a time when things are reasonably stable. Take it one day at a time. Find healthy ways to fill in time and take breaks from work or home or wherever smoking takes place.”
— Jeanette, 45

“You need to set aside a clear time to do this as it is very hard during a very social and/or stressful period. I wouldn’t suggest Christmas for example. Choose a time that is right for you.”
— Dale, 66

Setting a date to quit

Once you and your doctor have discussed whether this is a good time for you to quit, setting a date to quit is an important step in putting your plan into action.

• Pick a date that isn’t too far away — say within the next two weeks. This gives you enough time to prepare and can help keep you motivated.
• Choose an easy day to stop smoking. One when you will not be under much pressure, but will have plenty to occupy you.
• Take the date seriously. Don’t come up with excuses to change it.
• Try practising quitting before you quit completely — for example, trying quitting for one day to start with, or don’t smoke at times when you normally would.

“You need to get your head space right, you need to stop thinking of it like you are ‘quitting’ something — you’re not quitting anything, you are gaining a healthier, better way of living. You are simply stopping something you already know you don’t want to do.”
— Amanda, 35
Ways to quit

There are many ways to quit smoking. Finding your own strategy for quitting is important. Different things work for different people, and you may need to try more than one approach before you succeed. Knowing what has been proven to help people quit can help you develop your own quitting strategy that gives you the best chance at success.

Treatment and support

Quitting smoking is hard, but there is no need to do it alone. There are treatments that can help to reduce withdrawal symptoms and cravings, and support services to help you manage habits and emotions linked to your smoking.

Both coaching (professional support) and quitting medications (including nicotine replacement products) have been shown to increase quit rates. You have the best chance of quitting for good if you combine coaching (professional support) with a quitting medication.4

Coaching or professional support

A quitting coach gives you structure, motivation, support, new skills and confidence. It’s so much harder to get these things when you’re trying to quit on your own. The more times you’ve tried to quit and the less confident you are, the more coaching you’re likely to need. Good coaches include:

- Your doctor or psychiatrist

Your doctor can advise on the best time for you to quit and help you choose the most suitable quitting medications, many of which are now subsidised. Your doctor can also evaluate your depression, advise on treatments and help you manage your mood while you quit as well as check whether you are taking any medications that might be affected when you reduce or quit smoking. Some medications — including some antidepressant medications — are used more quickly by the body in people who smoke, so the dosage may need to be reduced when cutting down or stopping smoking. If you are taking any medication it is important to talk to your doctor about it.
• **Quitline 13 7848 (13 QUIT)**

The Quitline telephone service provides access to self-help resources, advice, support and confidential counselling for people who want to quit smoking. If you decide to use Quitline’s free callback counselling service, Quitline advisors will arrange to call you before and after your quit date at times convenient to you. Quitline may also be able to help coordinate care with your doctor.

**Quitting medications**

If you are addicted to nicotine [see page 2] you can increase your chances of quitting successfully by using quitting medications. Quitting medications reduce withdrawal symptoms such as cravings, irritability, mood swings and anxiety. Medications don’t usually stop all withdrawal symptoms. Most people’s smoking is also linked to habits and emotions, so you’re likely to get some cravings when you’re in situations where you used to smoke. Remember that getting support can help you handle these times and adjust to life without cigarettes. There are two kinds of medication:

- **Nicotine replacement products**

  These are available in the form of nicotine patches, gum, lozenges, inhalators, oral strips and mouth spray. (Nicotine by itself has not been shown to cause cancer. Because nicotine products do not have all the other dangerous chemicals in tobacco smoke they are much safer than smoking.) If you have strong cravings or withdrawal symptoms, you can use both the nicotine patch and 2mg gum (or the 2mg or 1.5mg lozenge, mouth spray, 2.5mg oral strip or inhalator) at the same time if you need to. If you smoke 15 or more cigarettes a day, using a pre-quitting patch for two weeks before your quit date can further improve your chances of success. For those who are not ready or unable to quit, the nicotine patches, gum, inhalator, mouth spray, oral strip or lozenge can be used while cutting down the number of cigarettes you smoke over six months before you stop smoking completely. Your doctor can provide you with a prescription to access discounted nicotine patches — this is much cheaper than buying them over the counter.

