INTRODUCTION

Smoking is currently the subject of universal interest being considered by the World Health Organization (WHO) the leading cause of preventable death worldwide. It is considered major public health problems in the world, next to AIDS and malnutrition. It is a risk factor for severe diseases such as cancer, respiratory problems, cardiovascular disease, hypertension, impotence in men, pregnancy complications, among others (INCA, 2000).

Research of the Ministry of Health show that approximately 47% of the entire male population and 12% of women worldwide smoke. While in developing countries the smokers are 48% of the male population and 7% of the female population in developed countries the participation of women more than tripled: 42% of men and 24% of women have the behavior of smoking. For years, more than 400,000 people die prematurely because of the way of smoking. It is estimated that approximately 40% of smokers die sooner, if not stop smoking (COOPER, 2003).

Acupuncture therapy is specialties recognized by the World Health organize since 1976 and accepts as a specialty by the Council of Physical Therapy and Occupational Therapy (COFFITO) in 1985. It uses the Auricular Acupuncture as therapeutic resource to stimulate certain points which are located in the ear, to rebalance the body. Stimuli are made with pressure using beads or seeds with small needles or semipermanent also with devices that promote a small spark on the specific points (Bontempo, 1999).

Because of the beneficial characteristics of this technique and the contribution that the Auriculoacupuntura can bring to improve the quality of life by reducing the consumption of cigarettes, aims to reduce significantly the number of cigarettes smoked daily, leading thus to Improved quality of life.

OBJECTIVE

This study aims to evaluate improvements in reducing the consumption of cigarettes in smokers as well as analyze optimization of quality of life and well being of volunteers searched.

METHODOLOGY

We evaluated and treated five volunteers (four women and one man) between 35 and 54 years with chief complaint of smoking in the town of Balneário Camboriú / SC. Anamnesis was conducted with a questionnaire to detect emotional problems, primary and secondary complaints that may be involved with smoking. At the test was conducted Fagerström (CARMO, 2002) to analyze the degree of dependence on nicotine in the body. This instrument consists of six (6) of multiple choice questions, where each receives a note. At the end, the sum of points is interpreted as: no dependency, low, medium or high dependency. The result ranges from 0 to 10 points. A total of more than 6 (six) points indicates probable addiction, with withdrawal syndrome (discomfort, anxiety and nervousness) to stop smoking.

The volunteers were subjected to the application of disposable needles semipermanent of 1.5 mm, according to the complaints and perceived changes in the questionnaire. At the 1st meeting specific points were used to treat smoking, which according Souza (1994), are: Shen Men, Kidney, the sympathetic nervous system, Vice bilateral, Lung (2X), Diaphragm (in case of cough), External Nose , Boca (if associated with hunger), large intestine, liver, Anxiety 1 and 2, Liver yang 1 and 2, Tension and Heart.

Before the application was the sterilization of ear with alcohol 70%. Needles were fixed with adhesive in the points cited in accordance with the complaints of the volunteers are strongly encouraged to pressure a few times a day by volunteers. On the 10th day, the needles were removed and there was new sterilization of auricles. Were fixed, then new needles, at the same points of treatment. The stimuli continued to be daily until the other sessions.

RESULTS

The results indicate, by percentage and individual as the volunteers behaved themselves in relation to the conduct performed with them.

Table 1 shows the number of cigarettes per day before and after treatment. There is a reduction greater than 50% in volunteers 1, 3, 4 and 5. It is also clear that the voluntary 1 stopped smoking after treatment and the others reduced the amount of cigarettes by half or more.

<table>
<thead>
<tr>
<th>VOLUNTÁRIO</th>
<th>ANTES DO TRATAMENTO</th>
<th>APÓS TRATAMENTO</th>
<th>REDUÇÃO %</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>10</td>
<td>Zero</td>
<td>100%</td>
</tr>
<tr>
<td>02</td>
<td>20</td>
<td>11</td>
<td>45%</td>
</tr>
<tr>
<td>03</td>
<td>20</td>
<td>2</td>
<td>90%</td>
</tr>
<tr>
<td>04</td>
<td>20</td>
<td>8</td>
<td>60%</td>
</tr>
<tr>
<td>05</td>
<td>20</td>
<td>8</td>
<td>60%</td>
</tr>
</tbody>
</table>

Source: Data work by the Author.

Table 2 shows the test of dependence before and after Auricular Acupuncture. All volunteers studied showed improvement in this aspect
The whole treatment is only valid when the person really wants to stop his addiction. The interest, effort and willpower of the patient are very important for the treatment of addiction, and is therefore vital to psychological well-being of the patient. In addition, the patient must overcome the force of habit, which is often higher than the force of habit that in many cases is uncontrollable desire to smoke. This is called a syndrome of abstinence (ROSA, 2006).

