

## **Freedom from Nicotine – The Journey Home**

# **Chapter 10: Emotional Recovery**

## **Emotion**

Feelings reflect conscious awareness of emotions stirring within. Like the world's most intricate recipe book, the structure and function of these beautiful minds somehow blend and melt, and then remember, a multitude of conscious, subconscious, and neurochemical situational responses. In doing so, they weave an emotional tapestry that rivals the stars.

Yet, if the only emotions remaining were those untouched by nicotine, our mind's unfeeling night sky would be empty and dark.

Joy, trust, fear, surprise, sadness, disgust, anger, anticipation, what would each feel like if unaccompanied by addiction to a nervous system stimulant?

As with anger, how many emotions became nicotine replenishment triggers?

Nicotine-free, how calm and mellow would serenity be? What does fear feel like when standing on its own? And what happens when our most feverish anticipation -- that next fix -- ends?

Welcome to what may well be your greatest emotional adventure ever.

Not only will trillions of cells receive fewer toxins and more oxygen, blood-serum nicotine levels will no longer impact emotions, feelings, and mood by direct and indirect stimulation of dopamine, serotonin, norepinephrine, acetylcholine, gamma-aminobutyric acid, and glutamate.[1]

Nicotine dependence contributes to a host of anxiety and mood-related disorders.[2]

Mood scores are lower in users than non-users throughout the day, with delayed and lower peaks, and decreased subjective feelings compared to non-users.[3]

More prone to anxiety, worry, fear, anger, frustration, envy, jealousy, guilt, depressed mood, and loneliness, what's amazing is that more than half of all nicotine addicts have already successfully arrested their dependence.

Why delay joining them a moment longer?

The term "emotional intelligence" refers to the ability of individuals to recognize their own emotions and those of others, to discern between different feelings and label them appropriately, and to use emotional information to guide thinking and behavior (what's known as "emotional repair").[4]

While low emotional intelligence was a likely risk factor in many of us getting hooked while young,[5] high emotional intelligence, most importantly emotional repair or the ability to manage our emotions, is highly protective against relapse.[6]

How confident are you in your ability to recognize and regulate your emotions?

As reviewed in Chapter 4 and a major finding of a 2020 study,[6] the most critical emotional repair lesson of all is that nicotine is not a stressbuster, that addiction to nicotine intensifies stress.

What will stress feel like when anxiety-induced urine acidification is no longer forcing your kidneys to accelerate removal of the alkaloid nicotine from your bloodstream, thus adding the onset of early withdrawal to every stressful situation encountered?

What will relaxation feel like once you reside here on Easy Street with us, more than a billion comfortably recovered ex-users? What will the calm before bed feel like when nicotine is no longer making your heart pound up to 17.5 beats per minute faster?/p>

Imagine entire days, weeks, months, or eventually even years where you're never once punished with wanting, an urge or use crave.

What would it feel like to untangle and free your emotions from your dependency?

Picture getting off of an endless emotional roller-coaster ride of neurochemical lows and highs, a ride yo-yoing you between badly wanting a nicotine "aaah" wanting relief sensation and getting one.

Emotional recovery isn't only about navigating the feelings and emotions brought on by recovery. It's about moving beyond them. It's about freeing them, about brightening every star in life's sky.

Before you is an opportunity to heal pride and self-esteem. Imagine the sea of emotions when you first realize that you actually like, or even love, being free, that you never, ever want to go back. I cried.

Although I've separated recovery's layers for purposes of review and focus, in reality they're so overlapping and intertwined that the best we can hope for is to grasp the obvious. I assure you, it's more than enough.

Such complexity reflects the depth and beauty of who we are, and why it's so sad to continue paying the nicotine addiction industry to pull our emotional strings as if its puppets.

But why has it taken so long for us to awaken to the fact that our emotions became hostage and were being molded by our dependency? And what recovery emotions are totally normal and expected?

As for why it's taken so long, don't be too hard on yourself. The human mind protects and insulates itself from circumstances that seem beyond its control. It does so by employing defensive tactics that work by distorting or blocking reality and natural instincts.

The brain's well-stocked arsenal of defense mechanisms includes denial, displacement,

intellectualization, projection, rationalization, reaction formation, regression, repression, sublimation, suppression, compensation, dissociation, fantasy, identification, undoing, and withdrawal.[7]

Dependency recovery understanding and insights can help fuel and inspire freedom's dreams, including helping crumble dependency defenses.

If they were to crumble, what might emotional recovery be like?

The greatest hurdle of all is coming to terms with the death of nicotine-normal. Although normal to miss normal, let's review the natural grief cycle often encountered when ending use.

While doing so, ask yourself, is it possible to enhance our emotional intelligence sufficiently to see beyond a sense of loss, to accelerate return to the normal that existed prior to nicotine-normal becoming normal?

