Think Cigars and Pipes Are Safer Than Cigarettes? Think Again

If pipe and cigar smokers think their habit is safe, a study in the Annals of Internal Medicine puts that idea up in flames.

Toxins in Cigars and Pipes
The effects of cigar or pipe smoking in close to 3,500 adults, ages 48 to 90 were analyzed. It was found that people who smoke cigars or pipes inhale toxic substances. Research found cigar and pipe smokers had significant levels of cotinine in their urine. Cotinine is a signal that chemicals in tobacco smoke were absorbed into the body. This means that smoking cigars or pipes increases the risk for smoking-related health problems.

Breathing Problems
People who smoke cigars or pipes more than double the risk for airway obstruction compared with nonsmokers. And the more they use cigars or pipes, the greater their breathing problems. Cigar and pipe smoking increases the risk for chronic obstructive pulmonary disease (COPD), the third leading cause of death in the U.S.

Bottom line? No form of smoking is safe. For help quitting, see page 4.
How Can Strength Training Help Me?
Strength training, as part of your exercise program, can help battle some of the muscle weakness that often occurs in COPD. It may also help to decrease breathlessness.
As a reminder, always talk with your doctor before beginning any new exercise program.

Some Tips for Strength
Many people with COPD experience weakness in their arms and legs. Strength training with weights can improve strength and function in these muscles.
› Work all major muscle groups, completing about eight to 10 exercises total.
› Perform one set of 8 to 12 repetitions for each exercise.
› Aim for two sessions a week.

Be sure to talk with your health care provider about these topics:
› Writing and keeping a COPD Action Plan up-to-date
› Having a nutritional assessment
› Reviewing your exercise routine
› Taking part in a pulmonary education program
› Quitting smoking, if you smoke

Although these are suggested guidelines for care, please check with your benefits plan for coverage.

Your Nutritional Assessment
A healthy diet is essential for managing COPD. Some people with COPD who don’t eat well have weakness in the muscles that help the lungs work and therefore, experience more hospitalizations because of breathing problems. So it’s a good idea to see a registered dietitian (RD) for an assessment of your nutritional needs. An RD can help you determine what to eat to better manage your condition and overall health. He or she can talk with you about what you’re eating and what foods you like and don’t like. And you can get help with planning meals and snacks that help keep your weight in an ideal range and provide the nutrients like vitamins and minerals you need to stay well. Ask your health care provider if a dietitian would help you. Be sure to check with your health plan to determine if dietitian services are covered.
Keeping Your Home COPD-Friendly This Summer

Are you beating the summer heat by spending more time indoors? If so, play it smart by making sure your home is lung-friendly.

Q | Could the air in my house be unhealthy?
A: Absolutely. Household chemicals, fumes, dust, mold, and allergens can be present without your knowing it. Breathing this polluted air raises your risk for infections and COPD flare-ups. It may also cause headaches, dizziness, dry eyes, and nasal congestion.

Q | What pollutes indoor air?
A: Harmful chemicals and gases may come from many sources. These include gas-burning stoves and furnaces, cleaning products, varnishes, paints, air fresheners, scented candles, and pesticides. Particleboard, other building materials, and new carpets also give off fumes. Dust, mold, mildew, and pet dander are other troublemakers. In some people, they trigger allergies and asthma, making breathing more difficult.

Q | How can I improve the air in my home?
A: Keep harmful chemicals out of your home. When cleaning, avoid ammonia, bleach, and petroleum-based products. For an all-purpose natural cleaner, mix one-half cup white vinegar, one-fourth cup baking soda, and one-half gallon water. Make sure gas-burning appliances and furnaces are properly vented. Use an exhaust fan or open windows when cooking.

To cut down on dust, regularly clean ducts and replace filters in heating and air conditioning systems. Ward off mold by using fans vented to the outdoors in bathrooms and kitchens. Air cleaning devices that use HEPA (high-efficiency particulate air) filters can also help remove pollutants. Avoid air cleaners that use ozone or de-ionizers to work.

Q | What about second-hand smoke?
A: Tobacco smoke is a major cause of dirty indoor air, even if you aren’t a smoker. The International Journal of COPD reports people with COPD who are exposed to secondhand smoke have poorer health, more ER visits, and more hospital stays.

