Why Do People With Schizophrenia Smoke?

Approximately 85% of people with schizophrenia smoke. They also smoke two to three times more cigarettes than the average smoker and inhale more deeply. Studies and personal reports show that smoking often reduces the symptoms of schizophrenia, and can also reduce some of the side effects of medication.

Heavy smoking poses significant expense for people whose income is already reduced by their disability. Smoking also contributes to the social isolation of people with schizophrenia from mainstream society. Smoking can interfere with the metabolism of some antipsychotic medications.

The serious health risks of cigarette smoking are well known, and people with schizophrenia have higher risks of death from heart disease and pneumonia. However, people with schizophrenia are actually less likely to develop lung cancer than the general population, including non-smokers. Scientists do not understand why this is so.

In general, psychiatrists who treat people with schizophrenia tend not to emphasize smoking cessation the way most doctors do with their patients, because the importance of smoking to the patient may often outweigh the potential harm. Smoking cessation programs are less successful than in the general population, but will work for some individuals.

Smoking is very soothing to people with schizophrenia, in part because nicotine temporarily relieves the cognitive and sensory disruptions of psychosis. The nicotine in cigarettes is similar to the brain chemical acetylcholine. Nicotine molecules from cigarette smoke enter the bloodstream from the lungs, cross into the brain, and fit into nicotinic acetylcholine receptors like a key fits a lock. In turn, these receptors affect the behavior of neurons in a way that relieves symptoms.

Nicotine patches provide a safe and effective alternative to cigarettes, delivering the relief of symptoms without the social, financial and health impacts of smoking. Most psychiatrists agree that when a patient is in a situation that doesn't allow smoking, patches should be provided. Psychiatrists are increasingly combining nicotine patches with antipsychotic medications in holistic treatment regimes for schizophrenia.

Scientists are also studying the ways in which nicotine acts on the brain systems involved in schizophrenia. One day the unusual rate of smoking among people with schizophrenia may lead to
new, more effective drugs to improve the lives of the 2.2 million adults in the United States currently suffering from schizophrenia.

Smoking in hospitals was banned by the Joint Commission on Health Care Organizations, which means that psychiatric inpatients cannot smoke and must use a nicotine patch instead. However, most organizations that care for people with schizophrenia on an outpatient basis recognize that smoking is often one of the patient's greatest pleasures.

Rather than trying to deprive someone of cigarettes, caregivers often impose reasonable limits on smoking, such as one pack per day. It is also reasonable to designate particular smoking areas, to require that cigarette butts and ashes be properly disposed of, and to prohibit dangerous habits like smoking in bed.

Because smoking is such a powerful motivator for people with schizophrenia, it is also fairly common to use cigarettes as positive reinforcement for taking medication, attending a doctor's appointment, and other important behavior.