

## Chapter 7

# The Roadmap Home

The purpose of this chapter is to provide a brief overview of recovery, a start to finish look at four distinct yet overlapping phases. The objective is to diminish needless fears and anxieties by removing as much mystery as possible from each of these phases:

1. Physical Recovery
2. Emotional Recovery
3. Subconscious Recovery
4. Conscious Recovery

Nicotine addiction is the result of the introduction of a chemical into the body, which by happenstance is able to unlock and activate the same brain cells and pathways as the neurotransmitter acetylcholine. Using it allowed us the ability to over-stimulate the mind's priorities teacher - our dopamine pathways - at will. Continued use caused the brain to desensitize itself to nicotine's presence while conditioning the mind to expect more. Any attempt to stop was met with the same anxieties we felt when deprived of food, water or affection. It left us falsely convinced that nicotine was core to our existence, as fundamental as eating. Educated recovery is about understanding both the lie and dependency's effects upon us.

It is my hope that any remaining fears of life without nicotine will become so insignificant that it becomes impossible not to notice the beauty that recovery unfolds before you. It's my hope that you'll sense the full glory of again standing on our own, of engaging life as "you." But that's only a hope. Once home, whether our journey is best characterized as having been a cakewalk, a love fest, a non-event, frantic or nightmarish, the only thing that matters is that each challenge and each day remained do-able.

Understanding where we are is the window to where we've been. An awakening is at hand: seeing the lie, the depths to which it took us, and where we now stand. Such awareness itself can be frightening. But why spoil healing with fear? Why fear arrival of a calm and comfortable day where not once do thoughts of using enter our mind?

### Recovery Timetable

Most but not all benefits listed below are related to smoking. Why? Here in the U.S. there are ten times as many smokers as oral tobacco users.<sup>240</sup> By far, smoking reflects the greatest health risks of any form of nicotine delivery. Understandably, until now the vast majority of research has focused on smoking. But just because science cannot yet tell us when most oral tobacco and NRT recovery benefits occur doesn't mean they are not happening.

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240 Centers for Disease Control, [Tobacco Use Among Adults - United States 2005](#), MMWR, Weekly, October 27, 2006, Volume 55(42), Pages 1145-1148.

### When ending all tobacco and nicotine use, within ...<sup>241</sup>

- 20 minutes - Our blood pressure, heart rate and the temperature of our hands and feet return to normal.
- 8 hours - Remaining nicotine in our bloodstream will have fallen to 6.25% of normal peak daily levels, a 93.25% reduction.
- 12 hours - The ex-smoker's blood oxygen level will have increased to normal while carbon monoxide levels have dropped to normal.
- 24 hours - Anxieties peak and within two weeks should return to near pre-cessation levels.
- 48 hours - Damaged nerve endings have started to re-grow and our sense of smell and taste are beginning to return to normal. Cessation anger and irritability peaks.
- 72 hours - Our body is 100% nicotine-free and over 90% of all nicotine metabolites (the chemicals it breaks down into) have been ionized or excreted via urine. Symptoms of withdrawal have peaked in intensity, including restlessness. The number of cue induced crave episodes will peak for the "average" ex-user. Lung bronchial tubes leading to air sacs (alveoli) are beginning to relax in recovering smokers. Breathing is becoming easier and the lungs functional abilities are starting to increase.
- 5 to 8 days - The "average" ex-smoker will encounter an "average" of three cue induced crave episodes per day. Although we may not be "average" and although serious cessation time distortion can make minutes feel like hours, it is unlikely that any single episode will last longer than 3 minutes. Keep a clock handy and time them.
- 10 days - The "average ex-user is down to encountering less than two crave episodes per day, each less than 3 minutes.
- 10 days to 2 weeks - Recovery has likely progressed to the point where our addiction is no longer doing the talking. We are beginning to catch glimpses of where freedom and healing are transporting us.
- 2 weeks - Blood circulation in our gums and teeth are now similar to that of a non-user.
- 2 to 4 weeks - Cessation related anger, anxiety, difficulty concentrating, impatience, insomnia, restlessness and depression have ended. If still experiencing any of these symptoms get seen and evaluated by your physician.
- 21 days – Brain acetylcholine receptor counts up-regulated in response to nicotine's presence have now down-regulated and receptor binding has returned to levels seen in the brains of non-smokers.<sup>242</sup>

