

HIV and Smoking

It's time to live

People with HIV or AIDS are living longer, healthier lives. But, a lot of people with HIV or AIDS – between 60% and 70% – still smoke cigarettes. If you have HIV or AIDS and you smoke, you put a lot of extra stress on your body. Smoking can lead to many serious health problems – like lung cancer, stroke, and heart disease. Quitting is one of the biggest steps you can take to stay healthy.

This booklet shows how HIV and smoking work together to harm your body. It explains how your health gets better as soon as you quit smoking and gives you advice on how to quit.

How HIV and Smoking Harm Your Body

Smoking harms more than just your throat and lungs — it hurts your heart, your blood flow, and many other parts of your body. Smoking is more harmful to people with HIV than it is to people without HIV. Here are some of the ways that smoking can affect your body when you have HIV.

Mouth sores /mouth cancer

People with HIV may get sores and infections (like thrush) inside the mouth and on the tongue and lips. Smoking makes these worse and can cause dental problems, gum disease, and mouth cancer.

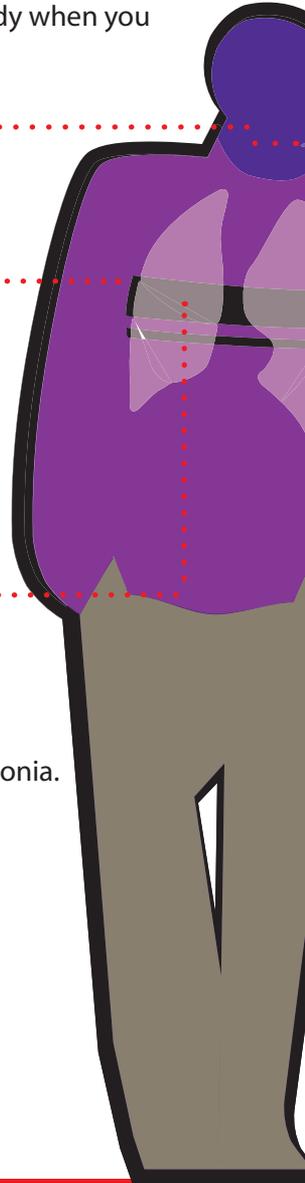
Immune system

HIV medications can help make your immune system stronger so that you don't get sick. But smoking weakens your immune system and makes it harder to fight off sickness.

Lung diseases/lung cancer

People with HIV who smoke get lung cancer, bronchitis, and other lung infections more than smokers who do not have HIV. Smokers are also at greater risk for pneumonia (new-mone-ya) and pneumocystis (new-mo-sist-iss) jiroveci pneumonia.

A “risk factor” means anything that increases your chances of getting a disease.





Emphysema (em-fa-zee-ma)

People with HIV who smoke are more likely to get emphysema. This disease hurts the walls of the lungs and makes it hard to breathe. It may lead to other lung infections that can cause death.

Heart and blood flow problems

HIV medications can raise the amount of fats and cholesterol in your blood. Fats and cholesterol clog your blood flow, raise blood pressure, and put more stress on your heart. This can raise your chances of heart disease, a heart attack, or a stroke. Smoking can make all these problems worse.

Problems for women

Women with HIV who smoke have a greater risk of getting human papillomavirus (HPV), which can cause cancer of the cervix. Smoking during pregnancy increases the risk of your baby dying or having serious health problems.

Other illnesses and cancers

Smoking damages the stomach, kidneys, liver, pancreas, and bladder. If you have HIV and hepatitis C, smoking can be very harmful to your liver.

What You Put into Your Body When You Smoke

Cigarettes have about 4,000 chemicals. Many of them can cause serious health problems, including cancer. Cigarettes also contain nicotine. Nicotine does not cause cancer, but it makes you addicted to smoking.



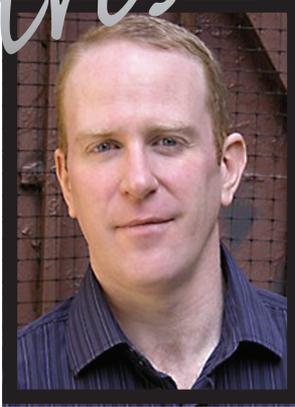
Smoking and Stress:

"This is how I deal with my HIV"

Being HIV-positive can cause stress, anxiety, and depression. You may feel that smoking helps you relax and it takes your mind off these things. It helps you to cope with the stress of being HIV-positive. But smoking affects the "big picture" of your health. If you can quit smoking, you can take a big step toward staying healthier.

Everyone Loves a Quitter:

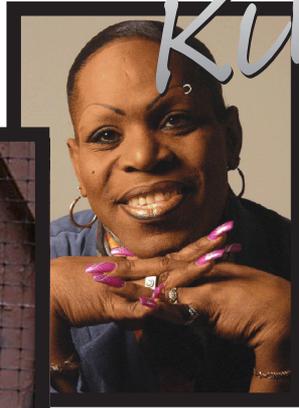
Chris



"I was diagnosed with HIV in 1989 when I was 22 years old. It was tough to come to terms with having HIV. But I started working with a doctor, quit smoking, and joined support groups. After five or six years, I went back to smoking again. I knew I was harming myself, but so many of my friends with HIV smoked, I figured it was OK."