- **Prescription medications**

  There are currently two subsidised medications prescribed by doctors for stopping smoking: bupropion (brand names Zyban and Prexaton) and varenicline (Champix). These medications work for some people but are not suitable for everyone. Bupropion is also an antidepressant (but not used as such in Australia). Nortriptyline (Allegron) is an antidepressant, which may also help people quit smoking.
Individual strategies

Cutting down or going ‘cold turkey’?
For many people, cutting down smoking gradually lets them ‘practise’ ways to cope and deal with withdrawal symptoms before they quit completely. Others prefer going ‘cold turkey’, or giving up suddenly. There is no harm in trying to go ‘cold turkey’. If you are addicted to nicotine, cravings and withdrawal symptoms can be uncomfortable. It can help to have nicotine patches, gum or other nicotine products handy so you’re prepared. Consult your doctor or pharmacist about which products might suit you.

Coping with cravings

- Cut out triggers
Dealing with ingrained smoking habits, smoking with friends or other tempting situations can be a challenge for many people after they quit. Once you understand why you smoke, you can start to plan new ways to deal with ‘trigger’ situations. For example, meeting friends at smoke-free venues such as the movies or restaurants, avoiding smoking breaks at work and keeping your hands and mouth busy by chewing gum, playing with your mobile phone or sipping a bottle of water.

“I cut down slowly to very few... I stopped drinking alcohol as that was usually when I took it up again.”
— Jeanette, 45

“Willpower. I threw out all smokes and changed my daily habits associated with smoking.”
— Liz, 35

“I did not want to smoke past age 40. I tried once again with nicotine patches and this time they worked. Also, I did not put myself in situations where my then-partner was smoking, or around others who were.”
— Graeme, 45

“Don’t stop trying — persist even if you have to have 10 goes. Keep trying different methods, eventually you will find the right method and support that will work for you.”
— Amanda, 35
• **Distract yourself**
Keeping busy is a good strategy, as it stops you from thinking too much about smoking. Including different types of exercise in your life is a great way to distract yourself — make sure you choose exercise activities you find enjoyable. As your body recovers from smoking, you’ll also notice the benefits when you exercise.

• **Change your environment**
Make your environment ‘quitting friendly’, for example make your home and car smoke-free or have at least one smoke-free area for yourself, and ask others not to smoke around you.

• **Use the 4Ds**
Delay, Deep breathe, Drink water and Do something else. Most cravings only last a few minutes.

“Things that helped me quit were doing exercise — because it made me feel healthy and less inclined to smoke — and not hanging around smokers. I also found that if I avoided coffee and beer, then it was easier to quit because I was in the habit of drinking coffee or having a beer and having a cigarette.”
— Victoria, 30

“I avoided breaks with smokers, stopped smoking outside at home and avoided being outside with family members who smoked at social gatherings.”
— Christina, 54
Dealing with stress

Resisting cravings and learning new ways to cope without cigarettes will make you less likely to have strong cravings in future stressful situations.

- Exercise is a great stress buster. Make a plan that is realistic for you to achieve. Getting more exercise can be as simple as getting off the bus one stop before your destination or using stairs instead of lifts. Or try signing up for some group exercises or team sports.

- Write down the things that might make you feel stressed (for example, family, work, traffic). Then think about ways to combat these stressful moments, so that you don’t feel the temptation to smoke again.

- Make a change in your routine, such as getting up earlier or going for a morning walk. Instead of smoking when you’re stuck in traffic, take a soft rubber ball in the car to do hand exercises.

- Eat a healthier diet and include lots of healthy snacks. [See beyondblue’s Staying well booklet at www.beyondblue.org.au]

- Spend time with positive people who are supportive of you quitting smoking.

- Treat yourself to something that’s fun such as a weekend getaway, fishing, full body massage, or try something that you’ve wanted to do for a while, but have put off.

- Reduce or stop drinking alcohol for a while and try to halve your intake of caffeine (e.g. coffee, cola drinks, chocolate). Chemicals in cigarette smoke make your body get rid of caffeine faster. If you quit without reducing your caffeine intake, you will have higher levels of caffeine in your body which will make you feel restless, nervous or cranky.

- Relax and breathe. Regularly practising breathing or muscle relaxation exercises can really help reduce your stress levels.

