



Consumers Helping
Others Improve
Their Condition by
Ending Smoking

CHOICES NEWSLETTER - DECEMBER 2018

Volume 12 Issue 2

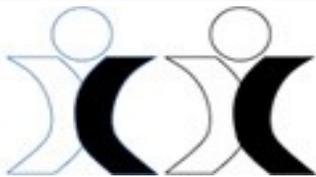
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The New E-Cigarette Crackdown by the FDA

By Deidre Stenard

The Food and Drug Administration (FDA) is alarmed by teenage use of e-cigarettes and is taking action to stop the availability for teens. The FDA put makers of the most popular devices on notice that they have until roughly the end of November 2018 to prove they can keep their devices away from minors.

Federal Law prohibits the sale of e-cigarettes to anyone under 18. For the purpose of this article the term e-cigarettes includes vape machines, tank *continued on page 6*



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Group Therapy: An Essential Component to Smoking Cessation

By Terrance Horyn

There were multiple factors that helped me quit smoking besides using Chantix. I went cold turkey 2 or 3 times, with each attempt lasting approximately several years, but maybe the most instrumental factor besides Chantix was group therapy. I can remember my peers and me when we used to meet upstairs in the Matrix building here on George Street. The facilitators of the group were Stacy and Jose. Boy, does that bring back memories! I was receiving mental health treatment at that time from Raritan Bay Mental Health Center in Perth Amboy. Eventually Raritan Bay instituted their own smoking cessation program. I also remember how generous the CHOICES program was in providing nicotine replacement devices when there was a surplus in the budget. Dr. Williams presided over the group. I also remember pictures and slogans on the walls that delivered blatantly honest slogans on the dangers of smoking like two cowboys *continued on page 5*



Experimental Drug May One Day Reduce Nicotine Dependence

By Yasmin Halim

NicA2-J1 is an enzyme that breaks down nicotine in the bloodstream before it crosses into the brain. Scientists at Scripps Research Institute used rats for pre-clinical trial animal studies to test the enzyme treatment in different ways. This might lead to another option of an effective medicine for quitting smoking that has few side effects and may not have to be taken as often as what is currently available. When a person quits smoking “cold turkey” they get severe cravings and go through nicotine withdrawal. The research team showed that the treatment lessened how dependent the rats were to nicotine. In a human it is like a person smoking 20 cigarettes a day getting only 1 or 2 cigarettes worth of nicotine in contrast to going, “cold turkey.” The little bit of nicotine left in the bloodstream was enough to help reduce cravings and lessen withdrawal symptoms.

If smoking is affecting your breathing, making you tired, and your doctor tells you if you keep on smoking you could get cancer or have a heart attack but you still smoke you are probably addicted. To mimic this in nicotine addicted rats they made it so that when they pressed a lever to get nicotine they also had a 30% chance of getting an electric shock to their feet. The rats that were getting the enzyme were able to resist pushing the lever better than the rats that were not.

After quitting smoking it is very easy to relapse back to smoking. It is estimated that 75% of daily smokers that quit eventually go back to smoking. The scientists’ tests showed the rats that were getting the enzyme treatment was less susceptible to relapse after they were injected with nicotine *continued on page 6*

There is Something Wrong with My Menthol Cigarettes and No One Told Me

By Lisa Evans



I smoked Newport Lights for 41 years. I quit 7 years ago but just now learned that the menthol in the cigarettes I smoked is a flavor and not a “type” of cigarette. I actually thought that menthol cigarettes were manufactured differently than non-menthol cigarettes. I am stunned. It was a just a flavor, like cherry or strawberry. Now, all these years later, after I was addicted to menthol cigarettes, there is movement in NJ and on the national level to ban the sale of menthol cigarettes. It seems these cigarettes have shown greater health consequences to smokers than to smokers of non-menthol cigarettes. If you smoke menthol cigarettes, don’t be too concerned about the ban; be more concerned about why mentholated cigarettes are targeted for banning.

Menthol is derived from mint, peppermint, or spearmint plants, and is classified as a mild local anesthetic that stimulates cold receptors in the mouth, nose, and lungs. When the receptors come in contact with menthol, the user experiences a refreshing, cool sensation which is very pleasurable. This is why menthol is a popular additive in cigarettes, toothpaste, gum, cough drops and mouthwash.

