



Pain and Smoking

- **Smoking increases long-term pain:**
 - 50% of patients looking for treatment for pain are smokers.
- **Former and current smokers are more likely to have lower back pain:** a longer smoking history is associated with more intense pain.
- **Smoking is also associated with headaches:**
 - Smokers were 1.5 times more likely to report headaches than people who did not smoke.
 - Smoking may increase the sensitivity of certain areas of the brain responsible for pain.
- **Finally, smoking is also associated with** a 30% greater chance of experiencing tooth pain, mouth sores, and oral pain.

Smoking and Opioid Use: It Goes Both Ways

- **Tobacco users depend more on pain relieving medicine** because nicotine is related to greater sensitivity to pain.
- **Adolescents' exposure to tobacco can increase the likelihood of opioid addiction later in life.**
- **Tobacco use has a strong correlation to prescription opioid abuse,** and people with opioid use disorders are more likely to smoke.



Quitting smoking can help with opioid addiction recovery

- Tobacco use can reduce your success in recovery and result in continued substance use.
- Quitting smoking is associated with long term opioid use abstinence after finishing treatment for opioid use disorder.
- Quitting smoking reduces stress and anxiety, and promotes physical wellness, which in turn, promotes substance use recovery.

*Quitting smoking is the best thing
you can do for your health.*

HOW TO GET HELP

- Ask your doctor or substance use counselor for help quitting.
- Call 1-800-Quit-Now for free help.
- Visit www.smokefree.gov for a step-by step guide to quit smoking.
- Explore the resources at www.TakingTexasTobaccoFree.com.

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