“I thought about when I smoke the most and realised it was when I drank alcohol. I first gave up smoking with drinking, then I limited the number of cigarettes I had during the day starting with a limit of 15, to 10, to 7, to 5, to 3 and then ‘cold turkey’ after a period of a few weeks. I took up walking daily and continued also with my medications for anxiety and depression.”

— Gabrielle

“Keeping myself as busy as I can be is my main strategy for keeping my mind busy and that has helped me to quit — I am simply too busy to smoke.”

— Brian, 62
Think positive

- Tell yourself ‘I can quit’ or ‘I don’t need cigarettes’.
- Break your thought pattern about smoking. Stop thoughts that lead you to want to smoke. Focus your mind on something else, such as images, fantasies or how you are going to reward yourself when you quit altogether.
- Remind yourself of your main reasons for wanting to quit smoking.
- Think of the benefits of quitting and the positive changes it will provide in your life once you have stopped.
- Set short-term goals and take it one day at a time.

“I called the Quitline the final time I quit and it was obviously the best thing I could have done. I used positive thinking and reminders as to why I was quitting to help me. Also, changing environments both work and socially helped enormously.”
— Cat, 32

What to expect when you quit

The first few weeks after quitting smoking are usually the most difficult. It may take 8-12 weeks before you start to feel comfortable with being a non-smoker. One of the keys to quitting smoking is to acknowledge that smoking cigarettes is an addiction that can be managed and overcome. Withdrawal symptoms can make this a challenge — but remember that they are temporary and that quitting is possible for everyone. It can help to think of withdrawal symptoms as signs that your body is getting rid of the harmful chemicals that smoking has left in your body.

Nicotine withdrawal

As your body has developed a need for a certain level of nicotine, you will have withdrawal symptoms when you stop smoking. These may include feeling irritable or anxious, increased appetite and trouble sleeping. Some people also report coughing, mouth ulcers, dizziness or bowel disturbance. While these symptoms can be unpleasant and stressful, they are temporary. Most withdrawal symptoms peak 48 hours after quitting, most start to improve within two to four weeks and are completely gone within a few months. For some people, symptoms may fall and rise, or stay high for several weeks, and this can make quitting harder. If you are troubled by cravings or withdrawal symptoms, you can talk to a Quitline advisor (13 7848) for professional advice and support.

Cravings

 Few people can quit without feeling the urge to smoke. The first week after you quit is usually the hardest, as cravings can be more frequent and intense. People who do best at resisting the temptation to smoke learn different ways to deal with cravings [see prior Individual strategies section].
Emotional changes
It’s normal to feel sad, angry or confused in the first few weeks after quitting as you’re losing something that’s been part of your life for a long time. Try not to dwell on this and think instead of the benefits of quitting. These feelings usually pass, but if they persist for two weeks or more and you’re having difficulty coping, talk to your doctor or another health professional.

Appetite and weight gain
Craving for a cigarette can be confused with hunger pangs or a simple desire for the oral stimulation you’re used to getting from smoking. To keep any weight gain low, try to eat healthily, exercise and limit how much alcohol you drink.

“Quitting smoking doesn’t make anyone fat, eating does.” — Dale, 66

Slip ups
Preventing slip ups — Some common warning signs

• You keep thinking ‘Just one would be OK’ or ‘It’d be great to smoke just one a month or one a week’. That won’t work because tobacco is extremely addictive. Don’t let nicotine control you again.

• You’re really missing smoking and question whether quitting is worth the effort. Sometimes quitting can be really tough, but it won’t always be like this, you can get through it. Find other ways to treat yourself and keep doing things that you enjoy every day.

• You take puffs of other people’s cigarettes, but excuse it as ‘not really smoking’. It’s only a matter of time before you find yourself buying a pack. Ask your friends and family members not to give you cigarettes, no matter what.

If you slip up and have a cigarette
Don’t let one cigarette lead you back into full-time smoking. Think of how long you have gone without a cigarette and tell yourself ‘I am determined to quit. I have only slipped up once. In the past, I would have smoked 15 a day. I can get back on track and give it up’. It’s safe to keep using your quit medication and to keep trying to quit.
If you go back to regular smoking
Although you may be feeling disappointed, you should take pride in what you have achieved. Every day you spend smokefree makes your body healthier and helps to break your habit and weaken your addiction. Many people make several serious quitting attempts before they succeed in giving up for good. Try to maintain your motivation to quit — don’t think of your quit attempts as failures, think of them as practice runs for when you will quit for good.