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1. Quattrocki E, et al, Biological aspects of the link between smoking and depression, Harvard Review of Psychiatry, September 2000, Volume 8(3), Pages 99-110; also see Slotkin TA and Seidler FJ, Nicotine exposure in adolescence alters the response of serotonin systems to nicotine administered subsequently in adulthood, Developmental Neuroscience, 2009, Volume 31(1-2), Pages 58-70.
  2. Grover KW, et al, Does current versus former smoking play a role in the relationship between anxiety and mood disorders and nicotine dependence, Addictive Behaviors, May 2012, Volume 37(5), Pages 682-685.
  3. Adan A, et al, Effects of nicotine dependence on diurnal variations of subjective activation and mood, Addiction. December 2004, Volume 99(12), Pages 1599-1607.
  4. Wikipedia, Emotional Intelligence, [https://en.wikipedia.org/wiki/Emotional\\_intelligence](https://en.wikipedia.org/wiki/Emotional_intelligence) 06/10/20
  5. Khalil RB et al, The Relationship Between Emotional Intelligence and Nicotine Dependence in Lebanese, Journal of Psychoactive Drugs, Jul-Aug 2017, Volume 49(3), Pages 252-257.
  6. Megías-Robles A et al, The protective role of emotional intelligence in smoking relapse during a 12-month follow-up smoking cessation intervention, PLoS One, June 2020, Volume 15(6).
  7. Defense mechanism, New World Encyclopedia, April 3, 2008, [http://newworldencyclopedia.org/entry/Defense\\_mechanism](http://newworldencyclopedia.org/entry/Defense_mechanism)
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## **Kubler-Ross Grief Cycle**

The Kubler-Ross model identifies five discrete stages in the grief cycle when coming to terms with any significant emotional loss: (1) denial, (2) anger, (3) bargaining, (4) depression, and (5) acceptance.[1]

Albeit chemical, dependency upon nicotine may have been the most intense and dependable relationship in our entire life.

As a smoker, unless wet and it wouldn't light, never once did puffing on a cigarette let me down. Even if a brand I hated, nicotine's "aaah" wanting relief sensation was always just seconds away.

If we smoked nicotine ten times per day and averaged 8 puffs per cigarette, that's 80 times a day that we puckered our lips up to some nasty smelling butt spewing forth more than four thousand chemicals that included hundreds of toxins, 81 of which are known to cause cancer.

What human on earth did we kiss 80 times each day? Who did we depend upon 80 times a day? How many days during our life did we think or say our name more than 80 times? Any? Imagine being closer to our addiction than our own name.

In 1982, Joel Spitzer applied the Kubler-Ross grief cycle model to the emotional journey navigated during recovery.[2] Examples of the five stages of healing include:

Denial: "I'm not really going to quit. I'll just pretend and see how far I get."

Anger: "Have I really had my last nicotine fix? "This just isn't fair!"

Bargaining: "Just one puff, just once more. Two days without, I've earned it!"

Depression: "This is never going to end." "What's the use?" "Why bother?"

Acceptance: "Hey, I'm feeling pretty good." "I can do this, this is great!"

It's important in navigating emotional recovery to not get stuck in any stage before reaching acceptance. Understanding the roots of each will hopefully foster a smoother and quicker transition.

As we review each stage, keep in mind that the Kubler-Ross's grief cycle of emotional loss is not etched in stone, nor need it occur in the order presented. One or more phases may be absent, while another gets revisited.

Obviously, it's hoped that by spending time now reflecting on denial, anger, bargaining, and depression that each can be minimized, if not avoided altogether.

In the perfect world, knowledge and understanding would allow us to skip the first four phases entirely and jump right to acceptance.

And that actually happens far more often than you might think. But if it doesn't, don't fret. You'll navigate each just fine.

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1. Kubler-Ross, Elizabeth, "On Death and Dying," 1969, Routledge, ISBN 0415040159.

2. Spitzer, J, Joel's Library, Understanding the Emotional Loss Experienced When Quitting Smoking, 1982, <https://whyquit.com/joel>

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## Denial

Cessation denial is a state of disbelief. The denial phase of emotional recovery questions and challenges whether a long and intense chemical relationship is really ending.

Cessation denial is almost the opposite of active dependency denial, where distortion and blocking techniques provide cover and insulation, so as to enable continued use.

Denial is the unconscious defense mechanism - just below the surface - that allowed us to resolve the emotional conflict and anxiety that would normally be felt by a person living in a permanent state of self-destructive chemical bondage.[1]

While using, we were protected by a thick blanket of rationalizations, minimizations, fault projections, escapes, intellectualizations and delusions. Our denial helped insulate us from the pain and reality of captivity. For most, it also helped us pretend that the problem would somehow soon be solved.

