

## **Stop Before Your Op: Why you should stop smoking before surgery.**

### **Stop smoking before your operation**

If you are waiting for an operation then it's very important that you stop smoking as soon as possible. Smoking greatly increases the risk of complications during and after surgery.

- Some operations aren't even an option for people who smoke.
- People who smoke are far more likely to have anaesthesia-related complications.
- Smoking can delay your recovery and the wounds are slower to heal.

### **Smoking increases the risk of anaesthesia complications**

If you smoke 10 cigarettes a day you have six times more risk of post-operative breathing problems. This risk increases the more you smoke and the longer you have smoked. There are several reasons for this:

#### **People who smoke need more anaesthesia for all surgery**

Anaesthesia helps to reduce spasms and coughing during and after an operation. But because the tar in tobacco smoke constantly irritates the lungs, people who smoke need more anaesthesia to lessen these problems. This gives a higher risk of anaesthesia-related complications.

#### **People who smoke have a higher chance of chest surgery infections after surgery**

Smoking destroys the little hairs or cilia that help to clean out your lungs. The mucus in smokers' lungs is contaminated with tar and other poisons in tobacco smoke. After anaesthesia it is very important for all patients to clear mucus out of the lungs. Even non-smokers are at risk of post-op pneumonia if the lungs don't clear the mucus. But the risk for people who smoke is much greater as the lungs can't clean themselves. The poisons in tobacco smoke build up and cause a higher risk of chest infections.

#### **People who smoke spend longer in the recovery room and need extra oxygen**

All patients go to the recovery room after an operation until they are considered stable enough to return to the ward. But people who smoke need a lot more time in the recovery room before they stabilise. All those who smoke are at risk. Light smokers spend as long recovering as heavy smokers so cutting down is not an option. After anaesthesia the blood is unable to supply enough oxygen to the body and most patients are given extra oxygen in the recovery room. Because the carbon monoxide in tobacco smoke robs the blood of oxygen people who smoke need more oxygen therapy and for longer. Some patients who smoke need oxygen even after they leave the recovery room.

### **People who smoke have slower wound healing**

People who smoke have slower healing of wounds whether they are caused by surgery, injury or disease.

### **People who smoke have less oxygen to help healing**

Healing is helped by plenty of oxygen in the blood reaching the wound. Carbon monoxide in smoke robs the blood of oxygen. The wound cannot heal as there is a lower level of oxygen in the blood.

### **Examples of surgical risks for smokers**

#### **Plastic and reconstructive surgery**

Slowing down the healing of wounds is a big problem for people who smoke having plastic or reconstructive surgery. This type of surgery usually involves the transfer of skin from one part of the body to another.

To survive, the skin needs a healthy blood supply and lots of oxygen. Because people who smoke have a reduced blood flow, the skin being transferred has a much lower chance of survival. Smokers have about 12.5 times greater risk of plastic surgery not being successful.

#### **Hand surgery**

Reduced blood flow is a great concern for hand surgery because there are so many tiny blood vessels in the hands. Smoking a single cigarette can reduce the blood flow to the hand by 40% for up to an hour. This would cause a severe shortage of oxygen needed to aid healing.

## **Back surgery**

The bones of people who smoke are slower to grow and repair than non-smokers' bones. When people who smoke need surgery to fuse the vertebrae in the back they are 3 to 4 times more likely to have problems. The bones must build new bone cells. Non-smokers' bones can grow 1cm every 2 months. Smokers can take on average 3 months to grow the same amount of bone.

## **The sooner you stop before your op, the better**

Stopping smoking at least 8 weeks before surgery reduces your risk of a range of complications. If you smoke, you have a 1 in 3 risk of post-operative breathing problems. This can be reduced to 1 in 10 if you stop 8 weeks before your operation.

## **Smokefree days can help**

Unfortunately, not everyone knows they are going to have surgery until they actually need it. Stopping smoking 72 or 48 hours before an operation can decrease some of the risks. Carbon monoxide and nicotine are cleared from the body in a matter of days. This can help to improve healing and recovery.

## **Top stop tips for pre-op patients**

- Name your quit day and stick to it. Not even a puff of a cigarette!
- Use the days between then and now to plan.
- Ask your doctor or pharmacist about proven medications that could help you.
- Find out where you can find the stop smoking service nearest to you and what it offers. Smokefree helplines and websites can give you details.
- Keep a smoking diary for a few days noting when and where you smoke and how you feel for each cigarette.
- Use the clues from your diary to plan what you will do for each smoking situation.
- Stock up on the products you are going to use, start the treatment at the right time and follow the instructions.
- Throw away all your cigarettes, ashtrays, lighters and matches. Be prepared for a fresh start.
- Tell friends and family that you want to stop and why it's important to do this before your operation. Ask for their help.
- Keep a Smokefree Helpline number handy for answers to questions before and after your quit day.
- Take each day at a time or each hour at a time. Be prepared and have a plan of how to cope with cravings.

- Change your routines and avoid the people and places that might tempt you to smoke.
- Beat the cravings by distracting yourself for 5 – 10minutes. Try sips of water or do something else with your hands.
- Get some gentle exercise as well as relaxation.
- Plan some treats with the money you save – at the end of your first smoke-free day, week and month.
- Ask for help and support to stop before your operation date.
- Ask your consultant or pharmacist about stop smoking medications that you can get on prescription and over the counter.
- Stop Smoking Services in your hospital and in your local community as well as smokefree helplines and websites can give you support and advice and can tell you where there is a stop smoking service near you. You can get one to one, telephone, text and internet support.

### **Where to get help:**

You can get help to stop smoking by calling the NHS Smokefree Helpline on **0300 123 1044** or just search '**smokefree**' on your internet browser.

You can also come along in person to a Face to Face clinic at St. George's Hospital, (telephone slots available on request).

Please call 020 8725 4234 or email [smokingcessation@stgeorges.nhs.uk](mailto:smokingcessation@stgeorges.nhs.uk) to book an appointment.