

Sex and Cigarettes

Why is it Harder for Women to Quit Smoking?



It's never too late to quit smoking.

Regardless of your age, the risk of heart disease and stroke decreases up to 50 percent in the first year after quitting. By 15 years, your risk of coronary heart disease is the same as a nonsmoker.

If you quit before turning 40, you can reduce your chance of dying early from smoke-related diseases by about 90 percent. Quitting between the ages of 45 and 54 reduces premature smoke-related death by about 66 percent.

Quitting smoking reduces the risk of developing and dying from cancer. Even if you already have cancer, quitting smoking can improve the effectiveness of treatments, lower the risk of further tumors, and increase rates of survival. 11,12

The most important thing in fighting an addiction is to not give up. You owe it to yourself.



I'm a woman. Why should I quit smoking?

Smoking is the leading cause of preventable death and illness in the United States, killing more than 480,000 Americans each year.¹ And studies have shown that women are more susceptible to tobaccorelated health conditions such as cardiovascular disease, respiratory disease, and stroke.

Since 1987, **lung cancer has surpassed breast cancer** as the number one cause of cancer death for women.

Women who smoke **experience increased risks** of cervical cancer, lower bone density, estrogen deficiency disorders, menstrual cycle disorders, conception delay, infertility, and pregnancy complications.²

The 10 percent of pregnant women who smoke **put their children at increased risk** for poor fetal growth, low birth weight, and birth complications. Secondhand smoke puts children at increased risk of Sudden Infant Death Syndrome, lower respiratory tract infections, ear infections, and asthma. 4

Children are more likely to smoke if one of their parents smokes.5

The **cost of smoking** a pack of cigarettes a day at the national average of \$7.26 a pack will add up to \$2,643 a year, or \$26,430 over 10 years.⁶

WHAT COULD YOU DO WITH \$26,430?











10 Years of Smoking



Do women smoke for different reasons than men?

While men might smoke to satisfy a craving for nicotine, women smoke more to manage their moods.

People with depression are more likely to smoke, and depression affects twice as many women as men. Women may also be more vulnerable to depression following an attempt to quit smoking.

Women are more likely to smoke (or to restart smoking after a quit attempt) when facing stress.⁷

Because smoking suppresses appetite, women often smoke to control their weight.⁸



Why do women have a harder time quitting?

First-line smoking cessation medications using nicotine replacement, such as the nicotine patch, do not appear to work as well for women as for men.

The patch helps men satisfy their craving for nicotine and ease biological symptoms of withdrawal from nicotine dependency.

But for women, just treating nicotine withdrawal does not help reduce negative moods, enhance positive moods, or manage stress, appetite, and weight.



BECAUSE MEN AND WOMEN SMOKE FOR DIFFERENT REASONS, JUST TREATING NICOTINE WITHDRAWAL ALONE IS LESS EFFECTIVE FOR WOMEN.

The relationship between stress and smoking appears to be stronger in women than men, leaving women less able to quit or more likely to restart smoking after stressful events such as a financial setback.⁷

Women are more likely to be concerned about gaining weight if they quit, which reduces their motivation to quit and increases their likelihood of a relapse to smoking after a quit attempt.8

Nicotine withdrawal symptoms are more severe during the last two weeks of the menstrual cycle.9

Women have less social support from husbands and partners for quitting.



What do women need to know about quitting?

Research has shown that the prescription medication varenicline (Chantix) is equally effective in helping men and women quit smoking and even more effective for women earlier in a quit attempt.¹⁰

Varenicline does not contain nicotine but works by blocking the pleasurable effects of nicotine in the brain.

Women are more likely to relapse after a quit attempt, and relapses tend to occur soon after the beginning of a quit attempt. The earlier effectiveness of varenicline in women can help women get over that hump toward successfully quitting.

Women should accept that gaining a few pounds is a normal part of quitting smoking. In a study evaluating women who either dieted during smoking cessation or who talked with a counselor about accepting a few pounds of weight gain, researchers found that the women who accepted the weight gain actually gained the least amount of weight and were more successful in quitting. 8



How can I quit or help another woman to quit?