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241 Primary sources for this recovery benefits timetable are: (1) U.S. Department of Health and Human Services, [The Health Consequences of Smoking: A Report of the Surgeon General](#), 2004; (2) Hughes, JR, [Effects of abstinence from tobacco: valid symptoms and time course](#), Nicotine and Tobacco Research, March 2007, Volume 9(3), Pages 315-327; (3) O'Connell KA, et al, [Coping in real time: using Ecological Momentary Assessment techniques to assess coping with the urge to smoke](#), Research in Nursing and Health, December 1998, Volume 21(6), Pages 487-497.

242 Mamede M, et al, [Temporal change in human nicotinic acetylcholine receptor after smoking cessation: 5IA SPECT study](#), Journal of Nuclear Medicine, November 2007, Volume 48(11), Pages 1829-1835.

- 2 weeks to 3 months - If an ex-smoker, heart attack risk has started to drop and lung function continues to improve.
- 3 weeks to 3 months - If an ex-smoker, circulation has substantially improved. Walking has become easier. Any chronic cough has likely disappeared. If coughing persists contact your physician.
- 1 to 9 months - Any smoking related sinus congestion, fatigue or shortness of breath have decreased. Cilia have re-grown in our lungs, hereby increasing their ability to handle mucus, keep our lungs clean and reduce infections. The body's overall energy level has increased.
- 1 year - If an ex-smoker, excess risk of coronary heart disease has dropped to less than half that of a smoker.
- 5 to 15 years - If an ex-smoker, risk of stroke has declined to that of a non-smoker.
- 10 years - If an "average" ex-smoker (one pack per day), our risk of death from lung cancer has declined by almost half. Risk of cancer of the mouth, throat and esophagus has also decreased.
- 15 years - Our risk of coronary heart disease is now that of a person who has never smoked.

## Ending Nicotine Use

Once all nicotine use ends, it is eliminated from the bloodstream at a rate of roughly one-half every two hours. Remaining levels become so small within 24 hours that healing and re-sensitization have no choice but to commence.

Just one hour, one challenge at a time, and then celebrate! It is here, within 24 hours, that the mind begins to experience overlapping recovery on four levels at once: physical, emotional, subconscious and conscious. The hours between 24 and 72 may well be the most intense period of healing our mind has ever known.

We will reside inside a nicotine-free body and stand atop withdrawal's mountain within 72 hours of ending nicotine use. The most challenging portion of recovery will be behind us. While our climb to the summit was quick, the slope of the journey down the other side, although initially brisk, is continuous yet ever so gradual. The balance of the journey is primarily an exercise in patience.

Yet, violate the "Law of Addiction" - just one powerful hit of nicotine - and forget about any gradual down slope. We will have relapsed. We'll either resume life as an active addict or face another climb to the top. The price of each climb is further depletion of core dreams and desires. Although we could have rested and rejuvenated once at or over the top, few of us have the stamina of purpose needed to make back-to-back climbs.

Expect to be teased during the climb and descent by those selling chemicals that stimulate brain dopamine pathways (nicotine, bupropion and varenicline). Expect them to try to discourage us. Listen for the false implication that few of us will succeed in stopping on our own. Truth is, it's how the vast majority will succeed this year. Clearly they want

our money. Sadly, most appear willing to lie to get it.

Expect their tease to falsely suggest that their product makes the climb easy. Don't listen. If the product stimulates dopamine flow, physical withdrawal's climb isn't fully underway until use of the product ends. The product does not aid recovery. It delays it. That's why advertising the product's cessation results on the day product use ends, while still under the chemical's influence, is not about science but salesmanship.

