

Q & A Mindline



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Q I want to quit smoking but have failed a few times and have now lost hope. Please help!

Smoking is the worst vice one can have, but never lose hope about anything! Tobacco contains nicotine, which is highly addictive, perhaps more so, than heroin. Inhaled tobacco also contains carbon monoxide, tar and 60 odd chemicals, which seriously damage the health, including an increased risk of developing cancer. Unfortunately, this information is not enough for many to give up smoking.

You may pat yourself on the back, as your decision to give up smoking may be the best initiative, you will take in your life. Don't worry about the lack of success, but rather think about the positive influence you have on yourself and others, with your efforts. Remember, motivation is dynamic and subject to enormous fluctuation. So, try one day at a time, building on successes of the previous day, or learning from lack of any.

Write a smoking diary to identify patterns of smoking, especially times of critical cigarettes. Cut down on non-essential cigarettes first, before you tap into quitting ones after meals etc. Also, make a formal announcement of your

intentions to friends and family. This will help you to stick to your decision.

Choose an anchor (ideally your spouse or partner) to encourage, support and push you to achieve your aims. Delay and distract urges to smoke with fluids, healthy snacks and mint. Initially, avoid the company of smokers and stay away for drinking parties, where smoking is often apt. Take up exercise, to reap the benefits of clearer breathing.

Importantly, consider nicotine substitutes like the patch, chewing gums or e-cigarettes. For some, medication to reduce craving and associated anxiety may be indicated. Consult a specialist to prevent relapse.

However, keep it in mind that you have failed, when you have failed to try! It's better to have tried and not succeeded, than to not have tried at all and live in guilt. Good luck and spread the word.



Q My husband has been to several hospitals with the complaint of chest discomfort and a strain while breathing. His ECGs and some blood tests are usually normal, but he fears having a heart attack like his 40-year-old friend at the gym. His relief upon visiting a hospital and a brief supply of some calming tablets is short-lived. He appears depressed, his lifestyle is restricted and he has stopped travelling alone or away from home. Despite recommendations, he doesn't see a psychiatrist. Please advise a way forward.

It appears that your husband may be suffering from a panic attack, which is a severe and recurring form of anxiety.

Panic manifests with physical symptoms like a racing heartbeat, chest tightness/pain, shortness of breath, along with dizzy spells, nausea, dry mouth, sweating, etc. and psychological

symptoms like apprehension, fear of losing control, passing out, having a heart attack and dying.

Once a panic attack is experienced, the individual gets into a vicious cycle of anticipatory fear, heightened vigilance and misinterpretation of any bodily changes. It is followed by escalation of anxiety and engagement in safety or avoidance behaviour. Re-assurance and help-seeking is a form of safety behaviour that reinforces and maintains anxiety.

It's not uncommon for those suffering from panic attacks to visit hospitals once or repeatedly and either requesting or being asked to undergo investigations, including blood and ECGs to evaluate health conditions such as thyroid and heart problems. Considering his test results are normal and serious medical conditions are ruled out, we must address contributory lifestyle factors such as stress, job burnout, caffeine and alcohol excesses, besides depression and other anxiety disorders.

Let him know that panic attacks are harmless, especially when you stop reacting to it. At each episode one needs to tell themselves that the panic will pass (as it always does) and all you need to do is do nothing!

Apart from changes in lifestyle factors, consider mindfulness meditation to attain awareness of bodily symptoms, in a non-catastrophic manner, which can enable switching from reactive to proactive response mode. Behavioural therapy may also be useful for overcoming panic attacks.

Medication will have a role to play in the initial stages, but many anxiety medications like clonazepam or alprazolam or diazepam are addictive and must be taken sparingly and only for a short duration (usually under three-four weeks). Antidepressants are safer and non-addictive. Importantly, consult a psychiatrist for a treatment programme.