Talk with your health care provider or call a quit line to discuss whether a smoking cessation medication might be right for you.

Consult the federal government's online resources, including detailed quit plans and a phone app: http://smokefree.gov.

Figure out whether your mood seems to be helped by your smoking, and consider how you might differently manage your negative moods.

Conquer your fear of weight gain, and accept that maybe gaining a few pounds will be worth it. Trying to diet while quitting can hurt your chances of success, but exercise can help.

If your craving for cigarettes differs across your menstrual cycle, try quitting at a point when your cravings are the lowest.

Enlist the support of family and friends.

Limit your drinking of coffee or alcoholic beverages, which can increase cigarette cravings when quitting.

The National Cancer Institute Quit Line 1-877-44U-QUIT (1-877-448-7848)



What if I've tried to quit and couldn't?

Smokers often have to try to quit several times before they are

successful. Try to identify the reason why you went back to smoking so you can address it. ☐ Were the withdrawal symptoms uncomfortable? Next time, you might try medication. ☐ If you tried a medication, make sure you followed the prescribing instructions to the letter. Or try combining the medication with support from a Quit Line counselor. ☐ If you followed prescribing instructions and it didn't work for you, maybe try another type of medication with the help of your health care provider or a Quit Line counselor. ☐ If you gained weight, maybe next time accept this as a normal part of quitting or try adding exercise. ☐ If you were unable to manage stress without smoking, maybe next time try other ways to reduce stress, such as exercise. ☐ If someone in your life kept offering you cigarettes, maybe next time let that person know you are serious about quitting and ask for his or her help to please avoid offering cigarettes.

References:

- Centers for Disease Control and Prevention. Current cigarette smoking among adults United States, 2005–2014. Morbidity and Mortality Weekly Report 2015;64(44):1233–40.
- U.S. Department of Health and Human Services. The health consequences of smoking 50 years of progress: a report
 of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and
 Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.
- Centers for Disease Control and Prevention: http://www.cdc.gov/reproductivehealth/maternalinfanthealth/ tobaccousepregnancy/
- Centers for Disease Control and Prevention. Secondhand Smoke (SHS) Facts: www.cdc.gov/tobacco/data_statistics/ fact_sheets/secondhand_smoke/general_facts/index.htm
- 5. Vuolo, M, Staff, J. Parent and child cigarette use: a longitudinal, multigenerational study. Pediatrics. 2013. 132(3):e568-e577.
- 6. The Awl: http://www.theawl.com/2015/08/what-a-pack-of-cigarettes-costs-in-every-state
- McKee SA, Maciejewski PK, Falba T, Mazure CM. Sex differences in the effects of stressful life events on changes in smoking status. Addiction. 2003;98(6):847–855
- Perkins KA, Marcus MD, Levine MD, D'Amico D, Miller A, Broge M, Ashcom J, Shiffman S. Cognitive-behavioral therapy to reduce weight concerns improves smoking cessation outcome in weight-concerned women. Journal of Consulting & Clinical Psychology. 2001;69(4):604-13.
- Carpenter MJ, Upadhyaya HP, LaRowe, SD, Saladin, ME, Brady, KT. Menstrual cycle phase effects on nicotine withdrawal and cigarette craving: a review. Nicotine & Tobacco Research. 2006; 8(5):627-638.
- McKee SA, Smith PH, Kaufman M, Mazure CM, Weingberger AH. Sex differences in varenicline efficacy for smoking cessation: a meta-analysis. Nicotine & Tobacco Research. 2015. Oct 6 pi:ntv207. [Epub ahead of print]
- 11. World Health Organization. Tobacco Free Initiative: http://www.who.int/tobacco/quitting/benefits/en/
- 12. National Cancer Institute. Harms of cigarette smoking and health benefits of quitting: http://www.cancer.gov/about-cancer/causes-prevention/risk/tobacco/cessation-fact-sheet

Women's Health Research at Yale

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