FREE Indoor Air Pollution Guide
Get a free guide to reducing indoor air pollution from the Environmental Protection Agency, www.epa.gov/iaq, type in "care for your air" and click on the "Care for Your Air" pdf.
Creative Ways to Quit Smoking

Trying to ditch the smoking habit? If going cold turkey just isn’t cutting it, it’s time to get creative.

**Quitting smoking** may be one of the most difficult things you’ll ever do. Most people make several attempts before they succeed. A little extra help may be all you need to quit for good.

First, talk with your doctor about quitting. Ask if medicine or nicotine replacement therapy is right for you. Then try some of these strategies to boost your chances of success.

**Great idea #1: Exercise.**
In a study reported in *Psychopharmacology*, a single session of exercise reduced the desire to smoke in smokers. Walking, cycling, or other type of regular exercise can help prevent weight gain and reduce stress associated with quitting.

**Great idea #2: Get a new hobby.** The physical addiction to nicotine is a big hurdle to overcome, but the mental part of the addiction may be more difficult. Changing your routine and developing new interests can help you stop for the long term. Whether you take up crossword puzzles or learn a new craft, new activities and routines can take your focus off the urge to smoke.

**Great idea #3: Guard against sneaky rationalizations.**
Thoughts like, “I’m having a rough day, so I’ll have just one cigarette,” can tempt you to give in to cravings. Watch out for these thoughts, and write them down. When one of these thoughts appears, recognize it and let it go. Also have a plan to distract yourself. For instance, plan to take a walk or do housework until the craving subsides.

**Great idea #4: Phone in.**
Telephone counseling doubles the success rate of quitting. It can be more convenient than attending a support program in person. You can talk with a trained smoking cessation counselor through the government’s quitline, **800-QUIT-NOW**, and the American Lung Association’s Lung Helpline, **800-LUNGUSA**.
Great idea #5: Text your way to smoke-free living.
A study reported in The Lancet found that when people trying to quit smoking received regular, encouraging text messages on their mobile phones, success rates doubled. Use texting to stay in touch with a friend who is also quitting. Or ask your friends and family to text you supportive messages to help you through rough days. The National Cancer Institute’s LiveHelp program (www.smokefree.gov) lets you text a counselor for help and support.

Great idea #6: Go online.
Get help in the privacy of your home with Web-based smoking-cessation resources. Good options are:
❯ The American Lung Association’s Freedom From Smoking Online program (www.ffsonline.org)
❯ Smokefree.gov’s Step-by-Step Quit Guide (www.smokefree.gov)
❯ QuitNet, a comprehensive online quit-smoking service, offering the tools and support needed to quit and stay tobacco-free (www.quitnet.com/qnhompage.aspx)
❯ The American Cancer Society’s Guide to Quitting Smoking (www.cancer.org/Healthy/StayAwayfromTobacco/GuidetoQuittingSmoking/index)

COPD and Anemia: Is There a Link?
Sometimes people with COPD may develop a condition called anemia. Anemia happens when a person’s blood has too few red blood cells and can’t carry enough oxygen.
For those who have anemia, they may often feel tired and weak or get dizzy and short of breath. Physical activity may seem harder because the body’s tissues lack oxygen. Anemia can even affect mental functioning.

A Different Kind of Anemia
A lack of iron in the diet is the typical cause of anemia. However, those with COPD may get anemia for another reason—inflammation caused by COPD. And scientists think inflammatory substances, as a result of COPD, may harm red blood cells, which could in turn trigger anemia.

Tests and Treatment
Talk with your doctor if you are concerned about anemia. Anemia is diagnosed with blood tests, including those that measure your hemoglobin level and your red blood cell count. According to the National Institutes of Health, anemia in people who have a chronic disease is usually mild and may not need to be treated. Iron pills help only if blood iron levels are low. Sometimes a medicine is given that helps the body make more red blood cells. But more answers are needed. Researchers are studying anemia in COPD to find better ways to treat it.
You are probably careful to take your medicines and manage your COPD symptoms. So now, take a moment to check your emotional health. Feelings of stress, worry, frustration, and feeling down are common when you have a chronic disease. And as many as four in 10 people with COPD suffer from depression or anxiety. These mood changes can affect your COPD. Depression is linked to more shortness of breath, fatigue, doctor visits, and hospital stays.

