Smoking & diabetes



— ADVICE FOR — SMOKERS WITH TYPE 1 DIABETES

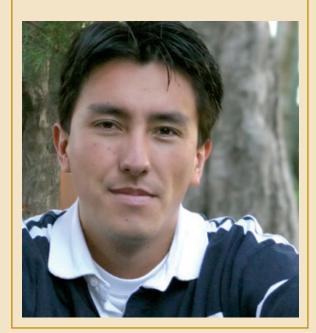
You've heard that smoking is bad for you. Did you know that smoking is even more harmful for people with diabetes?

This brochure tells you how smoking affects people with Type 1 diabetes.

Smoking adds to the stress on your body. If you don't smoke, you will manage your diabetes better.

Quitting may not be easy, but it could be the best thing you can do to prevent or reduce the complications of diabetes.

We suggest ways to quit, and where to get more help if you need it.



What smoking is doing to you

Smoking damages all people who smoke. However, for people with another illness, such as diabetes, asthma or high blood pressure, smoking worsens symptoms and makes the illness harder to manage.

Smoking can bring on illness associated with diabetes earlier, causing disability and death.

Young adult smokers with diabetes are two to three times more likely to be sick than non-smokers with diabetes.

Quitting smoking is one of the best things you can do to manage your diabetes and stay healthier for longer.

Many ill effects of smoking are reversible, but some damage can be permanent. The earlier you quit, the better for your health.

It is important to see your doctor and/or diabetes educator before quitting. Stopping smoking can affect how well you absorb insulin and your dose may need to be monitored or changed. Also, you should tell your doctor if you have suffered from a mental illness, including depression, or are taking any other medication.

Where possible we have included research on the recovery of people with Type 1 diabetes after quitting smoking. But there are many gaps in the research so some of the following information on the benefits of quitting is based on studies of the general population.

Your diet

Try not to think of smoking as your one treat or 'vice'. Even though you may eat well, smoking greatly increases the risk of the diseases you are trying to avoid through good management of your diet.

Your blood glucose level

Smoking may reduce how well insulin works. Research shows that smokers with diabetes may need a larger dose of insulin than non-smokers to control their glucose levels.

People who smoke tend to have less control over their blood glucose level, and are more likely to suffer from levels that are too high or too low. After you quit, your control over your blood glucose levels can become similar to a person with diabetes who has never smoked.

Your heart and blood

People with diabetes who smoke are more likely to die from heart disease than non-smokers with diabetes. Smoking makes your blood vessels and blood cells sticky, and allows dangerous fatty material to build up. This can lead to heart attack and stroke.

Smoking puts stress on your heart. Every time you have a cigarette, nicotine temporarily increases your heart rate and blood pressure. Your small blood vessels narrow reducing the blood flow and your skin temperature drops. As well, carbon monoxide replaces some of the oxygen in your blood, so it's harder for your heart and body to get the oxygen it needs.

Smoking reduces the good cholesterol in your blood. Your blood becomes thicker (more syrupy) and more likely to clot. Smoking also suppresses your immune system, so you are more vulnerable to infections.

Smoking increases oxidative stress, which is associated with diabetic complications. Oxidative stress is caused by highly reactive 'free radical' chemicals from cigarettes smoke that attack fats, proteins and DNA.

When you quit smoking, you immediately remove a big source of oxidative stress from your body. Within two days, almost all nicotine and carbon monoxide from cigarettes is out of your bloodstream. Your heart and muscles can take up oxygen more easily.

Over the next few months:

- your immune system improves
- your good cholesterol level increases
- your blood becomes less thick and 'sticky'
- the flow of blood to your hands and feet improves

Quitting reduces your risk of heart disease and stroke compared to a continuing smoker.

Your eyes

Both smoking and diabetes damage the eyes. If you smoke, you increase your risk of eye disease that can lead to blindness.

Quitting smoking quickly reduces the oxidative stress that can harm your eyes. It also reduces your risk of developing eye disease.

Your circulation

People with diabetes are more likely to have poor circulation in their feet and legs. Smoking also affects blood flow, increases the risk of blood clots and narrows the small blood vessels. Over time, smoking causes the build up of fatty material on your artery walls, leading to peripheral vascular disease (PVD). If you have diabetes and smoke, you are much more likely to get PVD.

PVD can be painful. It can eventually lead to gangrene, and some people must have a limb or limbs amputated.

Quitting smoking will reduce your risk of developing PVD. The longer you have quit, the lower your risk of developing symptoms of PVD.

For people who develop symptoms of PVD, quitting slows down the progress of the disease. Compared to smokers, people who quit have less pain, they live longer, respond better to treatment, and are less likely to need amputation.