But here, during recovery, those same anxiety coping defenses begin to distort reality about what's really happening.

As mentioned, I start seminars by asking for an honest show of hands to the following question. "How many of you feel that you will never, ever smoke again?" Rarely does a hand go up. Even though all attending came wanting to stop, then and there, all were in denial, as none believed they would.

Although we want to stop, on a host of levels the mind isn't yet convinced. If convinced, why do so many of us treat recovery as though some secret? And why leave an escape route such as that one hidden cigarette, or a means to quickly get more?

Denial is normal. But if allowed, it can transform disbelief into failure.

"I don't want to stop just yet," decides Ryan. "I am perfectly healthy using, so why now," asks Emily? "I'm different, I can control use and keep it to just one or two a day," asserts Ashley.

Regrettably, relapse is at hand for Ryan, Emily and Ashley. While denial acts as protective insulation in allowing us to get our toes wet in beginning this journey -- including allowing you the courage to reach for this book - cessation disbelief can easily become a path of betrayal.

The denial phase protects us against the immediate emotional shock of leaving the most intense relationship we've likely ever known, even while embarking upon a journey from which there should be no return.

It's a shock buffer that allows us time to come to terms with where we now find ourselves. It operates unconsciously to diminish anxiety by refusing to perceive that recovery and success will really happen.

A number of times I went for three days and then "rewarded" myself with that one puff that always spelled defeat. Clearly, I hadn't made it beyond denial. But if I had, the next phase encountered would likely have been anger.

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1. Denial. (n.d.). The American Heritage Dictionary of the English Language, Fourth Edition. Retrieved July 21, 2008, from Dictionary.com

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## Anger

Anger is a normal and expected emotional recovery phase. It's also a way to experience the flow of missing adrenaline that was once part of our nicotine high.

Anxieties flowing from anger can also be used to intentionally fuel rage. I take no pride in recalling that I could become so nasty and create so much turmoil among those I loved, that I could convince them that I needed my cigarettes back.

But there are important distinctions between anger felt during the emotional recovery stage and using it as an adrenaline crutch, or a sick relapse ploy.

The anger phase of recovery is a period of healing where we begin to awaken to the realization that it may actually be within our ability to pull this off and succeed. It's awareness that, just maybe, our last puff, dip, chew or vape ever is already behind us.

Durable nicotine use memories flowing from captive dopamine pathways elevated that next fix to one of life's top priorities. But emotional recovery has now transported us from fear of stopping to fear of success.

Is it any wonder that anger would be the mind's reaction? It's now sinking in. Success is occurring in spite of denial. A relationship that was once high-priority really is ending. This realization can feel overwhelming.

Now, all the new ex-user requires is some excuse, any excuse, to let it all out, to vent, to turn an ant-hill into a mountain. Conflicting motivations, freedom or feed-em, risk of succeeding and fear of the unknown. Just one spark, any spark, and the uneducated ex-user stands primed to lash out.

While this high-energy phase of the emotional stage of goodbye is a normal step in recovery, the educated ex-user both recognizes anger's arrival and understands its roots. Recognition is critical as it provides a protective seed of reason inside a mind looking for a spark, a fear-driven mind poised to abandon rational thought.

If allowed, that spark may activate the body's fight or flight response, releasing a cascade of more than one hundred chemicals and hormones.

The prospect of success is not a logical reason to get mad, enraged, or fight. The educated mind knows that emotion can be contrary to our well-being and best interests. Anger ignores all positives while pretending a sense of loss, a loss based largely on false use rationalizations.

So how does a mind trained in recognizing and understanding recovery anger prevent it from harming us and the world around us? Chapter 11 on subconscious recovery provides a number of techniques for navigating a crave episode which may not peak for three minutes.

In that anxiety underlies both crave episodes and anger episodes, hopefully, they'll serve you well. Let me leave you with one exercise that may aid in generating the patience needed to move beyond anger.

Another day of freedom causes a sense of loss to collide with the likelihood of success. A spark is generated. It's time for patience, just one micro-second at a time.

Recognize the anger building within. Slow deep breaths. Understand what's happening and why. Realize that unless being physically assaulted, that only bad can come from unleashing your body's fighting chemicals. Anger is almost never a solution.

It reflects primitive impulsive instincts out of control. It carries strong potential to harm innocent victims, leaving emotional scars that may never fully heal.

If possible, sit down. Slowly close your eyes while taking slow deep breaths into the bottom of both lungs. Focus all concentration on your favorite color or object, or upon the sensations associated with inhaling and exhaling your next breath. Feel the cool air entering, and its warmth while slowly exhaling.

