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**MEASURES FOR TREATMENT AND PREVENTION OF SMOKING**

Smoking is not only a serious medical problem but is also a great social problem, whereas the harm caused to the society by this habit is enormous. Anti-smoking fight in different forms is being implemented in practically all countries of the world.

In our country, the decree of the Minister for Health Care of the USSR issued in 1978 established a permanent inter-departmental commission dealing with anti-smoking fight. At the same time, the highest emphasis is placed on smoking in medical establishments and, first of all, on medical personnel smoking. At present, it is prohibited for medical personnel to smoke in the presence of patients and students. Further on, it is foreseen to achieve complete cessation of smoking among all medical personnel. In this connection, they put forward a thesis that smoking is not compatible with the medical status and profession.

In 1980 the Central Committee of the Communist Party of the USSR and Cabinet of Ministers of the USSR approved a resolution *On Measures on Intensification of Anti-Smoking Fight*. Based on that resolution, they developed requirements of the Defense Minister of the USSR aimed at intensification of anti-smoking fight in the army and in the navy. The requirements provide for carrying out (together with the party, trade union and Komsomol organizations) systematic political, cultural and educational works for explaining the harmful impact of smoking on the human health to military personnel, workers and employees of the Soviet Army and the Navy. It is planned to intensify the fight in order to form social awareness aimed against smoking by widely using mass media and visual facilities.

They take all necessary measures in order to enhance the efficiency of the propaganda of sanitation awareness about the hazard of smoking. The supervisory personnel of the Medical Service and experts from military health care institutions are getting involved into this process. It is planned to restrict and further on to forbid smoking in all workrooms and service premises in military units, institutions, military schools, enterprises and organizations of the Defense Ministry of the USSR. Commanding officers and commanders of all levels are to reinforce control over the fulfillment of these measures. It is necessary to pay attention to the fact that the anti-smoking fight should be implemented not from time to time but permanently and purposefully. Efficiently organized order of life, education and combat training, systematic physical exercises and tempering, good nutrition – all these factors provide perfect conditions for improving the soldiers' health and physical development.

The anti-smoking fight comprises two components, the first one being prevention of the smoking habit initiation, and the second one being dropping smoking.

To caution young people against tobacco smoking, it is required to carry out permanent and purposeful works in many areas. One of them is explanation of harm caused by smoking. This issue is to be dealt by physicians, first of all. From day to day, it is necessary to use examples to explain that smoking causes irreparable harm to the human health, that it cannot be compatible with either physical exercises or intensive physical and mental works.

Similar to some other countries, nonsmokers clubs are organized in our country. Physicians, trade union workers and managers of different institutions take an active part in their work. These clubs deal with explanatory works about the harm caused by smoking, and popularize the experience of those labor collectives where all members have dropped smoking. They discuss the most efficient methods of anti-smoking fight in the form of debate. In our opinion, similar clubs can be organized in garrisons and military units.

Some young men believe that if they smoke they do something heroic. It is necessary to make them understand that smoking is, on the contrary, a demonstration of weakness and weak will, a result of bad education and lack of culture. Young people must always remember that

their health is a great asset and in many respects it depends on a person himself and his way of life, and smoking, on the contrary, results in various diseases.

In addition to the explanatory, sanitation and educational work, certain administrative measures are taken. The routine rules of any military collective or institution forbid smoking at working places and in corridors. Special premises or places are assigned for smoking.

At present, the number of military personnel who have dropped smoking is growing. It is good when soldiers quit smoking not by one but collectively - by whole elements. This initiative should be encouraged by all means. A week after quitting smoking people begin feeling much better, brisker, their appetite becomes normal, a stable and good mood appears, and there their work efficiency increases.

Thus, how can we solve the second part of the problem, i.e. how can we make a person drop smoking? Many people give up this habit without any effort. However, there are certain people who consider dropping smoking to be one of the most difficult tasks in their life.

Each person who wants to quit smoking should be aware of detrimental consequences of smoking to health; to take a firm decision to quit smoking forever, to find a suitable moment for getting rid of that habit (vacations, retiring from work or service due to a disease, etc.). Besides, people surrounding you (friends, relatives, etc.) must help you quit this bad habit.

Most smokers can independently quit smoking without any medical assistance and, as a rule, without any health disorders. There is one demonstrative and typical example. In October 1976, a French motor ship *Massaliya* set off for a one-month sea cruise with 640 passengers aboard who decided to quit smoking. All cigarettes, lighters and matches were withdrawn from all of the passengers before the departure. Most of the passengers overcame that bad habit in a comparatively easy way, and only some of them fell ill and experienced insomnia. Upon the return, 70% of the passengers dropped smoking and only 30% of them recommenced it again (G.M. Entin, 1979).

Dropping smoking must be straight, decisive and final. In the utmost cases, when there are an abstinence syndrome and irresistible desire for smoking, it should be ceased gradually. Medical practice is not aware of any cases when dropping smoking caused any harm to health. On the contrary, dropping smoking gives a person confidence in a victory over himself. Abrupt Dropping is, first of all, recommended for the people at the young and middle age who do not suffer from any serious diseases of the cardiovascular system. It is recommended and sometimes is extremely required that people suffering from cardiovascular diseases should quit smoking.