It is necessary to quit completely as even smoking one or two cigarettes a day immediately affects your circulation and can affect treatment.

Your kidneys

Smoking increases the risk of developing kidney disease (nephropathy).

Symptoms of kidney disease are more common in smokers with diabetes than non-smokers with diabetes. This disease can lead to kidney failure and death.

Quitting smoking helps prevent the development of kidney disease.



A cross section of a healthy blood vessel.



Fat deposits have reduced the space inside the blood vessel by three quarters.



The vessel is blocked by a clot.

Your nerves

For people with diabetes, smoking increases the risk and progression of nerve damage (neuropathy). This can lead to numbness and pain in your arms and legs.

Smoking may also add to nerve damage in your heart, blood vessels, digestive system, sex organs and eyes. This can lead to problems such as dizziness on standing, diarrhoea and poor bladder control.

Long-term smokers have a greater risk of developing neuropathy. This suggests that quitting smoking as early as possible gives you the most benefit.

Your sex life (male)

If you are male and smoke, you are more likely to suffer from impotence and erection problems, even in your 30s and 40s. Diabetes further increases your risk of erection problems. The longer you smoke, the greater the risk of erection problems.

Quitting smoking can help prevent erection problems, particularly in younger men.

Your teeth

Smoking causes peridontal disease, which can lead to infected swollen gums and loss of jawbone. Smokers are more likely to have tooth decay and lose their teeth.

Quitting smoking reduces your risk of peridontal disease and helps your body to fight infection.

More reasons to quit

Quitting reduces your risk of cancer, lung diseases such as emphysema and chronic bronchitis, and early death compared to a continuing smoker. It helps prevent loss of bone density (osteoporosis) and hip fractures. Women who quit increase their fertility and ensure a healthier pregnancy.

Within months your lungs will be healthier. You'll also smell fresher, save money, and feel that you've accomplished something that gives you more control over your life.

Remember the earlier you quit, the more you gain.

Cutting down is not an alternative to guitting

Cutting down the number of cigarettes you smoke does not reduce the main risks from smoking. Only stopping smoking completely gives you major health benefits.







Planning to quit

Getting started

Some people see quitting as a private battle between themselves and cigarettes. But getting help is not a sign of weakness or lack of will power – it's a smart way to quit.

Quit provides simple and detailed information including tips for quitting, coping with setbacks and what services can help you. Phone the Quitline on 13 7848 (13 QUIT) and ask for the free booklets that will help you make your quitting plan, or ask to speak to a Quitline advisor.

Your quitting plan

There are two types of help to include in your plan:

• Get some coaching

A coach gives you structure, motivation, support, new skills and confidence.

Getting a coach will give you a much greater chance of long-term success.

Use quitting medications

These products are suitable for nicotine addicted smokers.

Quitting medications reduce withdrawal symptoms such as cravings, irritability, mood swings and anxiety.

Here are some good coaches

Call a Quitline advisor 13 7848 (13 QUIT)

Quitline advisors offer help with quitting for the cost of a local call. Your Quitline advisor is trained and experienced and knows how tough quitting can be. They will talk with you about your difficulties in quitting and will give you reliable information and support.

Your call is confidential. This means you don't have to give your name if you don't want to. You can talk with your Quitline advisor once or as many times as it is helpful. You can arrange to have a Quitline advisor call you: this has been show to be very effective in helping smokers quit and stay quit.

Go online with the QuitCoach www.quitcoach.org.au

The QuitCoach asks you questions and then gives you ideas and suggestions to suit your lifestyle and where you are at with your smoking.

The QuitCoach helps you before and after you quit. It is best used several times to help guide you through the stages from quitting to becoming comfortable as a non-smoker.

It's confidential and interactive.

Talk to your doctor, diabetes educator or other health professional

Some health professionals have been trained to help people quit. For example, your doctor, dentist, pharmacist, psychologist, community health nurse or cardiac rehabilitation nurse may be trained to help you.

It is useful to talk to your doctor and/or diabetes educator before you quit smoking. They may want to see you for regular health checks and monitor your insulin dose or blood pressure after you quit. You need to see a doctor if you want to use prescription quitting medications.

Would quitting medications help you?

Do you

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

These are signs of nicotine addiction. The more signs you have, the more help you will get from quitting medications.

There are two kinds of quitting medication:

- nicotine replacement products (nicotine patch, gum, lozenge, inhalator and mouth spray) which are widely available.
- prescription medication like varenicline (Champix).