Baby steps, just one second at a time. Take another slow deep breath while maintaining total inner focus. Feel the sense of calm and inner peace as it begins to wash over you. As calmness returns, slowly open your eyes. Now, if you wish, respond to the situation with logic, reason and calm.[1]

How long will the anger phase last? As briefly or as long as we allow.

Clearly, knowledge can provide the insights needed to recognize transitions and hopefully react in healthy, non-destructive ways. It's what anger management is all about. Hopefully, understanding and acceptance will help accelerate emotional recovery. But if not, don't be disturbed as each step reflects normal emotional healing.

Fears, cycling emotions, an addict's relapse ploys, or feeling a sense of loss, recovery presents plenty of opportunities to encounter anger. We also need to remain mindful that normal everyday life produces anger too, even in never-users. At times, anger's causes may overlap and get tangled. Even then, we have it within us to fully control anger impulses, without harm to anyone.

Success at hand, where does the mind turn next? What is anger's ultimate solution? A debate is about to begin. How do we keep our cake while eating it too? But this isn't about cake. It's about a highly addictive chemical with tremendous impact upon our physical, subconscious, conscious and emotional well-being.

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1. While debate abounds about meditation's ability to heal the body, and study quality to date has been horrible, there is limited evidence of some forms of meditation diminishing blood pressure, see U.S. Agency for Healthcare Research and Quality, Evidence Report/Technology Assessment Number 155, Meditation Practices for Health: State of the Research, AHRQ Publication No. 07-E010, June 2007.

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## Bargaining & Depression

### Bargaining

*"Maybe I'm the exception to the Law of Addiction."*

*"Maybe I can handle just one!"*

Chapter 4 reviewed common use rationalizations employed by the still feeding addict in an attempt to justify that next fix. Using many of the same rationalizations, here bargaining's primary hope is more about continuing this journey home while also visiting with nicotine now and then.

Instead of grief simply accepting an end to nicotine use, dependency ignorance toys with breaking free while remaining great friends.

Bargaining can be with our particular nicotine delivery device, another form of delivery, ourselves, loved ones or even our higher power. Its aim is the impossible feat of letting go, without letting go. If allowed, the emotional conflict of wanting to say "hello" while saying "goodbye" can easily culminate in relapse.

"Just one" or "just once" thinking can evolve into "this is just too hard," "too long," "things are getting worse, not better," "this just isn't the right time to stop!"

Although a significant portion of this book is about bargaining, if allowed, this book itself can and will provide an abundance of fuel for the bargaining mind.

For example, every user and every recovery are different. Sharing "averages" and "norms" where the primary focus is upon the most common form of delivery (smoke) will naturally generate tons of ammunition for those whose dependency or recovery traits are not "average" or don't involve smoke.

Key to navigating conflicted feelings is to demand honesty, while keeping our primary recovery motivations vibrant, strong and on our mind's center-stage. The wind beneath our wings, allowing freedom's desire to die invites destructive and intellectually dishonest deals to be made.

Instead of buying into relapse, remember, it's impossible to fail so long as 100% of the planet's nicotine remains on the outside. But what happens inside the grieving and bargaining mind once it realizes that brain dopamine pathway design makes it impossible to arrest our dependency while letting it run free?

### Depression

Please refer to Chapter 9 for a detailed discussion of depression. While a period of sadness and depression is normal and expected when ending any long and intense relationship, even a chemical one, don't hesitate to get seen and evaluated if at all concerned about ongoing depression.

If already taking medication for depression, keep in mind that your prescription may need adjustment.



And do remain alert as nicotine can mask hidden underlying depression. It's why getting seen is important if your period of sadness isn't both brief and mild.

## **Acceptance**

The victory phase of the Kubler-Ross grief recovery cycle is acceptance. It's the "this is do-able" moment of an emotional journey that can mark the transition from a "user trying to stop" to "ex-user."

It may or may not have been pretty getting here. Now and then, you may still encounter infrequent or seasonal un-extinguished subconscious feeding cues.

And it's likely that your pile of old replenishment memories will, for now, continue their gradually waning tease. It's also likely that the pile's lure will continue to be fueled by a lingering romantic fixation or two, that might benefit from focused honesty. But you did it!

In regard to your emotional recovery, if you've been able to let go and fully accept letting go then your emotional journey is complete. Congratulations!

It's now a matter of time and distance allowing an ever-growing collection of nicotine-free emotional response memories to bury bondage responses.

Still only one rule ... none today!

## **Freedom from Nicotine – The Journey Home**

Originally released on January 1, 2009, the 4th revision was completed October 15, 2020. Individual book topics are shared below and a full 10.8MB 415 page PDF is available at [WhyQuit.com/FFN.pdf](http://WhyQuit.com/FFN.pdf).

All images have been removed from the following PDF chapters so as to make the files smaller and faster opening on mobile devices. All chapter topics (136) are available with images as [topic web pages](#) in HTML format.

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