**Coping with Tough Emotions**
By taking care of your emotional health, you’ll enjoy life more and be better able to take care of your COPD. The National Emphysema Association suggests taking these steps to deal with stress, worry, and other normal—but unpleasant—emotions:

❯❯ Share your feelings with your spouse, friend, or clergyperson, or join a support group.
❯❯ Get a good night’s sleep, get dressed every day, and follow a realistic schedule.
❯❯ Stay involved with people and activities that you enjoy.
❯❯ Get regular physical activity. Summer is a great time for taking daily walks or puttering in the yard.

**When Mood Problems Becomes More Serious**
Some mood problems are more severe. Recurring worries and fears, often about health or finances, can be a symptom of an anxiety disorder. So can sudden, intense feelings of dread or panic. Signs of depression include feeling sad, hopeless, or worthless. Weight loss or gain, changes in appetite, sleeping too much or too little, feeling tired a lot, and losing interest in your usual activities are other signs.

Depression and anxiety may occur together. Although this may feel overwhelming, don’t give up. Talk with your doctor. Most people can be helped by therapy and medicine.

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**Get Support, Join the "Better Breathers Club"**
The American Lung Association’s Better Breathers Clubs are a great way to meet others with COPD and get emotional support. Visit [www.lungusa.org](http://www.lungusa.org) and search “Better Breathers Clubs” for more information.
Eating Well

for a Healthy Weight

Most people love it when the needle on the bathroom scale goes down. For others, it’s unwelcome news. Many people with COPD become too thin, and this harms their health.

When you are underweight, you are more likely to get infections. Unintended weight loss leads to smaller, weaker breathing muscles, so it is harder for the lungs to work.

Why Do Some People Lose Weight Without Trying?

When every breath is an effort, the act of breathing burns 10 times more calories than normal. In severe COPD, other aspects of the disease cause weight loss. Appetite goes down and shortness of breath interferes with eating.

What Can You Do?

If you struggle to maintain your weight, try these ideas from the Academy of Nutrition and Dietetics:

❯ **Eat several smaller meals and snacks a day.** If your appetite is small, drink beverages before or after meals. Limit beverages that have empty calories such as sodas, coffee, and tea.

❯ **Emphasize nutrient-rich foods**—whole grains, milk products, meat, fish, poultry, fruits, and vegetables—rather than sweets, soft drinks, and chips.

❯ **Add healthy, concentrated calories to dishes.** Top soups and chili with grated cheese. Spread whole-grain toast with peanut butter. Add powdered milk and dried fruit to oatmeal, and top salads with avocado.

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**Chicken in Lime and Yogurt Sauce** Serves 6

**Ingredients**

- 6 6-oz. boneless chicken breasts

**Marinade**

- 2 scallions, chopped
- 4 cloves garlic, whole
- 1 teaspoon cumin
- ½ tsp. caraway seeds
- ½ tsp. freshly ground black pepper
- ½ tsp. salt
- 2 tsp. coriander seeds, crushed
- 6 strips lime peel, removed with a vegetable peeler and coarsely chopped (about 1 tsp.)
- 2 tbsp. lime juice
- ⅔ cup plain nonfat yogurt

**Directions**

Combine all ingredients, but the chicken in a large bowl. Add chicken breasts and marinate for one hour unrefrigerated or overnight refrigerated. Grill approximately five minutes per side.

**Each serving provides**

147 calories, 29 g protein, 1.5 g fat, 69 mg cholesterol, 3 g carbohydrate, less than 1 g fiber, 98 mg sodium

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**Talk with a Dietitian for More Guidance**

A dietitian can help you develop an eating plan that’s right for you. Ask your doctor if seeing a dietitian could help you.
What to Look for in a Sunscreen

Sunscreens offer protection against skin cancer. But with so many kinds to choose from, which should you pick?

Here’s what to look for:

› Protection against ultraviolet A (UVA) and B (UVB) rays
› A sun protection factor (SPF) of 30 or more.
› An indication that the sunscreen is sweat- or water-resistant
› Apply sunscreen 15 to 30 minutes before going out in the sun. And reapply every one to two hours or after swimming.