

Now, At Last!

Quit Smoking Permanently

Several years ago, while working on addictions treatment, we learned that most people recovering from alcoholism found that quitting smoking was even more difficult than quitting drinking! This led us to look at the possibility that “nicotine” was not just a desire but possibly a physical need. This meant that there might be a non-addictive nutritional solution.

As a result of this concept, we researched the involved chemistries, determined the needed nutritional supplements and gave them to 108 chain smokers. 97 of these continued in the study for over a two year period. The startling results are shown below:

The Study Results

Eleven of the subjects dropped out of the program before the year was up. Of the ninety-seven (97) who stayed in the program, fourteen (14) reported they had smoked one to four cigarettes. All others **reported they had not smoked ANY cigarettes during the past YEAR. All ninety-seven, who stayed in the program, report that they are still nonsmokers.**

Conclusion

The Neher “Cease Smoking Program” has proven to be more effective than most programs and is one of only a very few that addresses the factors, which frequently cause the patient to return to his

or her habit. Many times a stressful situation is the reason given for the need to light up. This program offers specific nutritional supplementation to alleviate this trigger.

The Importance!

Eliminating the extremely harmful effects of tobacco smoking in society has become a national emphasis for all aspects of society. By banning smoking in public places, office buildings, public transportation etc., we have tried to force smokers into a sense of “being outcasts” in a hope of forcing them to quit. For some they finally succumbed and just “quit” to avoid all the unpleasantness. Others found it basically impossible to quit because of the severe side effects associated with the cessation and the resultant constant urges

which were completely distracting.

Through our study, we found that by using these techniques we were able to help in reducing and eventually stopping the use of tobacco. This research ultimately provided sufficient information for us to conclude that understanding the value of correct nutrition and incorporating certain building blocks for the effected brain chemistries, was a significant factor in withdrawal and consequently stopping the use of tobacco.

Step by Step Directions:

To make sure these are correctly understood an example of their use is given using each of these Steps:

STEP 1. Dosages Times

Select a period, which will be as stress free as possible. Look at this very carefully. If you are going to have a particularly stressful work period, or long family holiday, please consider waiting until after that period to begin the Program.

Select three dosage taking times for each day. These times **should be** when you will have an empty stomach , i.e. 30 minutes before or 2 hours after eating. For example: when you get up in the morning, before lunch and before dinner.

STEP 2. My Plan

This booklet contains a “sample calendar” assuming you currently smoke three packages (60 cigarettes) each day. If you use less, begin the program by starting it on the day equivalent to the number of cigarettes you currently smoke.

Fill your plan’s calendar as follows: On the day you plan to begin the program, write in the word, START.

Take 2 Neu-Slim capsules each of the three dosage times a day beginning with “START.”. Please note that following the example below, when you are down to 0 cigarettes per day, this will be the day you stop smoking entirely!

STEP 3. Step Down

Note the month and day on the plan calendar . Then, write in the day and month of each of the

days of the plan. Note that each day will show you the number of cigarettes you may smoke that day and the quantity and type of each nutritional supplement you should take that day.

STEP 4. Day 10

10 days before the STOP day, the supplements change. Each dosage time take 1 capsule of Neu-Becalm'd™ and 1 capsule of Neu-Slim.

STEP 5 for days 9, 8, 7, 6, 5, and 4.

Continue to decrease one cigarette per day and take your nutritional supplements according to Step 4.

STEP 6. Double Down

Day 3 prior to your STOP day, the supplements each “dosage time” change to:

Take 2 capsules of Neu-Becalm'd™ and 1 capsule of Neu-Slim

STEP 7. Your STOP DAY

Congratulations! NO MORE CIGARETTES

Each Dosage Time take 2 Neu-Becalm'd™ and 2 Neu-Slim

STEP 8. Days 1 – 10 after the STOP DAY

Same dosages as your STOP day:

STEP 9. Beginning 11 days after the STOP day, and until you run out of Neu-Slim, continue taking Neu-Becalm'd™.

When Neu-Slim is gone take 3 Neu-Becalm'd twice a day, mid morning and mid afternoon.

As you progress further and further from your STOP DAY, you will learn how many Neu-

Becalm'd™ you will need each day (from 0 – 6).

STEP 10. The Rest of Your Life

Let others know you have quit smoking – most people will admire you and be supportive. Many of your smoking friends may want to know how you quit. Consider all the positive things about quitting, such as how much you like yourself as a non-smoker, health benefits for you and your family and the example you set for others around you. A positive attitude will help you through the tough times.

Remember that nicotine acts to energize, help you focus and calm you down. When circumstances call for these actions, your brain will try to remind you that a cigarette would be helpful. If this happens, ask yourself, “What can I do instead of smoking?” Then take action. Do

not fall into the trap of replacing cigarettes with food. Remember if you increase your food intake, you must increase your level of exercise.

