

# Smoking and the risk of stroke

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This guide looks at how stopping smoking can reduce your risk of a stroke, and offers tips and advice about quitting.

Smoking greatly increases your risk of stroke, and the more you smoke, the bigger your chance of a stroke. It's thought that smokers are around three times more likely to have a stroke than non-smokers.

After a stroke or a transient ischaemic attack (TIA or mini-stroke), one of the first pieces of advice given to smokers is to quit smoking. It could be one of the most important lifestyle changes you make to help you stay healthy and reduce your risk of another stroke.

## How can I quit?

Quitting isn't easy. But you're much more likely to succeed if you have a little help.

This can include using stop-smoking aids like nicotine replacement products or stop-smoking medication.

Joining a free stop-smoking service can be very helpful. These give you access to professional advisers, and stop-smoking treatments on prescription. You'll get individual advice, and support with keeping going. You might be able to join a group, use a quitting app or get email support.

You'll discuss with your adviser why you want to give up, and decide if you want to go ahead. If you decide you want to quit, you'll work with your adviser to make an action plan and set a quit date. Your action plan can include a prescription for stop-smoking treatment as well as practical advice and support for you.

## Find a stop-smoking service

There are stop-smoking services in all areas of the UK. Your GP can refer you for help. You can also contact a local service yourself. Details are available from your GP surgery or pharmacist, or look online for details. You can also visit the 'Where to find help and information' section at the end of this guide to find the main contact details for services in Wales, Scotland, Northern Ireland and England.

## Quit or cut down?

Although your risk of a stroke goes down the less you smoke, even smoking one cigarette per day still gives you a significantly higher risk of stroke. That's why you'll be advised to try quitting.

### Getting motivated

- Write down all the reasons you want to quit. This could include how passive smoking affects your family, and your reasons for wanting to stay healthy and active.
- You could work out how much money you can save by quitting, and what you could do with it. Try an online saving calculator like this one: [thestopsmokingservice.co.uk/money-calculator](http://thestopsmokingservice.co.uk/money-calculator).
- Stay positive: tell yourself that you are going to do it!
- Getting support and encouragement from friends and family can be helpful too.

#### What if I start smoking again?

Giving up smoking is a long-term change, and it can take a few tries to stop for good. If you relapse, it can be a chance to learn more about the things that trigger your smoking, and how to change them.

If you do relapse, there's help available to get back on track. There is some useful advice on [nhs.uk/live-well/quit-smoking/](http://nhs.uk/live-well/quit-smoking/)

### Managing cravings

When you first stop smoking, your craving for nicotine will decrease gradually over a few weeks. But even after you have stopped smoking, cravings can come back at moments of stress, or at certain times and places where you used to smoke.

A craving could last several minutes before it passes. Some practical tips to avoid smoking when you have a craving include:

- **Keep nicotine replacement therapy with you.** If you know you'll be going somewhere you're likely to get cravings, try to take a fast acting type such as a mouth spray.
- **Delay responding to the urge.** It's very intense, but it should reduce within a few minutes.
- **Make it hard for yourself to smoke.** Avoid places where people smoke or where you could ask someone for a cigarette. Don't buy a packet or keep any cigarettes at home.
- **Avoid triggers.** If you tend to smoke after dinner, while chatting to a friend or in your lunch break, try doing something different at these times. For instance, if you usually have a cigarette after dinner, get up and wash the dishes straight away, or go into a room where you don't smoke. Changing your pattern of behaviour for a while could help you break the association with smoking.

More practical tips are available from your local stop smoking service, or you can search online for advice such as [nhs.uk/live-well/quit-smoking](http://nhs.uk/live-well/quit-smoking).

## How does stopping smoking reduce your risk of a stroke?

When you smoke, several kinds of toxic chemicals enter your bloodstream. These chemicals cause changes inside your blood vessels that lead to a build-up of fatty deposits over time. These fatty deposits (atherosclerosis) can lead to a clot forming, which can travel to the brain and cause a stroke.

Smoking can also:

- Reduce oxygen levels in your blood.
- Increase your risk of high blood pressure.
- Trigger atrial fibrillation (a type of irregular heartbeat that is a risk factor for stroke).
- Raise levels of 'bad' cholesterol.
- Raise your risk of a blood clot.

