
... LETTERS TO THE EDITOR ...

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After reading the article by Sidorov et al,¹ I wanted to relate my own experiences with smoking cessation efforts. Fifteen years ago I formulated a program that was essentially the patient's responsibility. I have refined it from time to time. I had found, from personal and family experience, that if the conditions were right for quitting and the smoker knew the stages of nicotine withdrawal, the failure rate was kept to a minimum. Most failures can be traced to not knowing what to expect between the last dose of nicotine and the first day of knowing you are free, quitting at the wrong time, quitting while your home or business partner continues to smoke, or facing a stressful situation—which is remedied by a visit to the tobacconist rather than the therapist.

Since prescription nicotine was not widely available 15 years ago, the patients had two choices: "cold turkey" or cut back over days or weeks before the day of decision.

Whether the "one year goal" is timed from the moment a person signs up for the program or from the last prescription dose of nicotine, this is too short a period. There have been many who have almost made it to the 2-year mark who opted out because they still felt the craving for nicotine and did not want to spend the rest of their life craving. Two years is the true end of the tunnel.

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1. Sidorov J, Christianson M, Girolami S, Wydra C. A successful tobacco cessation program led by primary care nurses in a managed care setting. *Am J Man Care* 1997;3:207-214.