



## Smoking cessation: Cannabis, shisha and chewing tobacco

### Cannabis

Cannabis is the most widely used illegal drug in the UK, although its use in recent years has fallen. The proportion of 11-15 year olds in England who had used cannabis in the last year fell from 13.3% in 2003 to 7% in 2013. The proportion of 16-59 year olds using cannabis in the last year has fallen from 10.6% in 2003-04 to 6.6% in 2013-14.

Cannabis is classed as a sedating and hallucinogenic drug. It was reclassified from a class C to class B drug in January 2009. It is illegal to possess, give away or sell. The penalty is up to five years in jail.

### The effects of cannabis.

- Some people feel chilled out, relaxed and happy – they may get the giggles or become more talkative
- It can make people more aware of their senses. The hallucinogenic effects can give people a feeling of time slowing down.
- Hunger pangs are common
- Some people have one or two drags on a joint and feel light-headed, faint and sick.
- Cannabis may cause feelings of anxiety, suspicion, confusion, panic and paranoia.
- It can make people feel sleepy and lethargic
- Using cannabis regularly can make people demotivated

### Health risks associated with cannabis:

Research has shown that:

- People who mix cannabis with tobacco take on all the risks associated with smoking tobacco. Like tobacco, cannabis contains carcinogens that increase the risk of lung cancer. It can make asthma worse and cause wheezing in people without asthma. Top tip – if you find a high carbon monoxide reading in someone who smokes less than ten 'cigarettes' a day check what the cigarette contains – much higher CO readings are seen in people who smoke cannabis with tobacco.
- It can become addictive. About 10% of cannabis users are thought to become dependent.
- Cannabis can harm mental health. Regular use is associated with an increased risk of schizophrenia. The risk is higher if a person started using cannabis in their teens.
- Cannabis may affect fertility.
- In pregnancy cannabis may harm the unborn baby.
- Cannabis can affect the way the brain works. Regular, heavy use makes it difficult to learn and concentrate. It can disturb sleep and make people feel depressed.
- Mixing cannabis with alcohol can increase accident.

### Where to refer patients for help:

- The Frank helpline [www.talktofrank.com](http://www.talktofrank.com) 0300 123 6600. This is an independent government funded website and telephone helpline offering advice, information and support to anyone concerned about drugs and solvent/volatile substance misuse.
- Find local drug treatment services <http://www.nhs.uk/Service-Search/Drug-treatment-services/LocationSearch/340>
- For information: NHS Choices: Cannabis: the facts <http://www.nhs.uk/Livewell/drugs/Pages/cannabis-facts.aspx>
- Professional article Patient UK: <http://www.patient.co.uk/doctor/cannabis-use-and-abuse>

## **Tobacco that is not smoked**

Tobacco that is not smoked including paan, betel quid, chewing tobacco and shisha, popular with south Asian communities, is not a safe way to use tobacco. Like cigarettes these products contain carcinogenic ingredients, can be as addictive as smoking and cause heart and respiratory disease.

**Chewing tobacco:** Chewing tobacco (betel quid, also known as paan or gutkha) is a mixture of ingredients including betel nut (also called areca nut), herbs, spices and often tobacco, wrapped in a betel leaf. Studies have found that betel itself can raise the risk of cancer, so chewing betel quid without tobacco is still harmful.

**Shisha:** also known as a "water pipe" or "hookah", increases the risk of cancer in the same way that smoking a cigarette or chewing tobacco does. A World Health Organisation study has suggested that during one session on a hookah (around 20 to 80 minutes) a person can inhale the same amount of smoke as a cigarette smoker consuming 100 or more cigarettes. Hookah smoke also contains nicotine, cancer-causing chemicals and toxic gases such as carbon monoxide.

### **Help with quitting**

People who chew, smoke or inhale these forms of tobacco should be given the same help to quit as those who smoke cigarettes – see PCRS-UK Smoking cessation treatment advice available at

### **For further information:**

NHS Choices. The risks of paan, bid and shisha

<http://www.nhs.uk/livewell/southasianhealth/pages/smokingandpaan.aspx>

NHS Smokefree: Roll-ups, pipes, bidi and chewing tobacco <http://www.nhs.uk/smokefree/why-quit/rollup-chewing-tobacco-pipes-shisha>

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