If you have diabetes, it is important that you talk to your doctor first before you take any quitting medications. You can discuss which would be the most suitable for you. Your pharmacist can tell you more about these products.

Managing your weight

Some smokers with diabetes say they smoke to keep their weight down. However, smoking doesn't help you lose weight, and the weight difference between smokers and non-smokers is small and only apparent among older people.

However, weight gain after quitting is a concern for some people. Different people gain different amounts of weight due to stopping smoking.

Even if you gain weight after quitting, you still reduce your risk of heart disease and stroke compared to continued smoking. This is because many of the harmful effects that smoking has on the heart and blood vessels stop or lessen after you quit.

Research also shows that the average weight of long term former smokers is similar to people who have never smoked.

What you can do

You can take action to help keep weight gain low. Take some time to think about what you are prepared to do and how to make these changes part of your lifestyle. Making small changes each week can be easier and more lasting than making a lot of changes at once.



If worrying about weight gain is stopping you from quitting, talk to a health professional who can help you:

- get advice for the issues that are important to you
- make a healthy eating and exercise plan that suits your lifestyle.

See your diabetes educator or your doctor who can also refer you to a dietitian. You can also find a dietitian at the Dietitian Association of Australia website www.daa.asn.au.

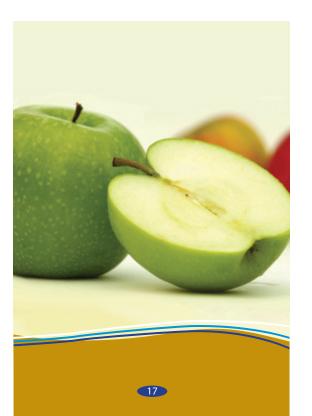
Tips to help manage your weight

- Use the time and money you've saved by not smoking to plan and cook tasty, healthy meals.
- Don't try to stick to strict calorie control diets.
 Constant bouts of hunger can undermine your success at quitting.
- Try not to miss meals, especially breakfast.
- Prepare some healthy snacks, such as raw vegetables (carrots, celery), sugar-free milk products and fruits.
- Find other ways than eating to distract yourself from cravings and withdrawal symptoms, such as listening to music, talking to a friend, drinking water, doing puzzles, or counting to 100. Experiment until you find things that work for you.
- If you use food to help you deal with feelings, such as depression or loneliness, try other activities that make you feel better.
- Emotional eating and "binge" eating can sometimes be difficult to deal with by yourself. For help and support, consider seeing a health worker who specialises in people's relationships with food, such as a psychologist.

 Do some exercise you enjoy. This can help keep your weight down and can also help you beat cravings.

Some more good food habits from a diabetes dietitian:

- Eat more food with fibre such as green vegetable, peas, beans and lentils.
- Flavour food with spices, herbs and garlic.
- Use a variety of cooking oils.
- If possible eat fish two or three times a week.
- Eat fresh fruit instead of artificially sweetened desserts.
- Eat less cheese, rich sauces, and take-away food high in fat, sugar and salt, such as pizza.
- Try to avoid potato chips, French fries, olives, peanuts and salted biscuits.



Managing stress

Some people say that smoking calms their nerves and helps with stress. Nicotine may make your brain feel more relaxed, but your body is put under stress from the chemicals in cigarette smoke.

Quitting can be stressful for some people in the first month or so. This may be partly due to coping with withdrawal symptoms. Also, it takes time to settle into new routines and become more comfortable with new ways of managing without cigarettes. However, other people have a more positive experience of stopping smoking and feel more satisfied.

A few months after quitting, most people tend to feel better than, or as good as, when they were smoking.

For practical help with stress during and after quitting, ring the Quitline (13 7848). You can talk to an advisor about your situation or order a quit pack which includes the self-help quitting guide *Quit because you can*.

Talk to your doctor about using medication to help reduce withdrawal symptoms. Quit's brochure *Choosing the best way to quit* provides information to help you choose a medication to suit you.

Choosing the best way Quit because you can

► Call Quitline 13 7848 (13 QUIT) for a free copy of *Quit because you can* and *Choosing the best way to quit.*

There is help available

Quitline 137848 quit.org.au

TRY THE 4DS

Delay acting on the urge to open a pack and light a cigarette.

After a few minutes, the urge to smoke weakens, especially if you do the following:

Deep breathe.

Take a long, slow breath, and let it out slowly. Repeat three times.

Drink water.

Sip it slowly, and hold it in your mouth to savour the taste.

Do something else.

Take your mind off smoking by taking action. Try putting on some music, going for a walk, or ringing a friend.

The Quit logo is a registered trademark of Cancer Council Victoria.

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