

What Women Need to Know about Smoking and How to Quit

Tobacco smoking (cigarette smoking in particular) remains the leading preventable cause of death among American women and poses one of the most significant threats to public health in the United States.

Essential Facts

- All women should be screened for any tobacco use and provided with support for smoking cessation. Preconception care recommendations by the Centers for Disease Control and Prevention (CDC) stress the importance of pursuing smoking cessation as part of preconception care.
- For women who are not pregnant or breastfeeding, counseling and medications can improve a woman's chance of quitting
- Once a woman becomes pregnant, there are fewer medication options and more precautions.
- Certified nurse-midwives (CNMs®) and certified midwives (CMs®) can make a major contribution to the long-term health of women by identifying those who smoke and providing appropriate counseling on smoking cessation.
- Scientific evidence demonstrates that patients who stop tobacco use have substantial overall health benefits, regardless of the number of years of tobacco usage. Smokers lose at least one decade of life expectancy, as compared with those who have never smoked. Cessation before the age of 40 years reduces the risk of death associated with continued smoking by about 90%.
- Tobacco use can impair fertility, delay conception, and increase a women's risk for ectopic pregnancy.
- Tobacco use increases women's risk of chronic diseases such as cancer, and cardiovascular and pulmonary diseases.
- Smoking is a significant cause of severe gum disease in the United States. Smokers are three times more likely to have gum disease than nonsmokers. Gum disease can lead to tooth loss.
- Smokers with HIV are more likely to develop the harmful consequences of smoking than smokers without HIV. These illnesses include cancer, heart disease, or stroke. Smokers with HIV are also more likely to develop HIV-related infections than nonsmokers with HIV.



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- Secondhand smoke is a mixture of gases and fine particles. Exposure to secondhand smoke occurs in homes, vehicles, and workplaces, and includes:
 - Smoke from a burning tobacco product such as a cigarette, cigar, or pipe
 - Smoke that has been exhaled or breathed out by the person or people smoking
 - More than 7,000 chemicals, including hundreds that are toxic and about 70 that can cause cancer

Secondhand smoke during pregnancy can cause a baby to be born at low birth weight. Secondhand smoke is also dangerous to young children. Babies exposed to secondhand smoke:

- Are more likely to die from SIDS;
- Are at greater risk for asthma, ear infections, bronchitis, pneumonia and respiratory symptoms;
- May experience slow lung growth.

Eliminating smoking in indoor spaces is the only way to fully protect nonsmokers from secondhand smoke exposure.

- Thirdhand smoke is a relatively new term. Thirdhand smoke is generally considered to be residual nicotine and other chemicals left on indoor surfaces by tobacco smoke. The residual nicotine and chemicals may cause devastating health problems for babies and young children, such as asthma and other breathing issues, learning disorders, and cancer.

Problems With Smoking During Pregnancy

- Maternal smoking during pregnancy increases the risk of ectopic pregnancy, premature rupture of membranes, placental complications of pregnancy, and preterm delivery.
- There are significant fetal and infant risks associated with smoking during pregnancy: preterm delivery, orofacial cleft defects, and sudden infant death syndrome (SIDS).
- Children whose parents smoke are more likely to suffer respiratory illness and ear infections.

When you quit smoking, you help protect your infant from the dangers of secondhand smoke and reduce the risk of SIDS.

Myths vs. Facts about Smoking During Pregnancy

MYTH #1: *Smoking hasn't seemed to have any impact on my health. I got pregnant without any difficulty.*

FACT: Although you did not have difficulty this time, in future pregnancies you may have more trouble than nonsmokers getting pregnant. But your chance of getting pregnant goes back to normal when you quit smoking. You also lower your risk for many other health problems.

MYTH #2: *I smoked during my last pregnancy and had a healthy baby, so this baby will be healthy, too.*

FACT: Every pregnancy is different. If you smoked and had a healthy baby in the past, you cannot be certain the next pregnancy and baby also will be healthy.

MYTH #3: *There is nothing wrong with having a small baby.*

FACT: Pregnant smokers are more likely to give birth before their babies have had a chance to develop fully. Smoking during pregnancy increases the chances of having a small or preterm baby (born before term). Preterm babies are more likely than normal weight babies to have serious health problems. Babies of women who smoked during pregnancy may grow more slowly in the womb, which isn't healthy. Babies born early or who grew slowly can have more health problems as newborns, toddlers, or even adults. Some babies who are born early have problems in school.

MYTH #4: *I am three months pregnant. There is no point in stopping smoking now. The damage is done.*

FACT: It's never too late to quit smoking. There are benefits to quitting smoking at any stage of your pregnancy. Quitting smoking will help your baby's growth and development and increase the likelihood of having a healthy pregnancy and a healthy baby.

MYTH #5: *Smoking relaxes me, and being relaxed is better for me and my baby.*

FACT: You may feel calmer when you smoke, but smoking actually has the opposite effect on your body. Smoking speeds up your heart rate and increases your blood pressure. Every puff of a cigarette also increases the carbon monoxide in your blood and in your baby's blood, making less oxygen available to your baby.