### What happens when you quit?

1. The benefits start right away. Your oxygen levels return to normal and carbon monoxide and nicotine levels reduce by more than half within eight hours. (Carbon monoxide is a poison because it reduces the oxygen going to your body and brain.)
2. You'll notice the difference within 48 hours as your ability to taste and smell improves.
3. In a few days your breathing becomes easier and your energy levels go up.
4. After 12 weeks, blood will be pumping to your heart and muscles more efficiently.
5. Between three and nine months, any coughing and wheezing eases and your lung function improves by up to 10%.
6. After one year your risk of a heart attack is half that of a smoker.
7. After 5 years your risk of having a stroke is around the same as someone who has never smoked.

## Wellbeing after quitting

### Emotional wellbeing

Smoking can give you a feeling of relaxation because nicotine alters mood chemicals in the brain. The problem is that you become dependent on nicotine to give you that feeling. When you quit, cravings can make you feel anxious and irritable at first. But after a while your mood and anxiety levels should improve.

If you feel that low mood or anxiety is affecting you, or if you take medication for anxiety or depression, contact your GP. They can help make sure you get the help and support you need.

### Stay active and eat well

Being as active as possible will help your overall health and wellbeing, and reduce your risk of a stroke. It can also help you avoid weight gain after giving up smoking. It's great for improving mood as well as reducing your risk of stroke. Walking, swimming or indoor exercise like housework are all great ways of starting to move more.

If you haven't been very active before, it's a good idea to contact your GP. We have loads of great suggestions for getting motivated and adding more movement into your day in our guide 'Getting active after a stroke'.

Try to follow healthy diet advice like having plenty of vegetables and fruit, and reduce salt and sugar. Have healthy snacks ready if you crave sweet food. Things like fresh fruit, nuts and vegetable sticks are good. If you're eating more than usual, try to keep your portion sizes small. Keep using any stop smoking treatment regularly, as cravings can make you eat more.

### Medication and stop-smoking aids

There are several different types of medicine and stop-smoking aids that can help you stop smoking. Speak to your doctor, pharmacist or the advisor at your local stop smoking service about which type of treatment is most suitable for you.

- Nicotine replacement therapy (NRT) including patches, gum, lozenges, microtabs, inhalators and nasal sprays.
- Champix tablets (varenicline).
- Zyban tablets (bupropion).
- E-cigarettes.
- Other stop-smoking techniques.

#### Nicotine replacement therapy (NRT)

NRT steadily releases nicotine into your blood stream without you having to inhale cigarette smoke. Using NRT helps to relieve smoking withdrawal symptoms, such as cravings, restlessness and irritability. After setting a stop date, you can start on your chosen NRT. You might use more than one type at the same time, such as long-acting type, plus a fast-acting kind to deal with cravings.

There is a wide range of NRT products available. They are available on prescription from an NHS Stop Smoking Service. You can also buy them over the counter from a pharmacy or supermarket.

#### Types of nicotine replacement therapy (NRT)

Patches deliver a continuous supply of nicotine into the bloodstream. There are two kinds available: 16 hours for daytime use and 24 hours to be worn day and night for those with particularly strong cravings. They come in various strengths to reflect how much you smoke, and users should aim to reduce the level of nicotine gradually whilst quitting.

- **Gum** delivers bursts of nicotine through chewing. The strength of the gum and number of pieces you use will be determined by how much you have smoked. You chew this type of gum slowly, until the taste becomes stronger and hold it between your gums and cheek to allow the nicotine to be absorbed into the bloodstream, repeating this action when the taste fades.
- **Lozenges** work in a similar way to gum, providing short bursts of nicotine. You suck the lozenge until the taste becomes stronger and store it inside your cheek until it fades, starting again when this happens. They usually dissolve after 20–30 minutes.
- **Nasal sprays** can work for heavy smokers or people who get severe withdrawal symptoms. The nicotine is quickly absorbed into the blood vessels in the nose, relieving cravings quickly, although they can produce side effects such as nose and throat irritation, coughing and watery eyes.
- **Inhalators** made of plastic and shaped to look like cigarettes. Users suck on the tube to release a burst of nicotine. They are particularly suited to people who miss the physical action of smoking.
- **Microtabs** are very small tablets that dissolve under your tongue and should not be chewed. The dosage amount depends on how much you have smoked. They may suit users who are seeking a more discreet aid to stopping smoking.

