





養 和 醫 院 呼 吸 系 統 科 中 心

Respiratory Medicine Centre Hong Kong Sanatorium & Hospital

戒煙

概念上的錯誤

「孔雀石綠」及「蘇丹紅」曾經引起全城哄動,皆因市民擔心在不知不覺間把致癌物質放入口中。然而,雖然煙中含60多種致癌物質,另加政府的立法、醫學界的推動、家人的勸阻等,成功戒煙的個案依然不常見。而不同機構的戒煙門診亦常常門可羅雀。究其原因,可歸納為概念上的錯誤,以及缺乏完善的計劃。

無論是醫生、煙民還是非吸煙者,假如被問到『吸煙是一種病,還是一種不良習慣?』,十居其九會認為吸煙是一種不良習慣,只要有足夠的意志力就可戒除。戒煙失敗,是由於意志力薄弱所致。

假如吸煙不會上癮,這種説法還能成立;但現在就 連煙草公司也在它們的網站承認吸煙會上癮、致癌 及引起呼吸及心血管系統疾病。上癮是一種病,而 大部份的長期吸煙者都是上了癮,故此吸煙對他們 而言也就是一種病。既然我們不會用意志力來治療 肺炎、高血壓等疾病,又怎能期望用意志力成功來 煙?雖然並非沒有單靠意志力就成功戒煙的個案, 其成功率亦遠低於輔以藥物治療的方法。美物 的〈戒煙指南〉亦指出:如沒有禁忌症,藥物戒煙 乃第一線治療方法。

Smoking Cessation

While food additives like malachite green and Sudan I continue to arouse public fear, cigarettes manage to slip through the radar over all these years. In fact, cigarettes contain more than 60 carcinogens. Though buttressed by strong government regulations, widespread medical attention and continuous family support, the number of people who successfully quit smoking is still far from satisfactory. In fact, most smoking cessation clinics see no more than a few patients everyday. In general, it can be attributed to a number of misconceptions and lack of planning.

Misconception

Asked "Is smoking an illness or just a bad habit?", most doctors, smokers and non-smokers would probably agree that smoking is a bad habit. It is something one can just conquer with enough willpower, and failures are for the weak-minded.

The above idea may hold water as long as smoking is not addictive. However, today even cigarette companies admit on their websites that smoking is addictive and can cause cancer, respiratory and cardiovascular diseases. The addictiveness associated with smoking is in fact a disease, which means most long-time smokers are suffering from an illness no different than pneumonia or high blood pressure. How can one expect to cure an illness with nothing but willpower? While there have been some successful cases using willpower alone, treatments of nicotine dependence can be far more effective with a combination of drugs and specialist support. The most updated American Smoking Cessation Guidelines states that, if no contraindication occurs, medication is the first-line treatment in smoking cessation.

- 1. 尼古丁補充劑:有不同的包裝及份量,如口香糖、 皮膚貼、吸入劑等,以補充尼古丁,減少戒煙引致的吊 癮現象。尼古丁補充劑可在戒煙後使用2至3個月,待 有信心在停藥後不再吸煙時,便可停服。
- 2. 熄健(Bupropion): 香煙中的尼古丁會刺激中樞神經釋放多巴胺,使煙民感受到吸煙的『好處』,並對尼古丁產生依賴。Bupropion能相對增加多巴胺的份量,進而減少吊癮症狀,最終消除對尼古丁的依賴。Bupropion一般須在戒煙前1星期開始服用,為時2個月。劑量通常是每天服用2次(150mg x2),為期2至3個月。
- 3. 戒必適(Varenicline):通過刺激多巴胺的釋放(減少吊癮症狀)及封阻尼古丁受體(吸煙不再帶來『好處』)的雙重機制來幫助戒煙。劑量通常是每天 2 次,每次1毫克(一片),為期 3 個月。

由於煙民常在戒煙初期遇到困難,成功戒煙後,還需周詳的複診計劃。第一次複診應在戒煙後1星期內進行,以鞏固戒煙的決心,以及解決可能出現的問題。第2和第3次複診則在戒煙後第3及第6個星期。由於吸煙可『復發』,故此長遠的複診亦是必須,以免前功盡廢。

Proven Medication:

- 1. Nicotine Replacement Products: They are offered in different forms and packages, including gums, transdermal patches, inhalers, etc. to mitigate withdrawal symptoms and cravings. They are supposed to be used for 2 to 3 months after quitting until one feels not compelled to smoke again.
- 2. Bupropion: Nicotine stimulates the release of dopamine by the central nervous system, making smokers feel good and developing nicotine dependence. Bupropion can promote dopamine secretion, thereby relieving withdrawal symptoms and kicking nicotine dependence at last. Medication usually begins in 1 week before smoking cessation. The recommended dose is 150 mg twice daily for 2 to 3 months.
- 3. Varenicline: It stimulates the release of dopamine (which relieves withdrawal symptoms) and blocks nicotine receptors (which deprives smoking of the "feel-good" factor). The recommended dose is 1 mg (1 tablet) twice daily for 3 months.