Most importantly, remember that once your brain learns new methods for reward, it will stop telling you to pick up a cigarette

Please note that prior to beginning the study each person was given access to the information following the example and work sheet below.

It is also given for perusal by healthcare professionals you may wish.

Month January, 2010

Date		1	START	3	3	5	6
Cig's			20	19	18	17	16
N.S.			6	6	6	6	6
N.B.			0	0	0	0	0

Date	7	8	9	10	11	12	13
Cig's	15	14	13	12	11	10	9
N.S.	6	6	6	6	6	3	3
N.B.	0	0	0	0	0	3	3

Date	14	15	16	17	18	19	20
Cig's	8	7	6	5	4	3	2
N.S.	3	3	3	3	3	3	3
N.B.	3	3	3	3	3	6	6

Month January, 2010

Date	21	22	23	24	25	26	27
Cig's	1	STOP	0	0	0	0	0
N.S.	3	6	6 per day until the NS runs out.				
N.B.	6	6	6	6	6	6	6

Date	28	29	30	31	There After		
Cig's	0	0	0	0	0	0	0
N.S.	6 per day until the NS runs out.						
N.B.	6	6	6	6 per day until as My Plan instructions			

This example assumes the person's current habit is one package of cigarettes each day.

Please Note: N.S. = Neu*Slim and N.B. = Neu*Becalm'd

Month _____, _____

Date							
Cig's							
N.S.							
N.B.							

Date							
Cig's							
N.S.							
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Date							
Cig's							
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N.B.							

Month _____, _____

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Cig's							
N.S.							
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Month _____, _____

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Month _____, _____

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Month _____, _____

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Month _____, _____

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The Information

In the past, the smoking “habit” has been characterized by such terms as “character defects,” “personality traits,” and sets of behavior identified as common to individuals of low will power.

In reality, will power and character traits have little or nothing to do with it. Instead, the necessary causal factors amount to chemical deficiencies, excesses, or imbalances in the brain. These abnormal chemistries occur as a result of genetic and environmental factors beyond the control of individuals. These altered chemical states actually become the factors necessary for a person to receive positive reinforcement through the use of tobacco.

The way we think and feel and the behaviors that result all happen because of chemical

reactions/interactions within our brains. These chemical reactions are dependent upon balanced levels of many separate chemical molecules working together with specialized brain cells to produce thoughts, feelings and actions. For every thought, feeling and behavior, there exists a neurochemical equivalent in the brain. As a person continues to use externally sourced chemistries to gain thoughts, feeling, or behaviors deemed desirable, he or she becomes dependent. This same person may, of course, deny the dependency.

In other words, for people to become dependent upon tobacco to produce the desired thought, feeling, or behavior, there must first exist, or be developed, a deficiency of a chemical component in their brains. The first step in breaking this dependence is, necessarily, abstinence from the use of tobacco. This step, however, results in a

set of dramatically uncomfortable and unacceptable thoughts, feelings and behaviors.

This is the rationale for physiological stabilization as the necessary starting point for “beating the cigarette habit.” Historically, physiological stabilization has been ignored or at best little understood. The major deterrent to gaining a usable understanding of this process, I believe, has been the lack of practical interpretation of recent research data into something understandable and useful.

Those who have “quit” believed themselves to be of strong character and will. Most smokers voice the same acceptance of those “who made it” but in all honesty, wonder to a degree about the durability of the claim. The easiest way to “treat” this condition is to study it as we would a disease.

In this society, a condition that meets the following four criteria may be termed a disease:

1. Etiology – factors that cause the condition are identifiable.
2. Symptomology – identifiable symptoms (i.e. irritability, loss of control)
3. Morbidity – the symptoms describe a stage of time process.
4. Prognosis – in this case, “guarded” but probably fatal in the long term.

Thus, if tobacco caused a smoking habit, everyone who has ever smoked would have the disease, and not nearly everyone does.

The etiologic factors being discussed and the focus of this writing are the neurochemical and enzymatic factors, which cause the condition.

Approximately 50 substances naturally produced by the brain have been identified as neurotransmitters of thoughts, feelings and

actions. Of these, several are of special interest in stopping smoking. And, very importantly, they can be identified with certain emotional states. This allows us to greatly simplify and make usable an understanding of the neurochemistry.

Let us look at some of these neurochemicals and their associated thoughts, feelings and behaviors.

The opioids, endorphins and enkephalins are substances used by the brain to moderate pain. Endorphins (endogenous morphines) seem to work to moderate physical pain. Enkephalins (met-enkephalins and leu-enkephalins) appear to have a profound effect in those neural areas associated with emotional memory.