### Using nicotine replacement therapy (NRT) after a stroke

NRT should only be started under medical supervision in someone who has had a very recent stroke (within the last four weeks). In most cases, NRT will still be prescribed as the risks associated with continuing to smoke are usually greater than the risk of using NRT after a stroke.

### Stop-smoking medication

#### Champix (varenicline)

Champix is a tablet that mimics the effects of nicotine on the body. It helps to reduce cravings, withdrawal symptoms and reduces the satisfaction gained from smoking. It is available on prescription, and treatment usually lasts for three months. You begin to take the tablets a week or two before you plan to stop smoking. It is not suitable for people with some health conditions and it's only available on prescription.

#### Zyban (bupropion hydrochloride)

Zyban is a tablet available on prescription. It is usually taken for a couple of months. Tell your doctor about any other pre-existing conditions you have, as Zyban is not suitable for some people.

### E-cigarettes

Some people use e-cigarettes (electronic cigarettes or vaping) as a way to quit smoking. Although they are not harmless, they do less damage than tobacco. E-cigarettes provide nicotine without all of the toxins in tobacco smoke. Advisors at Stop Smoking Services can suggest trying them as part of your quitting plan, but they are not currently available on prescription.

### Other stop-smoking techniques

Acupuncture and hypnotherapy may help some people, but have not been through any large-scale clinical trials and are not licensed as stop-smoking treatments on the NHS. If you wish to try one of these therapies, make sure you see a qualified practitioner.

### Where to get help and information

#### From the Stroke Association

##### Helpline

Our Helpline offers information and support for anyone affected by stroke, including family, friends and carers.

Call us on **0303 3033 100**, from a textphone **18001 0303 3033 100**  
Email [helpline@stroke.org.uk](mailto:helpline@stroke.org.uk).

##### Read our information

Get more information about stroke online at [stroke.org.uk](http://stroke.org.uk), or call the Helpline to ask for printed copies of our guides.

##### My Stroke Guide

The Stroke Association's online tool My Stroke Guide gives you free access to trusted advice, information and support 24/7. My Stroke Guide connects you to our online community, to find out how others manage their recovery.

Log on to [mystrokeguide.com](http://mystrokeguide.com) today.

### Other sources of help and information

#### Action on Smoking and Health (ASH) (England)

Website: [ash.org.uk](http://ash.org.uk)  
Tel: **0207 404 0242**

#### ASH Scotland

Website: [ashscotland.org.uk](http://ashscotland.org.uk)  
Tel: **0131 225 4725**

#### ASH Wales

Website: [ash.wales](http://ash.wales)  
Tel: **029 2049 0621**

A campaigning public health charity working to eliminate the harm caused by tobacco.

#### NHS Better Health (England)

Website: [nhs.uk/better-health/quit-smoking](http://nhs.uk/better-health/quit-smoking)  
Helpline: **0300 123 1044**

#### Help me quit (Wales)

Website: [helpmequit.wales](http://helpmequit.wales)  
Helpline: **0800 163 3657**

#### Stop smoking (Northern Ireland)

Website: [stopsmokingni.info](http://stopsmokingni.info)

#### Quit your way (Scotland)

Website: [nhsinform.scot/quit-your-way-scotland](http://nhsinform.scot/quit-your-way-scotland)  
Smokeline: **0800 84 84 84**

Your notes

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### About our information

We want to provide the best information for people affected by stroke. That's why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.

#### How did we do?

To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at [feedback@stroke.org.uk](mailto:feedback@stroke.org.uk).

#### Accessible formats

Visit our website if you need this information in audio, large print or braille.

#### Always get individual advice

This guide contains general information about stroke. But if you have a problem, you should get individual advice from a professional such as a GP or pharmacist. Our Helpline can also help you find support. We work very hard to give you the latest facts, but some things change. We don't control the information provided by other organisations or websites.

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Every five minutes, stroke destroys lives. We need your support to help rebuild them. Donate or find out more at [stroke.org.uk](https://stroke.org.uk).

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