MYTH #6: *Quitting smoking during pregnancy will be too stressful on my baby.*

FACT: Quitting smoking is one of the best things you can do for your health and your baby's health before and after the baby is born.

MYTH #7: *Smoking fewer cigarettes during pregnancy is good enough.*

FACT: There is no safe level of smoking. Even a few cigarettes a day means harmful chemicals will reach your baby and damage your health. Quitting at any time during pregnancy reduces the harmful effects of smoking on your baby. Your baby will not get the same benefits if you just reduce the number of cigarettes you smoke.

MYTH #8: *If I stop smoking, I'll gain too much weight.*

FACT: Many women are concerned about gaining weight when they quit smoking but gaining weight is normal and expected as part of a healthy pregnancy. Increasing the number of calories you eat during your pregnancy helps you get the energy, vitamins, and minerals you and your baby needs. Talk to your provider to determine how much weight gain is healthy for you and your baby.

MYTH #9: *The only way to quit smoking is cold turkey.*

FACT: Cold turkey (quitting smoking abruptly, rather than gradually) is not the only option pregnant women have to help them become and stay smoke-free. Toll-free quit lines, online support communities, mobile apps, and other resources are available to help you take the next step on the path to being smoke-free. If you are pregnant and thinking about quitting smoking, talk to your provider before using any medications or herbal products. Nicotine Replacement Therapy (NRT) and herbal products for smoking cessation have not received FDA approval for use in pregnancy; however, you should discuss the risks/benefits of these options with your provider. Learn more about pregnancy and medicines at womenshealth.gov.

MYTH #10: *I smoke, so I should not breastfeed my baby.*

FACT: The American Academy of Pediatrics encourages mothers who smoke to quit smoking, but continue to breastfeed their babies even if they don't quit smoking. Breast milk provides your baby with many benefits, including the nutrients he or she needs for healthy growth and development.

The sooner a woman stops smoking, the better. But even if she stops late in pregnancy, it will be beneficial to the woman and her baby.

Ask your midwife or other health care provider about treatment options for smoking cessation.

Resources to Quit Smoking

- <http://www.ceasesmoking2day.com/>
- <http://www.fda.gov/newsevents/publichealthfocus/ucm172906.htm>
- http://www.marchofdimes.com/pregnancy/alcohol_smoking.html
- <https://www.smokingcessationandpregnancy.org>
- 1-800-QUIT-NOW (1-800-784-8669). The quitline provides special resources for pregnant women.
- www.cdc.gov/reproductivehealth/TobaccoUsePregnancy
Information on the effects of smoking during pregnancy
- Smokefree.gov
Web site dedicated to helping consumers quit smoking.
- [Smokefree Women](http://women.smokefree.gov)
<http://women.smokefree.gov>
Web site that helps women quit smoking.
- [Smokefree Teen—](http://www.cdc.gov/reproductivehealth/TobaccoUsePregnancy)
<http://www.cdc.gov/reproductivehealth/TobaccoUsePregnancy>
Web site that helps teens quit smoking.
- [Smokefree.gov en Español—](http://espanol.smokefree.gov)
<http://espanol.smokefree.gov>
Web site in Spanish dedicated to helping consumers quit smoking.
- [Smokefree QuitGuide App—](http://smokefree.gov/apps-quitstart)
<http://smokefree.gov/apps-quitstart>
Smokefree QuitGuide app for your smartphone available from iTunes.
- [Help for Smokers and Other Tobacco Users—](http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/clinicians/tearsheets/helpsmokers.html)
<http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/clinicians/tearsheets/helpsmokers.html>
Booklet that tells consumers about ways you can quit.

- [Pathways to Freedom: Winning the Fight Against Tobacco—](http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/pathways/index.htm)
http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/pathways/index.htm
Guide that addresses tobacco issues specific to African Americans.
- [FDA 101: Smoking Cessation Products—](http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm198176.htm)
<http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm198176.htm>
Article discussing FDA approved products that help consumers quit smoking.
- [Quit Tobacco. Make Everyone Proud—](http://www.ucanquit2.org/)
<http://www.ucanquit2.org/>
A Department of Defense-sponsored Web site for military personnel and their families.
- [Harms of Smoking and Health Benefits of Quitting—](http://www.cancer.gov/cancertopics/factsheet/tobacco/cessation)
<http://www.cancer.gov/cancertopics/factsheet/tobacco/cessation>
Fact sheet from the National Cancer Institute.
- [Quit Smoking—](http://www.ahrq.gov/patients-consumers/index.html#smoking)
<http://www.ahrq.gov/patients-consumers/index.html#smoking>
Tools and guides to help quit smoking.
- [Quit Tips—](http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/quit_tips/index.htm)
http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/quit_tips/index.htm
Five tips to help quit smoking.
- [Tobacco Cessation—You Can Quit Smoking Now!](http://www.surgeongeneral.gov/initiatives/tobacco/index.html)
<http://www.surgeongeneral.gov/initiatives/tobacco/index.html>
The latest information to help consumers quit from the Surgeon General's Web site.
- [You Can Quit Smoking—](http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/you_can_quit/index.htm)
http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/you_can_quit/index.htm

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