The most painful emotional feeling we suffer is low self worth. Studies reported in the March/April 1987 Professional Counselor consolidated

important areas of information. As a result of studies, we know, for instance, that genetics and/or stress can influence opioid levels. When a person's opioid availability is low due to genetic susceptibility or unmanaged environmental stress, that person feels incomplete, inadequate and unworthy due to decreased enkephalin availability. Inherited deficiencies of these neurochemical are likely the cause of extreme shyness in children. They may never feel equal to their peers, regardless of the reality. They always feel "second best," never "first" or "as good as" others. When levels of those neurochemicals are adequate, such as following nurturing by a parent for example (which increases the release and utilization of endorphins/enkephalins), a child feels internally focused and calm, and has a sense of completeness. Sustained exercise releases opioids and a person feels calm,

complete and possibly euphoric. Children often learn this method of “self medication” by exercising, and the result may be viewed as being outwardly hyperactive.

Opiate drugs such as morphine and heroin, will fill these same receptor sites and produce the desired feelings of well being. Cigarette smoke contains salsolinol. This molecule will fill enkephalin receptor sites and produce increased feelings of well being.

Dopamine functions in the frontal lobe areas of the brain associated with reward, pleasure and altruism, as well as the maternal and parental feelings associated with the limbic system. Inadequate levels of dopamine cause individuals not to feel remorse about their actions, and do not experience maternal or paternal concerns. Adults, for example, when confronted with child neglect

or abuse issues will typically say they should care, but just can't seem to.

Norepinephrine is produced from dopamine and is the brain's energizer/arousal neurotransmitter. When adequate norepinephrine is available, a person feels energetic, motivated and full of “drive.” If norepinephrine is lacking, a person has no energy, lacks motivation and drive, and feels depressed.

Serotonin is the brain's emotional stabilizer. When adequate serotonin is available, a person has rational emotions. If serotonin levels decrease a person feels irritable, on the verge of tears for no reason, noises are more bothersome, and one can not sleep well.

GABA (gamma amino butyric acid) accounts for up to 40 percent of the brain's neurotransmitters. Think of it in functioning in

stress management. When adequate GABA levels occur, a person feels calm. When insufficient levels of GABA occur, a person feels anxious (free-floating anxiety) for no identifiable reason, and can experience panic attacks. GABA depletion is a major factor in Traumatic Stress Syndrome, and GABA depletion may be associated with various phobias.

Acetylcholine functions in concentration and memory. When less than adequate acetylcholine is available, a person has trouble concentrating for more than just a few seconds and experiences short-term memory problems.

To a significant degree, compulsive behaviors can be explained neurochemically. Once you come to understand and utilize this knowledge, it all begins to make sense. When the smoker lights up, they are self-medicating. Smoking is not just a

seeking of pleasure; it is an effective means of abating greater discomfort.

Cigarette Smoking

The first thing nicotine does in the brain is to facilitate the release of norepinephrine, and the person feels a lift in energy. The second thing nicotine does is fill and activate certain acetylcholine receptor sites necessary for concentration and memory. The third thing that happens is that acetaldehyde in the smoke combines with dopamine and produces salsolinol, which fills and activates enkephalin sites, and the person senses an increased sense of well being. With a chronic release of norepinephrine, we begin to lose GABA as well as enkephalin, and the person feels increased anxiety when attempting to quit smoking abruptly.

When a person attempts to stop smoking, he or she experiences: (1) a loss of the energy due to the reduced release of norepinephrine by nicotine, (2) an inability to concentrate and think abstractly due to an acetylcholine deficiency produced by the replacement of acetylcholine with nicotine, and (3) anxiety and a sense of incompleteness due to limited availability of GABA and enkephalin.

To put it simply, smoking energizes you, helps you concentrate and keeps you calm. Try to quit – you have no energy, you can't think and you feel anxious.

In conclusion, alterations in the balance of brain chemistry alter our thoughts, feelings and behaviors. People with well-balanced brain chemistry appear enviably assertive, confident, in

control, concerned for others and able to think quickly. Because all systems are in concert, their survival does not appear threatened. They are able to take life as it presents itself and alter their thoughts and behaviors to feel comfortable. There is no need for external chemical input. Nicotine and other drugs present a destabilizing influence to them.

Maslow has shown us the foundation for building self-actualization must be physical stabilization. The stabilization must involve improving brain chemistry capabilities. Today nutritional supplement combinations are available that dramatically enhance neurotransmitter availability and hasten the recovery to acceptable, comfortable, positive feelings and thoughts.

In the past, we have attempted to construct the second, third and fourth levels of self esteem

building without providing a sound physiological foundation. As a result, the structure often collapses.

Please note that from all of the above, we may state:

**To wage an effective
war on nicotine,**

**We must first
Make peace with our
neurochemistry.**