



Makara patapa / quit smoking

Podcast transcript

Introduction

The makara patapa program is a TAC initiative, as part of our holistic approach to health and wellbeing, supported by the Department of Health Tasmania.

Episode 6: Dr Chris

Introduction:

Ya everyone. Nunami here, in 2022, I was asked to travel across Lutruwita and record our community stories of quitting smoking.

I heard so many great success stories of our people who managed to quit and got a good picture of why our people chose to quit, how they did it, and what supports they were able to access along the way.

This is the makara patapa podcast.

Nunami:

Hi, Doctor Chris, thanks for meeting me today. How are you?

Dr Chris:

Hey Nunami, thanks for having me on, yeah, pretty good. Thank you.

Nunami:

Did you want to introduce yourself or your role here at the health service?

Dr Chris:

Sure. A new GP registrar at the Health Service in Hobart. So here since August, I'm going to be here for the full year until next July as well.

I know from meeting the Aboriginal community here that 40 to 50 percent of Aboriginal people in Tasmania smoke. It's one of the biggest things that we deal with here.

Nunami:

Which age groups are the highest rates of smoking?

Dr Chris:

18- to 30-year-old and then 30 to 40 would be highest.

So, you can come in anytime and speak to us. So, we've got nurses and doctors here and like five days a week. We also have Jay, who I think you're going to speak to who's the quit worker and we also have counseling as well.



Tasmanian Aboriginal Centre

Any conversation you want to start off with, you can always come chat to one of the GPS in the nurses here. Yeah, we're a team. So, you know the nurses working, work with me and I can refer people to Jay. And then I generally like to have people come back and see how they're going after a few weeks. If we do, if we do initiate some treatment.

Nicotine isn't one of the most addictive substances in the world. In the media as like, you know, anybody who's ever watched the movie will see people smoking. Or any TV show people are smoking and through the last, you know, 150 years since it was kind of really discovered in Western civilization.

You know, people have been smoking for years and years and years in South America, but it's just when it's gotten manufactured into cigarettes in the 20th century. That's when it exploded.

Why is it addictive? It's the nicotine is the thing, but everybody is a little bit different in terms of how they respond to nicotine. Some people become addicted really easily, some people don't.

Then there's lots of other reasons, especially in the Aboriginal community, why people will smoke. One is stress, you know, people who are, you know, under lots of stress or like have mental health problems tend to have much higher rates of smoking.

We know that in the Aboriginal community due to the effects of colonization, there's an intergenerational stress, which is a big part of it.

And another thing is, you know, people who are in the more lower socioeconomic groups, so basically people who maybe not have as much work as other people or you know might not have made it all the way through school, tend to have higher rates of smoking, which also affects the Aboriginal community here and on the mainland as well

Lots of different reasons why people get addicted, but the main thing is the nicotine. That's what we as doctors and nurses and medical staff can help with.

So, nicotine is the substance that causes you to be less stressed. So that's another big reason why people get addicted to it. It's like, you know, yeah, I'm feeling worked up - I'll have a cigarette and kind of lowers the mood and dampens it down a bit. Like valium and those kind of things do. They are also things that suppress your stress, but they are also highly addictive.

A lot of people find when they start smoking that, oh, I just had one or two and then yeah that's good. You know, you get the buzz from it, you get lightheaded or maybe get like a little bit of, you're more relaxed, you're more chatty, you might be out with friends, and then that just becomes like, oh, I'll go out for another one and then you come into a cycle. And what the addiction is, is when you actually need it to feel normal. So, you have so much that you've nicotine in your system all the time, but your body gets used to that. So now you need to put the nicotine in there to feel back to where you were.

Then that causes you to need more and more and more nicotine. So, you increase your cigarettes as you go.

If you stop smoking straightaway right the nicotine will be out of your system in within five days. But that doesn't mean that the cravings go away after five days. So, all the symptoms that you talked about. Like, you know, feeling either more hungry or not wanting to eat at all, or



Tasmanian Aboriginal Centre

feeling anxious, feeling tremulous, feeling like I'm kind of worked up and panicky. These are all really common after you stop nicotine because you've been so addicted that you've been using nicotine to feel normal. And so that's what we would use nicotine replacement for, to help like reduce those symptoms.

After five days then if going cold turkey, then the nicotine's out of your system and then all those other things that have been suppressed by the cigarettes, you know, so your sense of smell and taste will come back in a week. When you stop, you know your skin improves after about a month when you stop smoking cigarettes. Your lungs, which have a system to naturally clean themselves, that comes back to life after about two or three months, and then you, your lungs start to clean themselves and get rid of all the tar that you've been putting in.