When added to cigarettes, menthol makes smoking less harsh to the smoker and more comfortable to smoke by creating a cooling sensation in the mouth. This cooling effect allows smokers to inhale more and inhale very deeply into the lung. “The FDA found that menthol in cigarettes is likely associated with increased smoking addiction and greater *continued on page 4*

Awkward Situations as a Smoker

by Deidre Stenard

As a smoker, I smoked more and more cigarettes as time went along. As I got to be a heavy smoker, I faced very awkward situations. I write about a few of them as follows in chronological order:

I worked for a healthcare corporation that didn't allow smoking on their campus. I was a pack-and-a-half a day smoker at that point in my smoking. I was at the point with my smoking where I couldn't go through a workday without smoking, so I'd take a break 3 or 4 times a day and smoke. It was a sneaky operation where I would make sure the coast was clear so no one would notice I was taking a break. I would go down the elevator, walk out the door and go all the way out to the parking garage and duck underneath the cars, light up, and aaaah, take a long drag off of a cigarette. I would have to duck and dodge between the cars so that no one would see me. I would be out there for 5 or 10 minutes, then walk back to the office, go up the elevator to my desk. The total break would take 20-25 minutes and I was never asked about it, so I guess I was getting away with it. I was still excruciatingly uncomfortable at the job because I always craved a cigarette and it took too long to go smoke in the parking garage.



Following that, I was working at a software development company in Sausalito, California and there were a number of us that smoked. I spent much of the day taking breaks to go outside and smoke. At that point I was a two-pack-a-day smoker. My boss pulled me aside and said to me *“Do you know that you spent 2 hours outside smoking yesterday?”* My jaw dropped. I wasn't aware that it was that much time. I told her that I would definitely make an effort to cut down on the smoke breaks. What I did would be what any cigarette addict would do. I chopped the social smoking and took just as many breaks but took short 1 or 2 minute breaks. This satisfied my boss and I was able to get a quick smoke break in, but trying to smoke a cigarette in a minute isn't pleasurable.

When I was a 2-3 pack-a-day smoker, I was on a date with a friend and we went to the movies. I was just getting into the movie, the plot and so forth, and I started to think of how nice it would be if I went outside and had a cigarette. No bother, I thought. I'll just get up and go outside and have a cigarette. I won't miss much of the movie, I thought. So, I got up and walked out of the theater, lit up and smoked away. As I smoked and enjoyed my cigarette I was grateful that I was able to get my nicotine fix. However, as I was soon to discover, I was LOCKED OUT of the theater and I could not get back in. I tried every door and nope, they were all locked. So, I had to go home, without my date.

When I was a three-pack-a-day smoker, I was catching a flight to New Jersey from an airport in Florida on what used to be Continental. I was in the waiting area when the airline announced that the flight would be taking off an hour late. Plenty of time to go outside and smoke a cigarette I thought to myself. So I set off to go outside and smoke, which was quite a walking distance past security. In order to get back to the gate I would be walking quite a distance and I would have to go through security again. So, I went outside, lit up and puffed away. When I came back indoors, I heard my name being called over the intercom system. I listened harder, not sure if I heard myself right. Sure enough, they were calling **MY NAME**. I panicked I rushed back to the gate, I was running. I went through security as quick as I could. I got to the gate and all of the other passengers were on the plane already and the plane would have left the gate moments later. I made the plane and sat in the one remaining seat. Since I quit smoking I've also stopped experiencing these type situations.

Stop Smoking Resource Center

Thinking about quitting?

We are conducting a research study designed to help smokers with schizophrenia and schizoaffective disorder to quit smoking.

If you are an adult smoker between the ages of 18-70, you may qualify to participate in this study. **We provide counseling, nicotine patches, and payments up to \$100 over 4 months**

For more information, call Dr. Steinberg at **732-235-4600**



Menthols *continued from page 2*

difficulty quitting. People who smoke menthols are more likely to smoke their first cigarette within 5 minutes of waking and to awaken during the night to smoke. Menthol cigarette smokers also have increased cravings for cigarettes compared to non-menthol smokers.”

It is important to note that all cigarettes are a health risk but menthol cigarettes are insidious. Menthol cigarettes mask the harshness and taste of inhaling cigarette smoke, suppresses coughing, and makes smoking more pleasurable. These effects can make menthol cigarettes more appealing to young smokers. Studies confirm that almost 80% of all menthol cigarettes are consumed by the African-American population. Studies have also shown that this population has difficulty quitting smoking and has disproportionately higher mortality rates related to smoking than smokers of non-menthol cigarettes.

Because of the high addiction level of African Americans to menthol cigarettes, cigarette manufacturers have targeted this population and their youth with advertising, discount coupons, etc. to keep this market addicted to menthol cigarettes. The NAACP (Nation Association for the Advancement of Colored People) is at the forefront of affecting a ban of menthol cigarettes in the United States. The FDA has moved forward on regulation for e-cigarette flavors (vaping) and has stated it will look into banning menthol cigarette. Assemblyman Herb Conaway, of Burlington, NJ, who’s also a medical doctor said, “Black males, in particular, are probably as a group the most affected by lung cancer related to smoking.” He is among the New Jersey politicians who sponsored a bill to ban the sale of menthol cigarettes in NJ last January. If the bill is passed, NJ would be the first state to enact a ban.