Without a detailed follow-up plan, smokers may find it difficult early on. Progress should be first followed up 1 week after cessation began so as to strengthen one's resolve and preempt any possible difficulties. The 2nd and 3rd follow-ups should be held in the 3rd and 6th week after quitting. To prevent a possible "relapse", long-term follow-up is a must.

1 吸煙真的有害嗎?

香煙含有超過4000種化學物,已知的致癌物質也有約70種。長期吸煙除會導致各種癌症(如肺癌、喉癌、食道癌、腎癌等)外,還會引致血管硬化(心臟病、中風、外周血管病等)、呼吸系統疾病(慢性阻塞性肺病、肺炎等)、骨質疏鬆、白內障等問題。科學數據顯示,煙民的平均壽命比非煙民要短5至8年。本港首五位最常見的致死原因(心臟病、肺炎、肺癌、中風及慢性阻塞性肺病)均與吸煙有關。世界衛生組織指出,吸煙是可預防的最大單一致病和致死原因。長期吸煙已被定義為疾病,而非一種生活習慣。

2 戒煙對身體有害嗎?

Is smoking really that harmful?

Cigarette contains about 4000 chemicals, among them 70 are carcinogens. Long-time smokers are susceptible to different kinds of cancer (lung cancer, laryngeal cancer, esophageal cancer, kidney cancer, etc.), vascular sclerosis (heart disease, stroke, peripheral vascular disease, etc.), respiratory diseases (chronic obstructive pulmonary disease, pneumonia, etc.), osteoporosis, cataract, etc. Scientific data reveals that, on average, the lifespan of a smoker is shorter than that of a non-smoker by 5 to 8 years. In Hong Kong, the top 5 killers, i.e. heart disease, pneumonia, lung cancer, stroke and chronic obstructive pulmonary disease are all related to smoking. As highlighted by the World Health Organization (WHO), smoking is the single greatest cause of preventable illness and death. Long-term smoking is also defined as a disease, not a lifestyle.

2 Is it detrimental to health to quit smoking?

Most long-time smokers may feel deterred by the symptoms associated with immediate cessation. It might have something to do with their discomfort during the cessation process or the symptoms they witnessed in their friends. One may feel discomfort early on (mostly 2 to 3 months before start). Withdrawal symptoms include dizziness, headache, anxiety, bad temper, difficulty in concentration, fatigue, depression, insomnia, etc. Most of them may subside over time, and completely disappear 3 months after successful quitting. If cancer or heart disease occurs after quitting, it is due to belated cessation. The risk of heart disease may return to half of that of the smoking period after a year, while the risk of cancer may begin to drop only after a decade. In short, the benefits of smoking cessation far outweigh the comfort induced by the carvings. The earlier one quits smoking, the earlier one enjoys the health benefits.

3 戒煙對健康的好處,要待多久才會出現?

戒煙三個月: 肺功能漸見改善、咳嗽減少、

氣喘改善、感覺精神

戒煙一年: 心臟病的風險比吸煙時下降一半

戒煙五年: 中風風險等同從不吸煙者

戒煙十年: 肺癌風險比繼續吸煙者少5至7成

戒煙十五年: 心臟病風險等同從不吸煙者

4 戒煙是否困難?

長期吸煙的主要原因,是對香煙中的尼古丁上癮。一旦停止吸煙,煙癮發作會引起很多症狀。這些症狀可在一天內多次出現,很少人能成功抵擋煙癮發作的連番攻擊。單靠意志力戒煙的確非常困難,成功機會低於5%。

5 有沒有幫助戒煙的藥物?

有。現時市面有三類協助戒煙的藥物:尼古丁替代療法、熄健及戒必適。常用的尼古丁替代療法有貼片、口香糖及吸入劑,用法和次數各有不同。熄健和戒必適則屬口服藥,每天2次。使用戒煙藥物的目的,是減輕「吊煙癮」引起的良好感覺,從而提高戒煙成功的機會。一般來說,戒煙藥物須用2至3個月,以渡過最大機會出現「吊煙癮」的時段。這三類藥物中,除尼古丁替代療法之外,其他均需醫生處方。

3 When will the benefits surface after quitting?

After 3 months: Improved lung function, less coughing, reduced

shortness of breath. Improved vitality.

After 1 year: Risk of heart disease is reduced by 50%.

After 5 years: Risk of stroke equals that of those who have

never smoked before.

After 10 years: Risk of lung cancer is 50% to 70% lower than

that of smokers.

After 15 years: Risk of heart disease is equal to those who

have never smoked before.

4 Is it difficult to quit smoking?

One of the main causes of long-term smoking is addiction to nicotine. Withdrawal symptoms may appear as soon as one ceases smoking, sometimes in quick succession within a single day. Only 5% of quitters can live through the persistent onslaught of withdrawal symptoms, hence it is unreasonable that willpower be the only crucial factor in smoking cessation.