As Joel says, we'd only have ourselves to blame for intentionally extending what should have been a couple of days of withdrawal into weeks or months. Not only do users face the side-effect risks posed by each product but the need to someday adjust to living without the dopamine stimulation they provide.

### **Physical Readjustment**

The brain needs time to re-adjust its equilibrium or homeostasis to again functioning without nicotine. Nicotine caused both activation and deactivation of nicotinic-type acetylcholine receptors.<sup>243</sup> A significant increase in the number of receptors (up-regulation) may have occurred in as many as eleven different brain regions.<sup>244</sup>

Our brain needs for us to develop the patience necessary to allow time to remove defenses and restore natural sensitivities. If allowed time, it will work around-the-clock restoring acetylcholine receptor counts and neurotransmitter sensitivities.

While the bulk of physical recovery is generally recognized as occurring within two weeks, recent studies have found that some symptoms, primary emotional and possibly related to brain neuron sensitivity restoration in some brain regions, may persist for up to four weeks.

Aside from the brain, the body needs time for its physiology to adjust to again functioning without nicotine and other chemicals introduced by our method of delivery. As it does, the withdrawal symptoms experienced may be none, few, some or many.

Although Chapter 9 provides a detailed list (and discussion) of possible withdrawal symptoms, I encourage you to skip it. That's right; don't read it. If needed, it'll be there. Such lists have a tendency to transform a sensation that may have been barely noticeable into a full-blown worry. This book's primary objective is to destroy fears, not foster them.

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243 Picciotto MR, et al, [It is not "either/or": activation and desensitization of nicotinic acetylcholine receptors both contribute to behaviors related to nicotine addiction and mood](#), Progress in Neurobiology, April 2008, Volume 84(4), Pages 329-342; also see, Even N, et al, [Regional differential effects of chronic nicotine on brain alpha 4-containing and alpha 6-containing receptors](#), Neuroreport, October 8, 2008, Volume 19(15), Pages 1545-1550.

244 Parker SL, [Up-regulation of brain nicotinic acetylcholine receptors in the rat during long-term self-administration of nicotine: disproportionate increase of the alpha6 subunit](#), Molecular Pharmacology, March 2004, Volume 65(3), Pages 611-622.

Both online at Freedom and during live two-week, six session clinics (each session being two hours), we watched, read or looked into faces. Aside from expected anxieties and emotions, many report no noticeable physical symptoms at all.

Also, don't confuse the time needed for the mind and body to adapt to functioning without nicotine's influence, with the time needed for deep tissue healing and purging of tobacco tars. As suggested by the above recovery timetable, it takes significant time to fully expel toxins and carcinogens and heal from their assaults.

### **Emotional Readjustment**

Although chemical in nature, a long and intense relationship is ending. For many of us it was the most dependable relationship we'd ever known. If our fix was bummed or borrowed, we may not have liked the flavors accompanying it, the time needed to produce the desired effect or the degree of control over the precise amount that arrived in our brain. But never once did nicotine let us down. Once inside our bloodstream, within seconds we experienced replenishment: arrival of nicotine's high and a stimulated dopamine "aaah."

But now that's all behind us. It's over, finished, done. And as with ending any long-term relationship we must navigate the sense of loss emotions flowing from it. Denial, anger, bargaining and depression, each emotion overcome brings us closer to acceptance, the finish line marking completion of emotional recovery.

### **Subconscious Readjustment**

Nicotine's two-hour half-life compelled us to select replenishment times and patterns. When did you replenish? Upon waking, in the bathroom, surrounding meals, in the yard or garage, while traveling, surrounding work, around friends, while drinking, on the telephone, before bed, when happy, sad, stressed or mad?

Whether or not we were aware of our use patterns, our subconscious recorded the times, places, circumstances and emotions during which we replenished nicotine. It became conditioned to expect replenishment during these events. Encountering a use cue would trigger a gentle urge reminding us it was time to feed. Normally we simply obeyed. But waiting to long to replenish after a cue or simply delaying could sound anxiety alarms, triggering a full-blown crave episode.