Don’t give up
Think about what you have learnt and begin to plan for your next attempt. If you found withdrawal symptoms overwhelming within the first few weeks of quitting, think about trying patches or medication for your next attempt. If you got through the first few weeks, but slipped back into smoking later, think about what caused you to start again and how you might cope with that situation next time. Keep reminding yourself of the reasons you want to quit.

“I had a slip and found it difficult to cope with. I felt like I had failed myself and became depressed. I had to enlist the support of family to tell me not to despair. It was so important to treat that one cigarette as not a big deal — just a mere slip up and learning experience — and to still pat myself on the back for staying quit. That was extremely difficult.”
— Shell, 36

“If you don’t quit the first, second, third time, you aren’t a failure, you just haven’t done it yet!”
— Dale, 66

“When I smoked, I would continuously tell myself I was a failure each time I tried to stop and it didn’t work. It got to the point where I was fearful of trying in case I failed again. Now that I have stopped, I don’t have the negative self talk about smoking going on in my head and it has reduced the load that I have to deal with in my own mind.”
— Amanda, 35

“No matter how many times you have tried, it is always worth one more go. You can do it if you really want to, but do not feel that one slip means that the task is impossible, it means you have another chance.”
— Graeme, 45
Summary of advice

Write a list of reasons to quit
It’s a good idea to think carefully about exactly why you want to quit smoking, and write a list that you can look at often. This will help to motivate you along the way.

Plan how you will quit and choose the date
Talk to your doctor or other health professional about whether this is a good time for you to quit, and about strategies (including stop smoking medications) that might be best for you. If this is the right time, plan a quit date and stick to it. Prepare yourself mentally for this positive change in your life, and ask family members and friends for their help and support. People with depression can and do quit smoking for good — and you can too.

Use available support
Both coaching (professional support) and quitting medications (including nicotine replacement products) have been shown to increase quit rates. You have the best chance of quitting for good if you combine coaching with a quitting medication.

Find out what triggers your desire to smoke
Working out why and when you smoke will help you to change your routines so you can avoid situations where you would usually smoke.

Work out coping strategies
Think of some ways to make things easier for yourself as you quit. For example, change your routines to help break habits related to smoking, manage stress before it gets bad, and distract yourself to avoid things that trigger your desire to smoke. Keep busy, especially in the first few weeks when withdrawal symptoms are likely to be strongest. Remember that mood swings and sadness are normal signs of nicotine withdrawal. If they don’t go away and you’re concerned that your depression might be coming back, see your doctor.

Find healthy ways to fill the gap
Try out new ways to replace those things you felt smoking gave you. Try enjoyable and relaxing activities with the time and money you’ve saved from quitting. Once you find things that work, make them part of your regular routine.
Believe in yourself
Quitting successfully is more likely if you believe that you can quit, and that you and your health are worth the effort. Take it one day at a time, and reward yourself often.

Don’t give up trying to quit
You may have to try different strategies until you find one that works best for you, and it may take more than one attempt before you quit successfully. Never give up giving up, learn from past attempts, remember why you want to quit, and keep believing that you can do it.

“You can do it. Be kind to yourself and take it one day at a time. Do anything that makes you feel good about yourself. Be your own coach — have friends and loved ones support you — but be your own judge at a day-to-day level.”
— Gabrielle

“It’s not too late to take back your own life and be happy and healthy. Reward yourself every week, then every month, then every year. You will be surprised just how much money you have saved — and to think you were spending it to shorten your life instead of enjoying it.”
— Christina, 54

“Be mentally prepared. Be ready. THIS IS VERY IMPORTANT! Talk yourself up to it for a few months. Make sure your anxiety/depression symptoms are under control first. Make sure all your family and friends know you will need extra support. If you can, try to cut down the cigarettes to a minimum each day a few months before you quit. That will lessen the withdrawal symptoms. Understand this is a BIG DEAL so reward yourself accordingly.”
— Shell, 36

“Don’t try to quit by yourself. There are so many organisations out there to help with the quitting process, use them as they really do help.”
— Cat, 32
Helping a friend or family member to quit

The support of friends and family can be very important in helping a person with depression to quit smoking successfully.

It’s important to acknowledge the decision the person has made, the difficulties they may face in quitting and the encouragement they will need — even in the event of a relapse.

