

CASE REPORT

The power of nicotine addiction

Mary Sieggreen

The first image I had of Jack Sommers (not his real name) is the indelible image I carry with me today, 13 years later. It was in the early afternoon that I entered his hospital room and there he sat, upright in bed, sans shirt, with his lips pursed around a mouthpiece connected to a long tubing. My eyes followed the tubing to its end – a cigarette which was held tight to an ashtray in a rig attached to his bedside stand (figure 1).

The impact of this message was severe. Here was a man so addicted to smoking that he had given in to its power to control his life, his health, and his destiny. Mr Sommers had no arms or legs when I first met him. He had Buerger's disease (see box) and smoking cigarettes had caused him to lose all four of his limbs. He was smoking still.

I was a nurse for 16 years before I met this man. I had known many patients who had lost their ability to speak because of cigarette-

induced throat cancer and they continued to smoke through the tracheostomies in their necks. These patients left a remarkable impression on me. But somehow, Mr Sommers represented the horror of smoking that no other patient had been able to do so far.

The medical records that chronicle his many hospital and emergency room visits showed Mr Sommers to be a desperate man controlled by a constant, unrelenting theme of pain. He spent much of the second half of his life in the hospital begging for pain medication. Despite "no smoking" orders from the physicians and urging from the nurses emphasising the effort to get him to stop, he was not able to. From all accounts, he was not interested in giving up his cigarettes. But through it all, he was always begging for relief from the agony of his pain.

Mr Sommers was first diagnosed with Buerger's disease in 1956 at age 28. Over the years he made multiple visits to his physician's