Young military personnel should be aware of the fact that smoking could be coped with if one starts serious fight against it. Any person who has understood the harm of this habit and who has a desire and will can drop smoking. The earlier a young man quits smoking, the more probable it is that he will get rid of it forever. Daily tempering, physical training and sports play a very important role in the anti-smoking fight (V.S. Lobzin, 1979).

The person who has given up smoking may sometimes experience agitation or depression, irritability, insomnia, sometimes headache, vertigo or painful feelings in the heart area. The desire to light up a cigarette does not disappear for many days. This state, reaching up its maximum on the second or third day after dropping smoking, gradually subsides and disappears absolutely in eight-ten days. If headache, painful feelings and other side effects continue to disturb after dropping smoking, it is necessary to consult a physician. The prescribed medical treatment will eliminate the unpleasant feelings.

Those people who do not experience any painful feelings after quitting smoking need to follow the following recommendations: do physical exercises, walk two times a day (graduated walking exercises), then take water procedures; limit consumption of spicy food, avoid eating fried or sweet food, fat, creams, black coffee or alcohol drinks, increase consumption of fruit, vegetables and liquids (juices, milk and tea with the limited quantity of sugar), about six-eight glasses a day; avoid meetings with smoking friends, remove ash-trays (B.B. Zasedatelev, 1980).

If a smoker cannot drop smoking straight away, then it is recommended (though it is undesirable) to quit smoking gradually. First of all, this applies to elderly smokers, to people

suffering from cardiovascular and neuropsychic diseases, to smokers with a “long record” of smoking (more than 20-25 years), to those who smoke 1½-2 boxes of cigarettes a day. The quantity of smoked cigarettes is to be reduced by 1-2 within 10-15 days. At the same time, cigarettes are to be half-cut. When the quantity of smoked cigarettes (half-cut) is reduced down to 5-10 pieces, smoking can be dropped absolutely.

To alleviate nicotine abstinence in cases of both abrupt and gradual dropping smoking, it is possible to take symptomatic medicines and special remedies prescribed by a physician.

One of the oldest remedies is oral rinsing with a 1-2% solution of silver nitrate (lunar caustic), solutions of protargol and collargol, tannin, eucalyptus oil and other astringents. However, it is necessary to bear in mind that they have a short-term effect (15-30 minutes), and that is why a person who has dropped smoking needs to rinse his mouth with such solutions many times during a day – after each glass of water, each ingestion, and before each attempt to light up a cigarette. Of course, this method can be applied only by those who are not busy with work (service), or during their vacations, or during a sick leave at home.

A so-called replacement therapy of tobacco smoking has become very popular recently. It is based on the replacement of the latter with pharmaceutical substances of vegetative origin, which have a nicotine-like effect (I.I. Belyayev, 1979). The replacement therapy can be used in cases of both abrupt and gradual dropping. Such pharmaceutical substances are used as lobeline, lobesile containing 2 mg of lobeline in one tablet, cytisinum solution, tabex comprising 1.5 mg of cytisinum in one tablet, anabasinum in tablets produced on the basis of muriatic anabasinum.

These medications evoke unpleasant feelings at an attempt to light up a cigarette, which promotes quitting the habit of smoking very quickly. It is recommended to take lobesile and tabex 4-5 times a day before a meal for 7-10 days. If necessary, the treatment can be repeated for 2-3 weeks with a gradual reduction of the dose. When taking anabasinum, a smoker gets an impression that he has smoked a cigarette, and he gradually loses the desire to have a smoke.

Medications of the replacement therapy may evoke agitation, insomnia, rise of blood pressure and other side effects. That is why medications of this group are allowed to be used only at prescription and under the physician’s supervision.

Reflexo- and psychotherapy and, in particular, hypnosis are quite efficient methods of treatment for smokers. As for psychotherapy methods, autogenic psychotherapy can be used (both individual and collective). This method has been widely used in the treatment of many diseases of late. Autogenic training can be practiced by any person yet only after a consultation with a physician and under his supervision.

Acupuncture, which is being more and more widely used, also suppresses inclination for smoking and further on evokes disgust for the tobacco smoke. There are reports in the literature about the results of acupuncture application in three hundred smokers to cure them of the smoking habit. Positive results were demonstrated by 220 persons after six weeks; moreover, 150 of them dropped smoking absolutely, 75 people began smoking less, and the remaining 75 people (mainly women) demonstrated unsuccessful results (D.M. Aronov, 1978). Reflexotherapy methods are used both on hospital and on outpatient basis in complex with other types of medical treatment.

If the first course of treatment has not produced complete success but a smoker has managed to reduce the number of smoked cigarettes, then the treatment is to be repeated in 1½-2 months. As a rule, they usually give up smoking after the new course of treatment. There are no incurable smokers. However, smokers need to remember that with any method of treatment they are to be persistent and assertive in the achievement of their aim, and to clearly realize the need to get rid of that bad habit.

Therefore, the arsenal of the modern medicine to be used for the treatment of smokers is quite manifold and extensive. Anyone who is willing to abandon this habit may be rendered medical help. However, in any case the most important thing in the anti-smoking fight is the smokers’ conscious refusal of their pernicious habit. Remember that anyone can quit smoking!

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