We like to help or give people the option of having different medications or patches or, you know, inhalers to help reduce it for each individual person.

So that's why you know coming in, having a chat with myself or one of the other GPS or Jay can be a good start.

Everybody is a bit different because cravings are like psychological as well as physical. Some people you know, keep using nicotine replacement for months and months and months and years. You know, just to stay on top of it.

If you quit smoking but you fall off the wagon and you go smoke again, that's actually a positive sign for us that you tried once before. Trying again can be like it can be more positive when you try it second and a third time. So don't be afraid to come back if you've failed once, we can try again.

But the risk of cancer is causes 16 different answers you know from. Lung cancer. Number one to like breast cancer, increases your risk of bladder cancer, skin cancer, all of these ones. More likely get chest infections. It causes you more likely to have, you know, problems with your lungs in the long term, like COPD or emphysema, which is the old word for it. It can make your asthma worse. It can make your skin worse it's it can, you know. I think a lot of people know how about not bad it is, but to reinforce it for people.

Parent who smoke are likely to start to think about quitting because of the effects it can have on kids, like causing kids to their asthma to get worse or to, you know, be more likely to get chest infections when they're younger. They are all things that even you know if you smoke outside, you still have the smoke on your clothes when you're holding your kids. The most common way people quit is just by going cold turkey.

Very good option and then we can help with that too. But nicotine replacement is yeah, in terms of, you know, the feeling of anxiousness, the tremors, the sweats, all that stuff, that appetite changes. We can give you nicotine really safely - through a patch or through an inhaler or through gum rather than through the form of cigarettes.

Because it's all the other 7000 chemicals in the cigarette that caused all the problems like the cancers and lung disease and everything like that. So, we can give nicotine really safely and it's absorbed through the skin really, really easily. So, patches are really good.



Tasmanian Aboriginal Centre

What I like to do is give a patch and then which stays on for, you know, 18 hours or 24 hours and then you put a new one on the next day. And then when you've got a craving you can take an inhaler or use a lozenge or use gum. And that kind of takes away the peak craving and kind of generally makes it easier for people.

Then the other options are the pharmaceutical like the tablets. At the moment we've only got one available which is bupropion, which is Zyban. Champix is the one that's the most effective way of quitting. Zyban is slightly less effective, but still much better than doing nothing or taking, you know, a placebo. Zyban is like an antidepressant, so if you've got some, some people find you know that their mood improves quite a lot while they're taking it as well. I've definitely used it in people who are, have like say a bit of anxiety or like mild depression and were also smoking. And then they can kill two birds with one stone in theory. So, at the moment we just have Zyban. Champix is really, really good when it's, can be given safely. So, once we've got a supply back, there are two good options.

But yes, Zyban most commonly can affect your dreams, some people get kind of pretty intense dreams in it. But Champix can definitely affect people's moods. Sometimes it causes them to go pretty high, or, you know, causes them to be much lower, can cause depression.

I mean, in that case then, you know, we tend to follow people up really closely when we start medications, so we try to catch that early if that does happen. It wouldn't be great from our point of view if we just let people go and didn't see them again and they're either suffering or while on this new tablet.

We're here anytime you want to call us about anything. Yeah, 'cause there's lots of different options that we can try and we can try different combinations. And as I say, everybody is slightly different, so yeah. We're very happy to hear from you if you're having any problems with anything that we're doing. Because it's a team like you know, we can only work with you if you want to work with us and if you have a bad experience with us, or a bad experience with medications it's better that you tell us so that we know in future or we can change.

Nunami:

It what are the benefits when people finally do quit smoking?

Dr Chris:

Sure, number one would be, you know, say if you've got young kids that you're not exposing them to passive smoking. Number two, apart from what the health benefits would be, you know your lungs coming back to cleaning themselves. You're sense of taste and smell coming back to normal. Your risk of heart attack reduces, like, even after one day. Your risk of developing lung cancer reduces. And I think by the time you've quit for 10 years, your risk of having a heart attack is back to like, what it would be if you've never smoked before.

Nunami:

Wow



Tasmanian Aboriginal Centre

Dr Chris:

Yeah, and then the big things I wanted to mention would be the financial. Because say if you smoke 20 a day for a year, that's \$11,000. Can you imagine if you'd spent \$11,000 for 10 years? You'd now be a hundred grand richer.

Yeah. If anybody in the community wants to come and chat to me or anybody else in the team, feel free anytime.

Nunami Outro:

Ya Everyone, Nunami again - thanks for listening to the makara patapa podcast. A podcast series by the Tasmanian Aboriginal Center with support from public Health Services Tasmania.