What is helpful?

- Volunteer to go out with them as a quitting buddy — to help keep them entertained and remind them of their goal to quit if they want a cigarette.
- If you smoke, offer to give up with the person so you can support each other.
- Help them to avoid situations where they will be in the presence of smokers — this may mean avoiding spending time with certain friends for a while.
- Help them to avoid ‘trigger’ situations.
- Avoid letting them get into stressful situations, or if this is not possible, help them to manage the stress.
- Be patient if they are irritable or sad, especially when they first quit.
- Suggest that you take up exercise together — join a team or start walking regularly.
- Be supportive and understand that it might take a few tries before they give up for good.

“I think the support I will receive from my family will go a long way to the success of quitting.”
— Michael, 37

“Don’t be offended if you can’t help with withdrawal symptoms. Be positive. Tell them you are proud of them all the time. Be prepared to be a friend, a counsellor, a slave, a punching bag and a teddy bear all in one! Try not to yell back if you get yelled at for nothing.”
— Shell, 36

“Support their endeavour. Cheer their successes, but don’t belittle their failures. Help is most needed if they have a setback, so be a supportive shoulder and remind them why they have chosen to quit and how successful they have been so far.”
— Cat, 32
“Accept that quitting smoking is a very difficult thing and don’t be pushy or aggressive, or even a pest in anyway relating to smoking or quitting smoking. Don’t be angry or a tease if the attempt does not last, but be ready to provide support again for future attempts.”
— Brian, 62

“If you have not smoked yourself, quitting is harder than you can readily appreciate. Not only is there the physical addiction, but also the social addiction as well. If someone you love is attempting to quit, they need your support and understanding, not blame. If they are attempting to quit, they know how bad it is for them and for you already, they don’t need more guilt, they already have enough.”
— Graeme, 45

“Provide support, ask how they are coping when they try to stop and if they fail say, ‘Oh well you tried, that’s the main thing, maybe next time’. Supporting someone who has just failed at an attempt to stop smoking is just as important as providing support prior to and during the attempt itself. Smokers will feel like a failure anyway and really don’t need friends and family saying that too.”
— Amanda, 35

“What is unhelpful?

It is unhelpful to:
• smoke in front of them or offer them cigarettes if you smoke
• blame them or express disappointment if they slip up
• take their moodiness and anger personally
• argue if they try to rationalise why they ‘need’ a cigarette — silence is often a more powerful message.

“Don’t be so hard on the person if they say they’re quitting smoking and then a day later, you find them with a cigarette in their mouth. The intention is there in that person, but they’re just still in the beginning phases of change. Be supportive and understanding towards them as they probably still need to smoke, but they will let it go when they are ready to.”
— Vanessa, 26
More information

Quit Victoria
www.quit.org.au
Facebook.com/quitvic
Information about smoking and how to quit that you can read, interact with and download.

Quitline
13 7848 (13 QUIT)
A confidential information and advice service for the cost of a local call (except mobiles). Professional advisors who understand how hard it can be to give up smoking provide strategies and support to help you quit.

QuitCoach
www.quitcoach.org.au
Free online tool that sends personalised support direct to your computer. It does this after you have answered some questions about your lifestyle and your smoking. QuitCoach can help you before, during and after you quit.

My QuitBuddy app
My QuitBuddy is a free personalised interactive app to help you get, and stay, smoke free. It’s with you through the hardest times with helpful tips, motivational messages and distractions to overcome cravings; tracking systems to chart your progress and all the facts you need to understand the impact smoking has on your health. Download the My QuitBuddy app from the online Apple iTunes or Google Play stores.
References


HOPE. RECOVERY. RESILIENCE. Find out more at www.beyondblue.org.au
Where to find more information

beyondblue
www.beyondblue.org.au
Learn more about anxiety, depression and suicide prevention, or talk through your concerns with our Support Service. Our trained mental health professionals will listen, provide information, advice and brief counselling, and point you in the right direction so you can seek further support.

1300 22 4636
Email or chat to us online at www.beyondblue.org.au/getsupport

Lifeline
www.lifeline.org.au
13 11 14
Access to crisis support, suicide prevention and mental health support services.

Head to Health
headtohealth.gov.au
Head to Health can help you find free and low-cost, trusted online and phone mental health resources.

Donate online www.beyondblue.org.au/donations