

## Call a Smoking Quitline

A trained counselor can help you stop smoking or stay on track. You can call:

- The National Cancer Institute's Smoking Quitline,  
**1-877-448-7848 (1-877-44U-QUIT)**
- Smokefree.gov, which connects you with your State's Quitline,  
**1-800-784-8669  
(1-800-QUITNOW)**
- Veterans Smoking Quitline,  
**1-855-784-8838 (1-855-QUITVET)**



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## Smoking? Why it matters....

Tobacco use is the primary preventable cause of disability and death in older adults. Older people who smoke have double the mortality rate compared to older adults who do not smoke.

### The Link between Smoking and the Elderly

Smoking is linked to a higher risk of cognitive impairment and dementia in the elderly and has also been associated with increased risk of macular degeneration, cataracts, hearing changes, and decreased abilities in smell and taste. Smoking is an important contributing factor to loss of function, mobility, independence, and fire-related fatalities in the elderly. Smoking is associated with age-related diseases in elderly women such as osteoporosis, breast cancer, and cardiovascular disease and has been shown

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to decrease physical strength and performance in this population. Older adults who smoke are highly nicotine dependent, and are less likely to believe that smoking harms health.

- Improved health and decreased mortality occurs when people quit smoking even after 65 years of age.
- Benefits of smoking cessation in the elderly include: reduced progression of respiratory disease and improvement in lung function, improved safety, quality and length of life, decreased cognitive impairment and prevention of dementia and reduced risk of all major causes of death.
- A high percentage of elderly people who smoke want to quit, and people over 65 who smoke are more likely to be successful at quitting. However, older patients who smoke are less likely to receive advice to quit from health care providers than younger patients.
- Older adults who experience more health problems and psychological distress are more likely to try to stop smoking, while older adults with low psychological distress and fewer health concerns are less likely to quit. This second group may need different sorts of motivational and educational strategies to support smoking cessation.



"...and to think, forty years ago, I gave up smoking and drinking for this."

## Good News About Quitting

The good news is that after you quit:

- Your lungs, heart, and circulatory system will begin to function better.
- Your chance of having a heart attack or stroke will drop.
- Your breathing will improve.
- Your chance of getting cancer will be lower.

No matter how old you are, all of these health benefits are important reasons to make a plan to stop smoking.

## Help with Quitting

Many people say the first step to quitting smoking successfully is to make a firm decision to quit and pick a definite date to stop. Then, you'll need to make a clear plan for how you will stick to it. You may need to try many approaches to find what works best for you. For example, you might:

- Talk with your Doctor.
- Make a plan for dealing with urges to smoke.
- Read self-help information.
- Go to individual or group counseling.
- Try the online mobile tools from Smokefree60+ at [www.60plus.smokefree.gov](http://www.60plus.smokefree.gov).
- Ask a friend for help.
- Take medicine to help with symptoms of nicotine withdrawal.

If at first you don't succeed, you are not a failure. You can try again and be successful. If you were able to quit smoking for just 24 hours in the past few months or weeks, you have doubled your chances of quitting for good in the coming year!