"When I learned more about the health effects of smoking on people with HIV, I decided to quit again. It was hard. I cut down over several months and then quit, with a lot of support from people who cared about me and from other HIV-positive smokers who were quitting. I've been smoke-free for three years now and I feel great!"

Kim



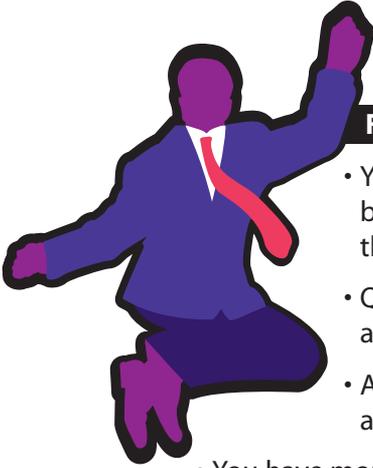
"When I found out my HIV diagnosis in 1987, I was still smoking — doing what made

me happy and what 'looked good' to me. I continued to smoke for 15 years. But in 2002, I began having problems with my breathing. After several visits with my doctor, she gave me two choices: either quit smoking or run the risk of dying."

"That advice convinced me to learn more about the HIV virus and health problems related to smoking. Then I quit 'cold turkey.' I've been smoke-free for three years and six months. Being smoke-free and having a great network of friends in my life helps me to stay healthy and keep a positive attitude. As someone who's active in the transgender community, I want to give back and help those who want to kick the habit."

Quitting is Good for Your Body

Here's how quitting smoking can help you and the people around you:



For You

- Your immune system and blood flow get better within three months.
- Quitting gives your HIV medications a chance to work better.
- After one year, your risk of dying of a heart attack is cut in half.
- You have more energy, fewer colds, less sickness.
- You have a better sense of taste and smell.
- It saves you a lot of money: a pack a day habit costs \$1,300 to \$1,500 a year.

For Family and Friends

- It protects their health. People who breathe smoke from others are more likely to get lung cancer and heart disease than people who aren't around smokers.
- It protects kids from getting asthma and other breathing problems — and sets an example for them, too.
- You can do more things together, like exercise and go to non-smoking places.



Getting Ready to Quit

Smoking is an addiction and quitting may be very hard. It takes most people several tries to quit for good. For some people, it can be as strong as being addicted to any drug or alcohol. You can do it if you are well prepared. Here are some steps to help you plan how to quit and stick to it.

1. Are you ready to quit?

You have a better chance of quitting if you are ready and really want to quit. Come up with a plan first. Make a list of all the reasons why you want to stop and all the things you will do instead of smoking.

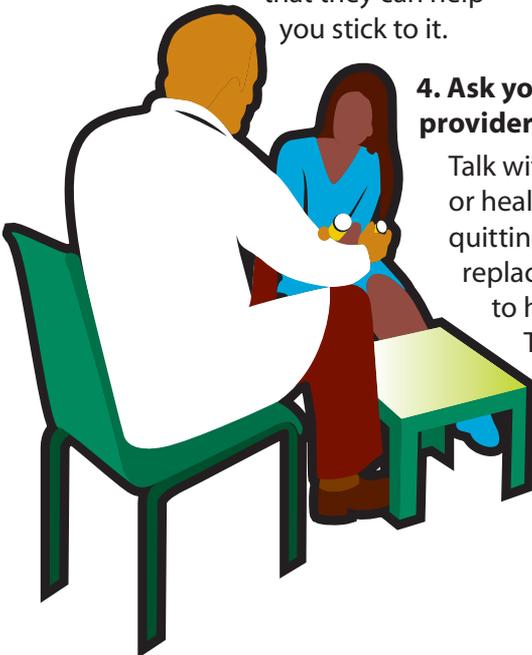
2. Pick a quit date.

Pick a date on the calendar about a month from now. Give yourself time to get ready to quit on this date.



3. Get help from family and friends.

Tell your family, friends, and people you work with about your plan so that they can help you stick to it.



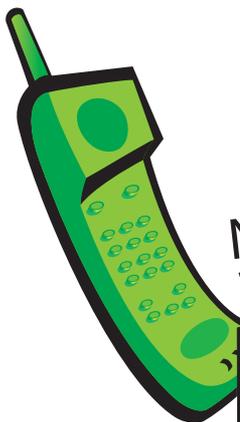
4. Ask your doctor or healthcare provider for help.

Talk with your doctor, case manager, or healthcare provider about quitting. They can explain nicotine replacement and other treatments to help you quit smoking.

They can also refer you to a counselor who helps people quit smoking.

