Tobacco is a legal, and widely used, drug. About 9.6 million adults smoke in Great Britain. However, smoking is addictive and there is clear evidence that it damages health in many ways. Smoking is the main cause of preventable illness and death in the UK. Every year, smoking causes around 96,000 deaths.

Smoking is a major risk factor for cardiovascular (heart) disease, causing about 14% of deaths from heart disease. It causes around 80% of deaths from lung cancer and around 80% of deaths from chest conditions such as bronchitis and emphysema. More than one quarter of all cancer deaths are linked to smoking. These include cancer of the lung, mouth, lip, throat, bladder, kidney, pancreas, stomach, liver and cervix.

Smoking can also affect fertility, and damages your skin, teeth and sense of smell and taste.

**Smoking and HIV**

Smoking, in itself, does not make HIV infection worse. The rate at which HIV disease progresses or the number of CD4 cells lost is no greater in smokers than non-smokers.

However, there are higher levels of smoking among people with HIV than in the general population, with the accompanying health risks. For people taking HIV treatment who have an undetectable viral load, smoking has a much greater impact on life expectancy than HIV infection.
It’s well known that smoking increases the risk of heart disease, high blood pressure, and stroke. There is evidence that smoking is the main risk factor for heart disease in people with HIV. In addition, there is some evidence that having HIV may itself increase the risk of heart disease. Further, some anti-HIV drugs can cause increases in blood fats, and this can contribute to cardiovascular illnesses. So if you smoke and take certain anti-HIV drugs, your risks might be increased even further.

It’s well established that smoking increases the risk of a number of cancers, including lung cancer. Although relatively rare, lung cancer seems to occur more often in people with HIV. Studies have shown that HIV-positive smokers have an increased risk of lung cancer. Studies have shown that smoking is the main risk factor for non-AIDS-defining cancers, such as liver cancer, in people with HIV.

**Stopping smoking**

Stopping smoking (or not starting in the first place) will significantly reduce your risk of developing heart disease and other cardiovascular illnesses. Giving up, whatever age you are, can improve your day-to-day health as well as potentially increasing your life expectancy.

You are most likely to stop smoking and stay stopped if you are motivated. There are lots of ways to get help with giving up smoking.

Talk to your GP (family doctor). Taking part in a ‘stop smoking’ clinic or service has been shown to help people to stop smoking, and your GP can refer you to one of these. You can take part in group or one-to-one support services. There are also online support services available, and a telephone helpline (see below for details).

Cigarettes are addictive because they contain nicotine. You may find that nicotine replacement therapy can help reduce the craving for cigarettes and make quitting easier. Your GP can prescribe patches, gum, or lozenges which contain nicotine. There is no evidence that these interact with anti-HIV drugs. You can also buy these over the counter.

Many people find that nicotine replacement therapy can help reduce the craving for cigarettes and make quitting easier.

More recently, electronic cigarettes (e-cigarettes) have become a popular aid for stopping smoking. Evidence is still developing on how effective they are, but many people have found them helpful for quitting. An e-cigarette is a device that allows you
to inhale nicotine without most of the harmful effects of smoking (using one is often referred to as ‘vaping’). The effects of using e-cigarettes on your health aren’t fully known yet. However, they are safer than smoking and may be a good option to use while you are giving up, particularly if you have tried other methods without success. They are not currently considered a medical device, so your GP cannot prescribe them and you will need to buy them. This may change in the future.

Your GP can prescribe medication to help you stop smoking, such as a drug called Champix. Champix (varenicline) is safe for people with HIV to use but, like all drugs, has side-effects of its own. Talk to your doctor about whether Champix might be suitable for you.

The antidepressant drug bupropion (Zyban) can also help you stop smoking. However, it interacts with some anti-HIV drugs, especially ritonavir (Norvir, used to ‘boost’ other anti-HIV drugs) and efavirenz (Sustiva) – these drugs can reduce the level of Zyban in your blood and you may need to increase your dose. Talk to your HIV doctor if you are thinking about taking bupropion so you can work out the best dose for you. The drug can also cause side-effects, including dry mouth, insomnia, headaches, and fits.

Giving up smoking is hard. You are most likely to give up if you get expert support. But there are things you can do, alongside this, to help you with it. Avoiding ‘triggers’ – activities that you associate with smoking – where possible, may help. Exercise can also be helpful. Some people find that alternative therapies such as acupuncture and hypnotherapy help them stop smoking.

Where to go for help and support

Find your nearest NHS Stop Smoking Service from the NHS Smokefree website, or call the Smokefree National Helpline to speak to a trained adviser on 0300 123 1044.