Canada passed a ban on sales of menthol cigarettes in September 2018 and the European Union’s ban is set to go into effect in 2020. Earlier this year, San Francisco voters passed a proposition that bans the sale of menthol cigarettes and flavored e-cigarettes in the city. There are many great reasons to join Canada, Europe and San Francisco in banning the sale menthol cigarettes. In the United States, this seems to be more of a political discussion rather than a public health issue. It could take years before a ban is implemented. Fortunately for me and you, we can ban menthol cigarette use by choosing to stop smoking or stop smoking menthol cigarettes in favor of a non-menthol cigarette. Please speak with a doctor or a mental health clinician. They will be happy to help you kick the menthol habit.

Dialectical Behavioral Therapy (DBT) in the Treatment of Smoking and Other Addictions

By Azeem Sitabkhan

What is addiction exactly? One of the most basic features of any addiction is that there is a compulsive repetition of behaviors that are known to be harmful, no matter how good they feel initially, but are chronically engaged in nonetheless. The tools for harming oneself might be smoking, alcohol, drugs, overeating, etc., but the result is the same.

One of the more promising therapies for addiction, Dialectical Behavioral Therapy, or DBT, was developed by Dr. Marsha Linehan to help treat compulsive patterns of self-harm with simple and effective techniques. At one point in her life, after years of struggle, Linehan began to truly accept herself as she was. She referred to this as “Radical Acceptance”, acceptance of life as it is, not as it is supposed to be. She also realized that she needed to change to survive. These seem to be in opposition: on the one hand, you have to take life as it is; on the other hand, change is essential for survival. But for real change to happen, both self-acceptance, and acceptance of the need for change have to come together. This blending of two seemingly opposite views is called a ‘dialectic’—and it’s the vision behind the name of Dialectical Behavioral Therapy.

There are four basic aspects to DBT: ‘mindfulness’, ‘interpersonal relations’, ‘emotion regulation’, and ‘distress tolerance’. ‘Mindfulness’ is quite simply about becoming focused on the present moment as opposed to the past or future, and to be aware and accepting of what is happening both within and outside without making judgments.

The second skill-set focuses on ‘interpersonal relations’. This module teaches how to set limits and safeguard oneself and one’s relationships.

The third, ‘emotion regulation’, teaches how to identify, regulate and experience emotions without becoming overwhelmed and acting on impulse.

The fourth area is ‘distress *continued on page 6*

Experimental Drug *continued from page 2*

or a stress inducing drug to try to make them relapse. The research team at Scripps says that there is still work to do to improve the NicA2-J1 enzyme so it can be used as a drug. They also want to do animal studies with it against Chantix. Chantix is considered to be the most effective drug therapy for quitting smoking on the market. If all goes well, they can move on to clinical trials to test it in humans.

Support Group *continued from page 1*

riding horses on the range, one exclaiming to the other “I miss my lung, Bob!” Another depicting a tongue licking a dirty ash tray.

I also remember our various clients in the group each informing us of their trials and tribulations on how to quit smoking. Some clients consumed a pack of cigarettes or more a day. Some consumed individual cigarettes which they bought from convenience stores (I believe they were called “loosies”). Other people in the group were concerned with such issues such as weight gain after they quit smoking. Others were concerned with the foul odor they were held prison to.

There were also the positive aspects that were discussed such as food tasting better, “well winded breathing”, and maybe the greatest reward, the money they could save.

Some more of the great rewards came with the prevention of serious disease. Afflictions such as lung cancer, heart attack and stroke were greatly reduced leading to greater longevity. Elimination of second hand smoke in one’s household prevented danger to family members. Employers were willing to hire because of greater productivity and lower insurance premiums. And overall greater motivation in life with a secure and happy state of mind and a bright future. All in all the group produced camaraderie and warmth which enhanced an atmosphere conducive to smoking cessation. The various clientele giving support and empathy showed a great deal of understanding to each other’s plight. By attending support groups, patients can see a breakthrough out of the foggy quagmire which engulfs those of us caught up in the bondage of smoking.

New Crackdown *continued from page 1*

systems, e-pipes, e-cigars, vape pens and any device that is electronic and produces a nicotine vapor which is then inhaled. The FDA coins the term ENDS or Electronic Nicotine Delivery Systems.



