Smoking and surgery
If you smoke, you increase your risk of serious problems during and after surgery.

Doctors strongly recommend stopping smoking before surgery.
Before surgery — a good time to quit

Quitting smoking before surgery lowers your risk of serious problems and may mean a faster recovery, less time in hospital and less need for antibiotics.

The chemicals in cigarettes affect how your body works, and how well it copes during and after surgery. As soon as you stop smoking your body begins to repair itself.

The earlier you quit, the greater your chances of an easy recovery.

Quitting completely is the only way to stop and reverse the damage done by cigarettes. Cutting down the number of cigarettes you smoke in the weeks before surgery does not appear to reduce the risks of complications at all.

You can cut down before stopping smoking completely, but your body will only start to recover from the time you stop completely.
What are the risks from smoking?

If you continue to smoke right up to the time you have surgery, you will be more likely to:

- reduce the oxygen supply to your heart and body
- have difficulty breathing during and after surgery
- increase your risk of wound infection
- increase your risk of lung complications
- slow down or harm the healing of bones, skin and wounds
- reduce how well some pain-relieving and other drugs work.

If you smoke, you are more likely to be admitted to intensive care and to need life support.
Smoking and anaesthesia

When you have surgery, you usually have an anaesthetic drug so the operation can be performed without pain. If you are unconscious, your breathing and heart need monitoring to prevent problems.

Smoking adds to the stress of surgery under anaesthesia by reducing the oxygen supply to your heart and body, and increasing the risk of breathing difficulties and infection.

Even quitting smoking the day before surgery will help your body get the oxygen it needs.

If you have heart disease, where your supply of blood and oxygen is already reduced, then it is best to stop smoking at least 24 hours before surgery.

This reduces the risk that the carbon monoxide in cigarette smoke will damage your body or disturb the rhythm of your heart.

Stopping smoking in the weeks before surgery will cut down your risk.
When you quit

After **12 hours** almost all the nicotine is out of your bloodstream. Your blood pressure is more stable and your heart rate is slower. Your heart is less stressed and so needs less oxygen to work properly.

By **24 hours** the level of carbon monoxide (CO) in your blood has dropped. Carbon monoxide in cigarette smoke replaces some of the oxygen in your blood. As CO drops, your blood can supply **more oxygen** to your heart, muscles and skin.

By **1 week** your lungs’ natural cleaning system will have begun to recover and over the following weeks it will gradually become better at removing mucus, tar and dust from your lungs.

By **3 to 4 weeks** your body is better at fighting wound infections, helping surgical cuts to heal.

By **4 to 6 weeks** you will be less likely to cough. This helps your breathing under anaesthesia, and after surgery, cuts down on sharp pains from coughing for people with chest or abdominal (gut) surgery.
By 8 weeks your risk of lung and breathing complications will be lower than a continuing smoker. These risks include infection such as pneumonia, and other problems which make it harder to breathe. Your immune system and your response to anaesthetic drugs will also improve.

How well you recover may also depend on other things such as whether you already have an advanced smoking-related illness.

**After surgery — staying stopped**

After surgery, it is important that you do not start smoking again, even if you only quit the day before surgery. Allow your body to recover and heal properly.

Any gains you made by quitting before surgery will be lost if you start smoking again.

Smoking makes recovery harder by stressing your heart and lungs.

Smoking can slow down and interfere with the healing of bones, skin and other body tissues. Smoking narrows the tiny blood vessels in your skin, restricting blood flow and oxygen to cuts trying to heal. Infection is more likely.
In some types of surgery, skin at the site of surgery is more likely to die if you smoke.

**Staying smokefree means you:**
- help your recovery
- cut your risk of heart attack and stroke
- help protect your eyesight, bone health, teeth and gums
- have a lower risk of lung disease and cancer than if you keep smoking
- save a lot of money.

**Planning to quit**

You won’t be able to smoke while you are in hospital, so take this chance to stop for good.

Some people see quitting as a private battle between themselves and cigarettes. But getting help is not a sign of weakness or lack of will power – it’s a smart way to quit.

There are two types of help to include in your plan.
Get some support

- Your support may be Quitline, a website, a quitting course leader or a doctor or other health professional with special training to help people quit.
- A support service gives you structure, motivation, support, new skills and confidence.
- Getting support will give you a much greater chance of long-term success.

Use nicotine replacement therapy products or quitting medications

These products increase your chances of quitting and reduce withdrawal symptoms such as cravings, irritability and anxiety. Nicotine replacement therapy products include nicotine patches, lozenges, mouth spray, gum and the inhalator. Or your doctor can prescribe the medicines Zyban (bupropion) or Champix (varenicline).

- Nicotine replacement therapy products give you a lower dose of nicotine and none of the other damaging toxins in cigarette smoke. Using these products to quit is much safer than continuing to smoke.
There is help available

Talk to your doctor and surgeon

Let your doctor (general practitioner) and your surgeon know about your smoking.

Your doctor can advise you about using nicotine replacement therapy products or prescription medicines to quit. Nicotine patches, Zyban and Champix are available through the Pharmaceutical Benefits Scheme with your doctor’s prescription. This means they are cheaper.

Make sure the hospital or your surgeon knows all the medications you are taking when you are admitted to hospital.

QuitCoach: www.quitcoach.org.au

QuitCoach is a web-based computer program that asks you questions and helps you quit by giving free personal advice tailored to your needs.

QuitTxt

QuitTxt provides regular SMS messages including tips and encouragement to keep you on track throughout your quit attempt. To begin, all you need to do is register and complete a brief questionnaire at www.quit.org.au/quittxt.
**Call the Quitline 13 7848**

Quitline offers help with quitting for the cost of a local call. Your Quit Specialist is trained and experienced and knows how tough quitting can be. They will talk with you about your difficulties in quitting and will give you reliable information and support.

Your call is confidential. This means you don’t have to give your name if you don’t want to. You can talk with your Quit Specialist once or as many times as it is helpful. If you decide to use the Quitline callback service, Quit Specialists will arrange to call you before and after your quit date at times convenient to you. This has been shown to be very effective in helping smokers quit and stay stopped.
Remember the 4Ds

**Delay** acting on the urge to smoke. After a few minutes the urge to smoke weakens, especially if you then do the following:

**Deep breathe.** Take a long slow breath in and slowly release it out again. Repeat three times.

**Drink water.** Sip it slowly holding it in your mouth a little longer.

**Do something else.** Take your mind off smoking by taking action. Try putting on some music, going for a walk, or calling a friend.

Quit Victoria is a joint initiative of Cancer Council Victoria, the Department of Health and Human Services, the National Heart Foundation and the Victorian Health Promotion Foundation.

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