Subconscious recovery is about meeting, greeting and extinguishing each conditioned use cue. The subconscious mind does not plot, plan or conspire. It simply reacts to input. If we say "no" during what's normally a less than 3 minute crave episode (which time distortion may cause to feel far longer), in most instances a single encounter will sever and break the nicotine use association, extinguishing the cue that caused it. Each time we extinguish a cue we are rewarded with the return of another aspect of life.

That's right, crave episodes are good not bad! It's how we take back life, just one

extinguished use cue and slice at a time.

In Chapter 11 we'll explore a host of crave coping techniques. For now, understand that: (1) there is no force or circumstance on planet earth that can compel us to bring nicotine into our body; (2) we will always be able to handle up to three minutes of anxiety; and (3) the reward at the end of each episode is worth vastly more than the price of enduring it.

### **Conscious Readjustment**

By far, the easiest yet longest phase of recovery is reclaiming normal, everyday thinking. Unlike a less than three-minute subconscious crave episode, the conscious mind can fixate upon a thought of wanting nicotine for as long as we are able to maintain concentration and focus.

How long can we keep our mind focused upon our favorite food? Look at a clock and give it a try. Can you taste it? Does it make your mouth water? Feeling an urge?

Now think about your favorite nicotine use rationalization. What were your top three use justifications? Conscious recovery can be the period of time needed for new nicotine-free memories to gather, overwrite or suppress all the lies we created to justify that next feeding. It can also be a shorter period of time during which we grab hold of each rationalization, expose it to honest light, and recast it using truth.

It is not necessary to destroy drug use memories in order to alter their impact upon us. We need to examine them honestly and realistically. For example, if a smoker, with zero taste buds inside human lungs, did we really smoke for taste? Remember how that first cigarette tasted prior to tobacco toxins diminishing our sense of smell and taste?

What is the conscious mind really asking for when it yearns for more nicotine? What explanation is provided for wanting it? Chapter 12 is about using logic, reason and science to accelerate this final phase of recovery. Some use rationalizations can be laughed away. Others may benefit from honest reflection once two weeks have passed and out from under nicotine's primary influence. Letting go of other use explanations may be more challenging.

Contrary to industry marketing, there was only one reason we didn't stop using nicotine long, long ago. Our new addiction quickly conditioned us to expect anxiety, irritability, anger and depression to begin building if we waited too long between feedings. We didn't continue using nicotine because we liked it. We did so because we didn't like what happened when we didn't use it.<sup>245</sup>

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245 Spitzer, J, "[I smoke because I like smoking](#)," 1983, [www.WhyQuit.com](http://www.WhyQuit.com)

## Arriving Home

What would it be like to go the entire day without once thinking about wanting to smoke, dip or chew nicotine? What would it be like to be "you" again? Don't feel alone if you can no longer remember. That's what drug addiction is all about, quickly burying nearly all remaining memory of the beauty of life without the chemical.

Trust in your common sense and dreams. Believe in you. Don't be afraid. We leave absolutely nothing of value behind. In fact, every chemical that nicotine controlled already belonged to us. As recovering addicts, we can do everything we did while enslaved and do it as well as or better once free.

Why fight and rebel against recovery when it can be savored, hugged and loved? Why see challenge as frightening when it provides indisputable evidence of just how infected our life had become and lights the path home?

My prior attempts failed because I fought recovery, and did so in ignorance and darkness. Yes, every now and then I'd get lucky and land a punch. Not this time. This time Joel and his insights effectively turned on the lights. Now my opponent couldn't be clearer. My eyes and mind were opened to exactly what it takes to fail or succeed.

Joel burned an extremely bright line into my mind, one I'll do my best to keep clean and clear for all my remaining days. He taught me that I get to stay and live on the free side of that line so long as it's never crossed, so long as all the world's nicotine remains on the other, so long as complacency isn't allowed to obscure it.

Freedom is our birthright and there was always only one rule to reclaiming it ... no nicotine today. The next few minutes are all that we have the ability to control and each will be doable. Baby steps to glory, just one moment, challenge, hour and day at a time!