The end of November 2018 order was part of a sweeping government action that targeted both makers and sellers of e-

cigarettes. Juul is the most popular e-cigarette with a market share of 72%. Juul Labs, R.J. Reynolds Vapor Co.'s Vuse, Imperial Brands' Blu and Logic are the brands that are working with the FDA to curb sales to minors. If Juul Labs and the other major manufacturers fail to halt sales to minors, the agency said, it could remove their flavored products from the market. The FDA also raised the possibility of civil or criminal charges if companies are allowing bulk sales through their websites.

The FDA said it was sending warning letters to 1,100 retailers — including convenience stores, gas stations, pharmacies, vape shops, and other locations selling e-cigarettes locations that were inspected regarding the sale of e-cigarettes to minors and failed. An excerpt from the warning letter is as follows:

“On [Inspection date] , an inspector representing the FDA completed an inspection of the establishment located at [Address, City, State Zip Code]. During this inspection, the establishment was in violation because you or your employee sold an electronic nicotine delivery system (ENDS) product to a minor and failed to check identification to verify purchaser's age for a purchaser under the age of 27.”

The FDA issued another 131 fines, ranging from \$279 to \$11,182, for selling e-cigarettes to minors.

Investigators for the Food & Drug Administration (FDA) raided the San Francisco headquar-

ters of Juul Labs at the end of September 2018, which yielded over a thousand pages of documents related to their marketing practices. The FDA has been increasingly aggressive in their drive to keep e-cigarettes out of the hands of minors.

Juul Labs, facing so much government pressure, announced on Tuesday November 13th, 2018 that it would stop selling most of its flavored e-cigarette pods in retail stores and would discontinue its social media promotions. The Juul Labs Action Plan can be read online.

On Thursday, November 15th, 2018, the FDA said that it will require e-cigarette sellers to have a separate, walled-off area to sell e-cigarettes that is inaccessible to minors. It is not seeking an outright e-cigarette flavor ban at the moment, noting that most of the manufacturers have been willing to comply and stop making flavors accessible to teens.

Dialectical *continued from page 5*

tolerance'. This area is focused on developing skills to cope with crises when emotions become overwhelming, like during a death, sickness, etc., without relapsing into addictive behaviors like smoking.

Addiction is very often described as a sort of hell—a world of dependence, pain, desperation, and loss. DBT may be a useful roadmap out of this. Using DBT many are able to reclaim their power by becoming more comfortable with their emotions and feelings. It is a way of realizing that feelings aren't something to avoid or diminish with smoking and drugs. On the other hand, DBT allows one to understand that feelings are the very fabric of life itself. And through this insight, many are able to break free from the chains of addiction.



Creatively Inclined

CHOICES is proud of our peers who are creatively inclined in the arts, poetry, and writing. Are you an artist, poet, or writer and want to see your work in print? We would love to share your art work, poem, or story! Please contact us via email at dooleyperc@rutgers.edu.

Letter from CHOICES participant, Joan E.

I testified at the seminar also. I am now 10 yrs. free of smoking and very thankful to God and ever leaning on Him to remain so. I was raised in a smoker's home, both parents and thought this was normal. I smoked as a hidden smoker as a teenager. I was hooked yet wanted never to had started. I felt ashamed when I became a Christian. I tried stopping but had no success. I got married at 20 and soon had a family of 5 children. I had quit during this time with occasional lapses. At 40 I was diagnosed mentally ill and smoked with a vengeance, angry at God, and in hopeless denial. My father at 60+ had a quadruple heart bypass and quit smoking. He gave me hope that it could be possible for me also. My six siblings smoked also. Two have quit by now as well as me. I tried many ways and gradually weaned myself off. I am at peace with God and myself now. I am clean and have turned to various projects like Bible study and teaching, art, and music to keep me occupied. I hope to be a testament to others and encourage them about a clean, busy, peaceful, joyful life without smoking. I am 61 and thank God smoke-free.

Don't Light Up *By Karen C*

What is that in your hand?

Is light up the plan?

And on the beach, stick it in
sand

Clean up your act

Look at yours, you are all black

Why not just not buy another
pack?

Yes you enjoy but they make
you sick

Why not just try some else to
pick or try a piece of gum or
candy?

And after a while you 'll feel all
dandy!



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The CHOICES team will come to you! The **CHOICES** team of peer advocates will visit your group or program in New Jersey and provide mental health consumers with education about the consequences of smoking and tobacco products along with information regarding treatment resources available to make quitting easier. Call us at 732-235-8232 to set up a date and time.



CHOICES is a partnership between Rutgers-RWJMS Division of Addiction Psychiatry, the Mental Health Association of New Jersey (MHANJ) and the NJ Division of Mental Health and Addiction Services and funded by the NJ Department of Health.