Quitting smokeless tobacco [1]

Alice,

How can a person get help quitting the use of smokeless tobacco? All of the resources in this general area are geared toward helping smokers stop smoking, but a smokeless tobacco nicotine addict does not have a similar usage ritual as a smoker, but does have a similar, or worse, addiction than a smoker because the nicotine absorption levels are many times greater. Any suggestions as to how a smokeless tobacco user can get help stopping this addiction would be greatly appreciated.

?Snuff head

Answer

Dear Snuff head,

Hats off to you for seeking resources to help you quit! There are so many great benefits to quitting. To learn about specific health risks associated with using chewing tobacco and snuff, check out Effects of smokeless tobacco [2]. As you mentioned, Snuff head, there do seem to be more resources geared towards those wishing to quit smoking tobacco. However, some of the strategies may be transferable or adaptable to quitting smokeless tobacco as well. For example:

- **Self-help strategies:** For those interested in quitting on her/his own, many internet resources, videos, and "quit kits" offer privacy, low cost, and flexibility for anyone quitting a tobacco product. Some web-based programs, like MyLastDip [3] and ChewFree [4], are specifically made for people looking to quit smokeless tobacco. These interactive, tailored programs have about a 50 percent success rate among college-age clientele and offer privacy and flexibility while remaining low cost.

- **Health care providers:** Primary care providers or dentists can either work out plans for quitting or can offer referrals. Dentists may be an especially valuable resource for people seeking to quit chewing tobacco since they can explain how quitting will improve oral health.

- **Nicotine replacement therapy (NRT):** NRTs (e.g. nasal sprays, inhalers, chewing gum, patches, or lozenges) release controlled doses of nicotine into the body, reducing cravings and withdrawal symptoms associated with nicotine dependency. Some forms of NRT appear to be more effective for users of smokeless tobacco. Specifically, research suggests that the patch works more effectively than the gum (due to the fact that the gum may feel too much like chewing tobacco to let the user comfortably break the
habit). Other research suggests that smokeless tobacco users that try the patch may not find it as effective as other NRTs to curb their strong cravings. Additionally, an inhaler, designed to look and feel like a cigarette, may also not be helpful for a smokeless tobacco user. If you choose to use NRT, it might be best to consult with your health care provider first to determine what might be most effective for you.

- **Prescription medications:** There are some medications that have shown to be useful in aiding cessation efforts. Though more research is needed, the prescription drug Varenicline has been shown to be helpful to smokeless tobacco users looking to quit. It modifies the nicotine receptors in the brain, reducing both the pleasure response to nicotine and the withdrawal symptoms after quitting. Another medication approved by the Federal Drug Administration (FDA) as a smoking cessation aid, Buproprion, has not been shown to be effective for smokeless tobacco users.

As with quitting smoking, quitting smokeless tobacco is a process that takes time and commitment. However, there is an element of quitting that is exclusive to smokeless tobacco users: For many who quit smokeless tobacco, there is a stronger need to initially replace the oral fixation associated with the use of chewing tobacco or dip. So, oral substitutes, such as gum, candy, or sunflower seeds, may be helpful. Also, there are some commercial smokeless tobacco substitutes sold in round containers resembling snuff tins. They do not contain tobacco or nicotine but instead contain a variety of flavored herbal blends. (There is little information available about the potential side effects of this non-nicotinic snuff. In some cases, such herbal blends were able to successfully decrease withdrawal symptoms but were less effective at reducing cravings than other cessation options.)

So, what are some of the benefits of quitting? When someone stops using smokeless tobacco, s/he is likely to experience fewer mouth sores and gum problems. Improvements in oral health, combined with feelings of mastery and well-being, may help motivate people to continue their cessation commitment. It’s likely that you’ll come up with a few additional reasons of your own to quit (and to stay tobacco-free) as well.

If you feel ready to quit and decide to make a go of it on your own, consider checking out the National Institute for Dental and Craniofacial Research’s guide for quitting smokeless tobacco [5]. There may also be tobacco cessation support available in your community (that may include behavioral support, prescriptions for medications to assist with quitting, and/or access to NRT). Look to see if these cessation services available from your school, employer, or local or state health department.

Best of luck!

Alice!

Category:
Alcohol & Other Drugs [6]
Cigarettes, Chewing Tobacco, & Other Nicotine [7]
Helping & Getting Help [8]

**Related questions**

Convincing someone to give up smoking [9]
Chewing tobacco risks [10]
Quitting smoking = depression? [11]
Effects of smokeless tobacco [12]
Can't stop chewing Nicorette (nicotine gum)! [13]

Resources

Tobacco Cessation (Morningside) [14]
Addiction Information & Management Strategies (AIMS) (CUMC) [15]

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