Tips for **Sticking with Your Plan** to Quit

- Get all ashtrays, cigarettes, or other things that remind you of smoking out of your home, car, and workplace.
- Don't let people smoke in your home. Ask smokers not to smoke in front of you.
- Try to avoid alcohol, coffee, or other things you used to do while smoking.
- Your body will go through many good changes, like breathing easier and having a better sense of taste and smell. Some changes may make you feel very uncomfortable — like cravings (when you really want a cigarette), coughing, things getting on your nerves, or having trouble thinking clearly or sleeping. These effects will not last a long time.
- When you feel the need to smoke, do something to take your mind off it — try deep breathing, take a walk, or do something to stay busy.
Call a friend or family member who will listen and give you support.
- Give yourself a reward: take a calendar and cross off the days since you have quit smoking.



New York State Quitline
1-866-697-8487



What's **the Best Way** for People with HIV to Quit Smoking?

A lot depends on how ready and willing you are to quit. People with HIV may need extra help to quit because they take medications and have special health care needs. Heavy smokers (a pack a day or more) may have a harder time quitting. Here are some of the ways to quit smoking.

Go “cold turkey.”

If you can quit right away by yourself, you have a lot of will power. Most people have better success at quitting and sticking with it if they use nicotine replacement, medication, and counseling.

Nicotine replacement therapy

Nicotine replacement gives you small amounts of nicotine until you get over the craving. The nicotine will not harm you like the nicotine you inhale from cigarettes. You are not supposed to smoke while you use nicotine replacement.

There are four types of nicotine replacement:

1. **Nicotine patch.** This goes right on your skin, like a band-aid. It puts the nicotine in your body in small amounts until your cravings go away. The patch is sold over-the-counter or by prescription.
2. **Nicotine gum or lozenge.** You chew the gum or lozenge each time you have a craving. It is sold over-the-counter or by prescription.
3. **Nicotine nasal spray.** You spray it into your nose. It is sold over-the-counter or by prescription.
4. **Nicotine inhaler.** You breathe this right into your mouth. Inhalers are not sold over the counter. You need a prescription from a doctor.



Medications to Help You Quit

There are two medications (pills) that can help you quit smoking. You need a doctor's prescription for both medications.

Zyban® (bupropion) is a nicotine-free pill that is used to treat anxiety and depression. It can help lower your cravings for cigarettes and relieve the anxiety and restlessness you feel when you try to quit. Zyban® can be used with nicotine replacement products.

Chantix® (varenicline) is a medication just for helping people quit smoking. It reduces your cravings for cigarettes and relieves the withdrawal symptoms you feel when you try to quit. If you smoke a cigarette while taking Chantix®, there is no "feel good" rush.

Medicaid and ADAP Pay for Quit-Smoking Products

- Medicaid pays for Zyban®, Chantix®, and all nicotine replacement products (except lozenges).
- Medicaid pays for one "course" of stop smoking treatment, twice a year. It covers the prescription plus two refills.
- ADAP (AIDS Drug Assistance Program) pays for nicotine nasal spray and nicotine inhalers.
- You need a prescription for all products – even for over-the-counter nicotine replacement. Talk with your doctor or pharmacist to decide which treatment is right for you.

Counseling

If you take HIV medications and you see a doctor or other healthcare provider, they may give you advice and support to help you find a counselor who helps people quit smoking. A counselor may give you the extra help you need to quit smoking and stay with it.

The New York State Smokers' Quitline (1-866-697-8487) can give you a list of counselors, including those who speak Spanish.

If at First You Don't Succeed – **Try Again!**

If you find it hard to quit the first time, you are not alone. Many people need several tries to quit. If you go back to smoking, try to figure out why you went back and learn from your mistakes. Don't give up hope — set a new quit date and get back on track! Millions of people have quit smoking.

You can do it, too!



For **More Help** to Quit Smoking

New York State Department of Health

Smokers' Quitline

1-866-NYQUITS (1-866-697-8487)

www.nysmokefree.com

The Lesbian, Gay, Bisexual, and Transgender (LGBT) Community Center (NYC)

LGBT SmokeFree Project

212-620-7310

www.gaycenter.org

National Cancer Institute

(and other federal agencies)

1-800-QUITNOW (1-800-784-8669)

www.smokefree.gov

American Cancer Society

1-800-ACS-2345

www.cancer.org

American Lung Association

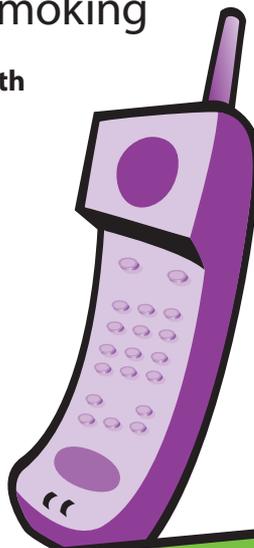
1-800-LUNG-USA

www.lungusa.org

Centers for Disease Control and Prevention

Office on Smoking & Health

www.cdc.gov/tobacco



To view and download HIV/AIDS educational materials or place orders, visit the New York State Department of Health website at www.nyhealth.gov/diseases/aids/publications or call (518) 474-9866 or email HIVPUBS@health.state.ny.us.