Tower Bridge Hospital London

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT
020 7916 0029 · Open 7 days, 9am–7pm
towerbridgehospital.co.uk

PATIENT INFORMATION · GENERAL HEALTH

Stopping smoking
what the evidence says actually works

Stopping smoking is the single most effective thing anyone can do for their health, at any age and after any number of years. Most people who succeed have tried several times before — that is the normal path, not a series of failures. What separates a successful attempt from an unsuccessful one is mostly the method.

Seek prompt assessment if you have

- **coughing up blood**, or a cough lasting more than three weeks
- **increasing breathlessness**, or chest pain on exertion
- **unexplained weight loss**, or a hoarse voice for more than three weeks
- a **mouth ulcer or white patch** that has not healed in three weeks
- **calf pain on walking** that eases with rest

Smoking-related cancers and vascular disease present in ways that are easy to normalise. Any of these needs investigating rather than attributing to being a smoker.

What works, in order of effectiveness

3–4×
more likely to succeed with support and medication

Combination NRT
patch plus a fast-acting product

Several attempts
normal, and each one raises your odds

- **Combination nicotine replacement** — a patch for background cravings **plus** a fast-acting product (gum, lozenge, inhalator, nasal or mouth spray) for breakthrough urges. Combination is considerably more effective than a patch alone, and most people under-dose.
- **Vaping** — the evidence now shows nicotine vapes are **more effective than nicotine replacement** for quitting smoking, and are substantially less harmful than cigarettes. They are not risk-free, and are not for people who have never smoked.
- **Prescription medication** — where available, these roughly double or triple success rates and can be combined with nicotine replacement.
- **Behavioural support** — adding structured support to any medication increases success significantly. Local NHS stop smoking services are free and effective.

- **Willpower alone** succeeds around 3 to 5% of the time. It is the commonest method and the least effective.

On vaping

For someone who smokes, switching completely to vaping is a large reduction in harm — the damage from smoking comes overwhelmingly from combustion, not nicotine. Use a regulated UK product, not an illicit or unbranded one. Aim to reduce the nicotine strength over months and eventually stop, though staying on a vape is still far better than returning to cigarettes. **Do not dual-use long term**; the benefit comes from stopping smoking completely.

Planning the attempt

1. **Set a quit date** within the next two weeks, and tell people.
2. **Get your medication or NRT before that date**, and start patches the day before if advised.
3. **Identify your three strongest triggers** — usually the first of the day, alcohol, and breaks at work — and plan a specific alternative for each.
4. **Change the routine around them**: different route, different chair, different break location.
5. **Expect cravings to last three to five minutes.** They peak and pass whether or not you smoke.
6. **If you slip, do not abandon the attempt.** One cigarette is a slip; deciding it has failed is what turns it into a relapse.

What to expect

- Withdrawal — irritability, restlessness, poor concentration, increased appetite, disturbed sleep — peaks in the first week and largely settles by four weeks.
- A cough often **worsens temporarily** as the lungs begin clearing. This is recovery, not damage.
- Weight gain averages a few kilograms and is far outweighed by the benefit. Plan for it rather than being ambushed.
- Some medicines need dose adjustment after stopping, including certain antipsychotics, theophylline and caffeine — you may find coffee suddenly feels stronger.

What happens to your body

20 min
pulse and blood pressure fall

72 hours
breathing feels easier

1 year
heart attack risk roughly halved

After ten years the lung cancer risk is around half that of a continuing smoker; after fifteen, coronary risk approaches that of someone who never smoked. Circulation, taste, smell, skin, fertility and wound healing all improve within months.

Why come to us. Quit attempts fail most often because people use one product at too low a dose without support. We offer an unhurried consultation to build a plan around your actual triggers, prescribe stop-smoking medication where appropriate, and can check what smoking has already cost you — blood pressure, cholesterol, HbA1c and an ECG in-house, with spirometry and a chest X-ray through our imaging partners if your breathing warrants it. Open seven days a week, so a quit date does not have to wait for an appointment.

A plan, medication and the checks that matter

Seven days a week, 9am–7pm. Set a quit date this fortnight.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**
info@mhwclinic.co.uk
Open 7 days, 9am–7pm

In an emergency
Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency
Call NHS 111 or visit 111.nhs.uk.

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Written and reviewed by Dr H Bolat, GP & Clinical Director **Review date: 26 July 2026** **Next review due: July 2028**

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This leaflet is based on current NHS and NICE NG209 guidance on tobacco treatment and dependence. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.