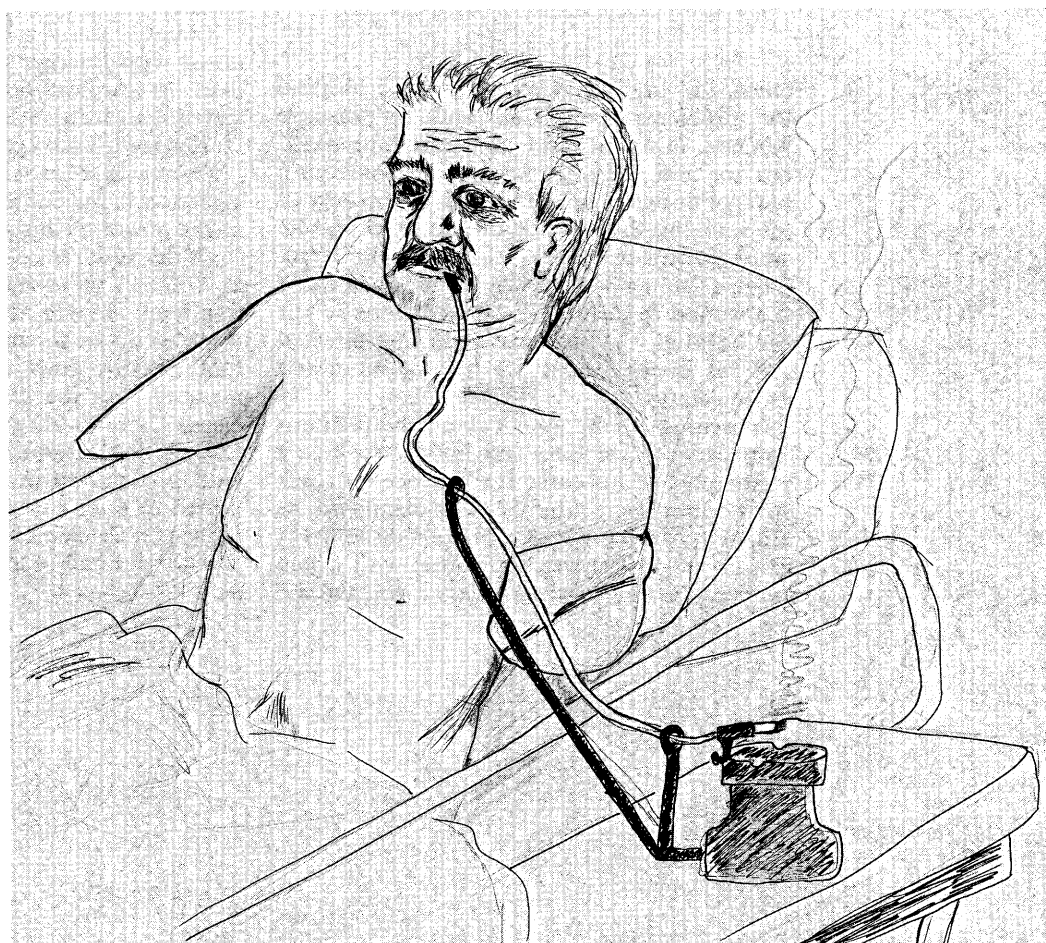


Figure 1

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Buerger's disease

Buerger's disease, found almost exclusively in smokers, is an inflammation of the small and medium-sized arteries of the limbs. It occurs primarily in men under 40 years of age, but a small percentage of women are affected as well. Inflammation of the vessel wall prevents the flow of blood to the distal tissues of the body, resulting in ischaemia and gangrene. The disease typically causes loss of fingers and toes and even limbs in this young patient population. Patients usually present with pain. Ulcers of their fingers and toes occur early in the course of the disease due to arterial occlusion.

Buerger's disease is treatable if diagnosed early but only with strict abstinence from tobacco. Medications such as vasodilators and antiplatelet agents may be used. Treatment includes wound care and pain management. If smoking continues, other treatments are usually ineffective.

Joyce JW. Buerger's disease (thromboangiitis obliterans).

Rheum Dis Clin North Am 1990; 16: 463-70.

Ohta T, Shionoya S. Fate of the ischaemic limb in Buerger's disease. *Br J Surg* 1988; 75: 259-62.

Porter JM, Taylor LM, Baur GM. Nonatherosclerotic vascular disease. In: Moore W, ed, *Vascular surgery: a comprehensive review*. Orlando, FL: Grune & Stratton, 1983, pp 55-90.

Shionoya S. Buerger's disease (thromboangiitis obliterans).

In: Rutherford RB, ed, *Vascular surgery*. Philadelphia, PA: WB Saunders Company, 1989, pp 207-17.

office, the emergency room, and the hospital for problems with pain and non-healing wounds. His arms and legs were amputated one toe and one finger at a time. Sometimes parts of fingers were amputated but because of his smoking the wounds did not heal and he would return to have a little more amputated. Then a "much desired" cigarette would cause the wound to open again, even before he left the hospital. His wounds would get infected and his body and his life became more and more painful.

Teaching Mr Sommers about the relationship between smoking and his disease was a major part of his care. He had been a truck driver, but soon after he was diagnosed he stopped working because of his "disability". His great support was his mother with whom he lived. She loved her son very much and did



Figure 2 The Caterpillar, smoking a "hookah" (also called a "hubble-bubble" or "water pipe"), in Alice's Adventures in Wonderland, by Lewis Carroll

everything she could to make him comfortable and well cared for. When he lost his legs she was the one who transferred him from his bed to the chair and from his chair to the car. After he lost his arms she fed and bathed him. And whenever he asked, she lit his cigarettes.

Twenty-nine years after he was first diagnosed with Buerger's disease, and after more than 70 surgical procedures, Mr Sommers suffered a cardiac arrest and died.

Whenever I ask a patient who has done both, "Which was it harder to kick, the drugs or the cigarettes". Mr Sommers' life is an illustration of the power of this addiction.

Of the hundreds of patients one can care for as a nurse, there are always just a few who stand out. He was one of those people. I often think of this man, and the indelible image of him without arms and legs merges in my memory with the image of the caterpillar in Lewis Carroll's *Alice's Adventures in Wonderland* as that caterpillar sat on the mushroom with lips pursed around a mouthpiece connected to a long tubing – the rig of a smoker (figure 2). Smoking had control over this man, and he gave half of his life and his body to the pain it produced.