5 Is there any medication that helps quit smoking?

Yes. Currently smoking quitters are free to choose one of the following 3 medications, which are nicotine replacement products, Bupropion, Varenicline. Nicotine replacement products include various kinds of nicotine patches, gums and inhalers. Bupropion and Varenicline are orally taken twice every day. All 3 products can relieve the withdrawal symptoms, making it easier for smokers to quit. In general, smoking quitters are required to take the medication for 3 months, during which withdrawal symptoms are most likely to occur. Bupropion and Varenicline must be prescribed by doctors.



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6 有沒有幫助戒煙的藥物?

尼古丁替代療法:

- 尼古丁貼片:刺激皮膚,引起局部敏感
- 尼古丁口香糖:口腔或顎部酸軟、疼痛、 消化不良(特別是咀嚼方法不當)、打嗝
- 尼古丁吸入劑:口腔或咽喉不適

熄健:失眠、口乾、頭痛、 震顫、噁心、焦慮

戒必適:噁心、失眠、頭痛、夢境異常

7 哪種戒煙藥最有效?

問題的答案,就如問哪種食物最美味:因人而異。以戒煙效果來說,戒必適比熄健好,而熄健亦勝過尼古丁替代療法。然而,要具體選用哪種藥物,除了看效果以外,還須評估其他方面,如有沒有禁忌症、戒煙者以往的經歷及其個人選擇等。

8 戒煙藥會令人上癮嗎?

理論上不會。

9 戒煙多久才算成功?

至少一年不吸煙才算成功,但仍須小心復發的可能。如 再吸煙,便會喚醒沉睡的煙癮,要再次戒煙。 What are the common side-effects of the medications?

Nicotine Replacement Therapy:

- Nicotine Patches: local skin allergy
- Nicotine Gum: oral or jaw pain, indigestion (especially due to improper chewing), hiccups
- Nicotine Inhalers: oral or throat discomfort

Bupropion: insomnia, dry mouth, headache, shivering, nausea, anxiety

Varenicline: nausea, insomnia, headache, weird dreams

Which is the best medication?

It is like asking "what is one's most favorite food?", to which the answer is different from one person to another. In terms of effectiveness, Varenicline is probably the best, followed by Bupropion and nicotine replacement products. Other considerations include the presence of contraindication, the quitters' past experiences and preferences.

ho Are the medications addictive?

In theory, they are not addictive.

9 What is meant by success?

The goal is to stop smoking for at least a year. Beware of slipping back to your smoking habit when you achieve this milestone. You may return to square one and need to go through the whole cessation process again.

10 戒煙後會發胖嗎?

- 一般而言,戒煙的確會令人增磅,原因有四:
 - 尼古丁會抑壓食慾; 戒煙後,食慾會隨之大增。
 - 戒煙後味覺會有改善,繼而增進食慾及進食的份量。
 - 戒煙後,一般會以零食代替抽煙。
 - 戒煙後,新陳代謝率會減慢。

如想在戒煙後控制體重,應多加留意及了解個人日常飲 食及生活習慣,予以改善,減低增磅風險。如有疑問, 請諮詢本院註冊營養師。

11 如家人不想戒煙,我該怎麼辦?

首先要了解他/她不想戒煙的理由,例如不相信吸煙有害、擔心戒煙有害或戒煙太難等。這些理由均可透過現有證據加以說服,惟吸煙者有時不能只靠言語就會戒煙。在這種情況下,或需心理學家協助,令吸煙者產生戒煙的念頭。

Will quitters gain weight after smoking cessation?

Quitters will often gain weight because:

- Appetite increases without nicotine;
- The sense of taste improves thereafter, thus increasing appetite and food consumption;
- Smoking quitters prefer snacks to cigarettes;
- Rate of metabolism decreases after cessation.

Quitters could control their weight gain with improved eating habits and lifestyle. For more information, please consult our registered dieticians.

How can I help my family member if he/she refuses to quit smoking?

Try to find out why he/she does not want to quit, e.g. he/she thinks quitting, not smoking, is harmful to health, or it might be too difficult a habit to kick. They may come around to your thinking if presented with strong evidence. Otherwise, consult a certified psychologist for assistance.

初診 本 第一次複診 (初診後2星期) 第二次複診(初診後6星期) 院 2. 第三次複診(初診後12星期), 3. 的 4. 評估初步成效 戒 第四次複診(初診後52星期), 煙 5. 評估一年成效 服 務 計

Our Smoking Cessation Programme

- 1. The 1st Consultation
- 2. The 1st Follow-Up (2 weeks after the first consultation)
- 3. The 2nd Follow-Up (6 weeks after the first consultation)
- 4. The 3rd Follow-Up
 (12 weeks after the first consultation) for preliminary
- 5. The 4th Follow-Up (52 weeks after the first consultation) for evaluating the one-year effort



版系

呼吸系統科中心

香港跑馬地山村道二號 養和醫院李樹培院一期十樓

查詢或預約,歡迎聯絡我們

電話: 2835 8673

電郵:respmc@hksh.com http://www.hksh.com

Respiratory Medicine Centre

10/F, Li Shu Pui Block Phase I, Hong Kong Sanatorium & Hospital 2 Village Road, Happy Valley, Hong Kong

For information or appointment, please contact us at:

Tel: 2835 8673

E-mail: respmc@hksh.com http://www.hksh.com