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Smoking Cessation Project

DH 305 – Community Dental Health and Practicum

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I. Introduction and Patient Overview.

The use of cannabis to cope with stress or relieve tension has been widely popular and common for many years (NIH, 2008), and has reached historic highs among adults 35 to 50 years old. According to the National Institute on Drug Abuse, daily marijuana use reached its highest level reported in 2022 (11%), when compared to the years 2017 (8%) and 6% in 2012 (NIDA, 2023), further increasing marijuana consumption every year. The patient selected for this study has been a chronic marijuana smoker for the past six years. He is a white male, 47 years old, married, and has a full-time job in the healthcare field, hence his good health literacy. The client was diagnosed with depression at the age 14, and later on diagnosed with double depression at the age 43. According to him, “smoking weed helps me relax after a full day of dealing with patients that are not always nice and grateful to me and my work”. The patient reports taking a total of seven medications to help him cope with depression, anxiety and insomnia. The aim of this research is to provide information, knowledge and research on how to quit smoking marijuana by introducing alternative ways of coping with chronic stress, insomnia and depression.

According to the National Institute of Health, the daily dosage of THC/CBD recommended is 40 mg/day (NIH, 2023). The patient reports smoking 2-3 cannabis cigarettes per day (12.5 mg each) to cope with mental health issues and insomnia. Sometimes combination of 25mg-50mg THC pills/edibles. Nowadays, the client says that his tolerance has increased significantly and that he is interested in learning more about taking a tolerance break in order to enhance the effects of cannabis once the use is resumed. This is the first step in convincing the client to stop smoking cannabis gradually and eventually he will not need to inhale the smoke in order to feel better.

II. Correlation of Appropriate Cessation Aids Tailored for the Patient.

Patient has expressed interest in quitting smoking marijuana. The appropriate cessation aid that would most benefit this patient would be the use of the app *Grounded: Quit Weed Smoking*®. The client has told me that he spends a lot of time on his phone, and that an app that would send him notifications would help to keep him on track. I suggested starting with taking a tolerance break, one of the features of the app, by setting a 1-week goal in which the patient can have his tolerance to THC decreased by half. The app also offers a trigger tracker, AI assisted weekly progress reports, and trophy achievements once a certain goal has been reached. According to studies, the use of mobile apps can increase the chances of quitting smoking, compared to no intervention or minimal support (NIH, 2023), and when it comes to eliminating smoking habits, mobile based intervention methods has shown quit rates of about 10% (NIH, 2023).

Once the patient feels ready, maybe after taking a few breaks, we will then move to the next level, which is setting a quit date that can help the individual to create a clear goal and set a realistic timeline to quit smoking marijuana effectively and permanently. Identifying triggers, recognizing environments and situations that may induce marijuana use is key in guiding the patient to achieve his goal. Helping the client to avoid and manage his triggers and cravings is crucial in order for a smoke cessation project to be successfully implemented.

Studies have shown that exercising regularly can promote better sleep by the release of endorphins, which can improve overall mood and well-being (NIH, 2023), and adults who exercise about 30 minutes per day sleeps an average of 15 minutes longer than those who don't exercise (NIH, 2023). Therefore, exercising is a behavioral modification method that can help the client to cope with insomnia. In addition, regular access to green spaces has been linked to

lower risks of depression and improved concentration (UC Davis Health, 2023), so it was advised to the patient to go out on hikes on areas that are pleasant scenery to help with stress reduction and improve mood. Green spaces have an important role in supporting the well-being and mental health of an individual, consequently relieving the symptom of depression and enhancing overall quality of life.


III. Outcomes and Conclusions.

The patient was able to decrease his smoking from 2-3 joints/day to 1 joint/day, as well as doing a 1-week tolerance break three times since April, to which he attributed to his daily usage of the app *Grounded: Quit Weed Smoking*®. According to the patient, taking this tolerance break made him rethink his cannabis usage and he says that eventually he wants to quit smoking for good.

Initially, the client was presented with options such as the *Smokefree* text messaging program, but he was not interested because according to him, he already receives a vast amount of junk calls and texts that he ignores on the daily, therefore, since it was clear he was just going to ignore the texts, we decided not to utilize this tool. In addition, the patient already attends to therapy sessions and meditates weekly. When presented with the flyer I created for him (see page 5), he read it but ultimately said that he is not interested in flyers or pamphlets.


When challenging his belief of cannabis as being an effective method for coping, even though evidence to date is limited, research suggests that long term cannabis use can lead to an overall adverse effect on the stress response by the system (Al'Absi Et.al, 2021). When it comes to short-term solution, cannabis may provide temporary relief from depression, but it does not address the root cause of the issue. Prolonged cannabis use can lead to high tolerance, dependency and even exacerbation of mental health issues. Behavioral modifications such as

exercising more out in nature in conjunction with aids such as the *Grounded: Quit Weed Smoking*® app has been helping the patient stay on track. The goal is to quit smoking all together, and we believe that the patient is on the right track.



- 01 GET RID OF YOUR SUPPLY**
 If you have weed around, you're going to want to use it. Get rid of it and don't look back.
- 02 AVOID "PEOPLE, PLACES OR THINGS" THAT MAKE YOU WANT TO SMOKE WEED**
 If you used to smoke weed with a certain crowd or bought joints from a dealer in the next town, you may need to avoid seeing these people and the places and things associated with them — at least for a time.
- 03 START EXERCISING DAILY**
 Exercise can help reduce addiction cravings. It can also go a long way to restoring healthy brain function in the aftermath of pot addiction.
- 04 PLAN SOBER EVENTS**
 Instead of putting yourself in temptation's way, plan and organize sober events, or at least weed-free events, to avoid the urge to use. You'll soon discover that you can have fun without getting high, and this discovery will help you find joy in sobriety.
- 05 ENLIST A SUPPORT SYSTEM**
 If you let your friends and family know you're trying to quit, you'll usually be met with support and compassion. When you're feeling weak, lean on your support system to help you get through the tough times.
- 06 SET GOALS**
 What do you want to accomplish with life after marijuana? By setting goals that can't be achieved when a weed habit is in the picture, you put yourself in a mindset for success.
- 07 GET PROFESSIONAL HELP**
 If your own efforts aren't working and you feel outside help would be beneficial, there are plenty of rehabilitation centers that handle marijuana detox and treatment. You may also want to consider working with a counselor or therapist with experience in addiction medicine.
- 08 KNOW WHAT WITHDRAWAL SYMPTOMS TO EXPECT**
 Quitting weed is generally physically easier than quitting more powerful drugs, but that doesn't make it easy. Withdrawal symptoms may include irritability, anger, anxiety, weight loss, depression, insomnia, nightmares/strange dreams, tremors, headaches, sweating and nausea/vomiting.

MARIJUANA FACTS

- 10% of regular users develop dependency
- 2.3
MILLION
Marijuana users in Canada
- \$8.9
BILLION
Annual costs associated with substance abuse in Canada
- Annual number of arrests for all offences concerning illegal drugs: 90,000
- 
1/4
MILLION
Number of people aged 12 - 17 who use daily
- Average age of introduction to marijuana: 15

FHEHealth

smokefree.gov
smokefreevet
smokefreewomen
smokefree teen
smokefreeespañol
smokefree60+

QUIT



SMOKING



Marijuana Addiction Hotline

We're here for you every step of the way.

☎ 866-210-1303

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