

Smoking and pregnancy

your prescription for a smoke-free life

SMOKING

Date

Woman's name

Your smoking assessment:

- Smoker ▶ ready to make a quit attempt
- Smoker ▶ not ready to make a quit attempt
- Recently quit (quit in relation to this pregnancy)
- Lives in a house where someone else is smoking (passive smoking)

Dependence:

Smokers who are addicted or dependent may need special help to quit.

- You are **probably** addicted or dependent on nicotine.
- You are **possibly** addicted or dependent on nicotine.
- You are **probably not** addicted or dependent on nicotine.

To help you quit, I recommend:

- talking to your general practice team about any difficulties you may face
- enlisting support and encouragement from your partner, family and friends
- encouraging your partner to quit with you
- using the '4 Ds'—delay cigarette, drink water, deep breathe, do something else
- making sure you have a plan for tackling your smoking habit, psychological and physical dependence
- reading information about smoking and passive smoking: QUIT resources
- referral to the Quitline or contacting Quitline on 13 7848 or 13QUIT

I have:

- faxed your referral to Quitline.

I would like to review your progress:

- in 2 weeks
- at your next antenatal visit.

Instructions:

Signature



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Pregnancy is a window of opportunity to quit smoking. A woman is more likely to quit smoking during pregnancy than at any other time in her life.

Should I get help or try to quit on my own?

Quitting smoking is tough and professional help from your general practice team and/or a support program really improves your chance of succeeding.

To succeed at quitting, you need to tackle all three areas of dependence:

1 Breaking the habit

The QUIT program and QUIT resources provide practical tips to help you quit.

2 Dealing with the psychological aspects of smoking

For many women, smoking has become like a friend or a part of your life. You may rely on nicotine to help you deal with emotions but you *can* learn to cope *without smoking*.

3 Withdrawal from nicotine

Use of nicotine replacement therapy (NRT) such as gum or lozenges is only recommended under medical supervision while pregnant or breastfeeding.

Quitting smoking is beneficial if you are planning a pregnancy or are pregnant, and after your baby is born. This means that:

- ▶ your baby is more likely to have a healthy birth weight and less likely to be premature
- ▶ your baby is less likely to need a special care nursery
- ▶ your baby is less likely to be a smoker later in life
- ▶ you are more likely to successfully breastfeed for longer and your baby will not be exposed to tobacco chemicals in your breast milk. (It is better for your baby to breastfeed even if you are smoking, but it is important to be smoke-free 20 minutes before and during breastfeeding.)

Other benefits include:

- ▶ improved chance of falling pregnant
- ▶ improved chance of a natural birth
- ▶ reduced risk of bleeding during pregnancy
- ▶ reduced risk of stillbirth or Sudden Infant Death Syndrome (SIDS)
- ▶ reduced risk of your baby suffering from asthma, lung and ear infections.

For more help, call Quitline 13 7848 or 13 QUIT

Pregnancy Lifescripts

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