Up In Smoke

Cigarettes increase your risk of PCP, but, oh that first drag of the day

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The subject is smoking. Is it time to butt out? You tell me.

On the surface, the question might seem like a no-brainer. After all, it's been nearly three decades since the surgeon general first warned us about the health hazards of cigarettes. According to the American Lung Association (ALA), smoking-related illnesses kill nearly a thousand people a day in the United States. Countless studies have linked the practice to lung cancer, heart disease, emphysema, and high blood pressure.

So isn't it obvious that smoking and HIV are just plain incompatible? "I have to admit that on this one I'm of two minds," said Tandy Iles, a health educator at ALA in San Francisco. "It's clear that smoking compromises the immune system and, in turn, is not good for people with HIV. On the other hand, our feedback is that the stress of trying to quit can be too much for some people with HIV. Many tell us that with so much stress and upheaval already in their lives, they find comfort in smoking."

That's exactly how Marcus Jensen, a Santa Fe, N.M., artist with HIV, feels about his pack-a-day habit. "I know it's not healthy," said Jensen, 38, tapping his cigarette on a table and lighting up. "But smoking has become a ritual that I really enjoy. Call me addicted, but it's an addiction that keeps me from climbing the walls."

Fair enough. But consider this. In addition to the many studies on the general dangers of smoking, some recent research has specifically examined whether cigarette smoking speeds progression to AIDS. One study found that on average, HIV positive smokers develop Pneumocystis carinii pneumonia (PCP) within nine months of diagnosis compared with 16 months for nonsmokers. Another study found that heavy smokers were at least three times more likely to develop PCP than light smokers. These results should come as no surprise, since smoking impairs the lungs, making them more vulnerable to infection. And despite the wide use of prophylaxes, which has cut in half (from 50 percent to 25 percent) the proportion of cases in which PCP was the initial AIDS illness, the disease remains a leading killer of people with HIV. So, logic says quitting may well prolong a PWA's life.

The Centers for Disease Control and Prevention have also released a study that found cigarette smoking significantly increases the likelihood and rate of developing thrush, oral hairy leukoplakia

and bacterial pneumonia in puffers with HIV. The bacteria that causes Mycobacterium avium complex (MAC, a nasty, life-threatening infection affecting as many as 40 percent of people with HIV) not only was recovered from the tobacco, cigarette paper and filters of four major brands of cigarettes but even survives the smoking process. For people with HIV who are trying to reduce their risk of exposure to bacteria, this is another reason to kick the habit.

A few years ago, researchers published the curious finding that cigarette smoking increases the number of CD4 cells in people with HIV. Smokers naturally thought: “A rise in T cells? Maybe smoking -- heaven protect us! -- is good for PWAs!” Not exactly. It turns out that smoking causes an artificial rise in the number of white blood cells, due to a reaction to the toxins in smoke. The more white blood cells, the more CD4 cells. But the proportion represented by CD4 cells -- the “CD4 percentage,” a more reliable measure of immune status -- is not necessarily greater. And it is believed that by activating CD4 cells, smoking may enhance the production of HIV.

Maybe cigarettes are wreaking havoc on your immune system. But smoking also calms your nerves. It helps you keep it together on the wild ride of HIV. Besides, for health reasons you’ve already given up every other guilty pleasure. Still, if you want to quit or at least cut back without going berserk, how to proceed?

“First of all, we are not looking at HIV positive people who smoke as bad,” said Gloria Soliz, organizer of the Last Drag, a San Francisco smoking-cessation group. “Our basic philosophy is that smoking cessation improves one’s overall health and quality of life. It’s important for people with HIV who want to stop smoking to be in a safe and supportive environment where they are empowered to give up cigarettes on their own terms.”

So you’ve joined Smokers Anonymous. You’ve tried nicotine gum, acupuncture, hypnosis and worn the patch. But you’re still on tobacco road.

You might want to try Nicotrol NS, a nasal spray recently approved by the Food & Drug administration. Available this summer by prescription only, the spray is designed to reduce nicotine cravings and withdrawal symptoms, allowing smokers to gradually ease off cigarettes. Heralding the appearance of Nicotrol NS, a major newsweekly put it this way: “If You Can’t Beat It, Snort It?” You decide.

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