Some individuals when they stop smoking have physical changes - anxiety, difficulty concentrating, irritability, uncontrollable desire to smoke. This is called a syndrome of abstinence (ROSA, 2006).

The etiology of the cigarette addiction is the factor that the cigarette smoke is a mixture of approximately 4700 different toxic substances, which is in two key stages: the stage particulate and gaseous phase. The gas phase is composed among others by carbon monoxide, ammonia, ketones, formaldehyde, acetaldehyde, acrolein. The particulate phase contains nicotine and tar. The tar is a compound of more than 40 carcinogenic substances known, formed from the combustion of tobacco. Among them, arsenic, nickel, benzopyrene, cadmium, residues of pesticides, radioactive substances, such as Polonium 210, acetone, naphthalene and phosphorus until P4/P6, substances used to poison the rats. Carbon monoxide (CO) has affinity with the hemoglobin (Hb) present in red blood cell counts, which carry oxygen to all organs of the body. The binding of CO with the hemoglobin (Hb) present in red blood cell counts, which carry oxygen to all organs of the body. The binding of CO with hemoglobin from the compound called carboxyhemoglobin, which hinders the oxygenation of the blood, depriving some organs of oxygen and causing diseases such as atherosclerosis. Nicotine is considered by the World Health Organization / WHO a psychoactive drug that causes dependence. The cigarette acts in the central nervous system such as cocaine, with a difference: arrive around 9 seconds to the brain (INCA - the National Cancer Institute).

The Traditional Chinese Medicine has a holistic vision of human beings. Does the body healthy when that is in harmony, in balance. Through Auriculoacupuntura which consists of applications of semi permanent needles at specific points of the ear, you can end the anxiety to pick up a cigarette, even if only to give a shot and then throw away. The feeling after the placement of needles is sick, unwell, when there is interference to light a cigarette (ROSA, 2006).

It was observed in the Volunteer 01, willpower and determination, the want to stop smoking was very important to finally drop the habit. At the beginning of the 1st session smoked on average 10 cigarettes per day, already at the 2nd session reduced to zero remained well until the end of the 4th session. Reported much anxiety, irritability, hunger and feeling of losing something very important. The increase in hunger was one of the factors that caused more agony and anguish, and increased anxiety. By the end of the 4th session already felt good, less anxious and worried, feeling more confident, no longer dependent on addiction. There were about the addiction field.

In the Volunteer 02, it was found the confidence and determination to gradually reduce the number of cigarettes. The reduction of 8 cigarettes on average was a victory, as reported concerns about his health. There was a decrease of coughing, chest, decreased anxiety, and improved taste. Fact accept the idea was to mark a special date to stop smoking permanently, feeling more prepared and more energy to carry out the activities of day-to-day.

With the Volunteer 03, the reduction occurred gradually, from 20 cigarettes at the beginning reached an average of 2 to 3 cigarettes daily. He reported that the greatest pleasure was to light a cigarette and let fire. A positive benefit of Auriculoacupuntura to this person that was not needed to take more medication to control anxiety and control of hypertension.

Volunteers in 04 and 05, there was great willpower, a lot of motivation and awareness of the risks of smoking, but there was a large external factor that hindered the treatment. Serious family problems, crises of anxiety and irritability frequent. Even so there was a significant reduction of 50% of cigarettes smoked daily, also in the context of reducing anxiety and irritability.

One should not, however, expect that only the use of Acupuncture is possible for individuals to get rid of the addiction, external factors exert a very great influence in the habit of smoking.

DISCUSSION

The consumption of cigarettes is the most devastating preventable cause of illness and premature death in the history of mankind. The consumption of tobacco reached the proportions of a global epidemic, causing every year, deaths of 4 million people around the world, one in eight seconds. A worrying picture with severe consequences on public health, economy and environment (Margolin, 2000).

The dependence and context of abstinence from nicotine are two disorders to be considered. The fundamental feature dependence is that the individual continues to use the substance despite the deleterious effects of it. Due to the fact that 50% of smokers die from diseases related to smoking, this definition is clearly applicable to dependence on nicotine. The key symptom in abstinence is a reaction to difficulties in behavior, which is due to the cessation or reduction of intense and prolonged use of the substance. The withdrawal of nicotine will have a well defined and observable reaction in a number above 50% of smokers (Margolin, 2000).

The etiology of the cigarette addiction is the factor that the cigarette smoke is a mixture of approximately 4700 different toxic substances, which is in two key stages: the stage particulate and gaseous phase. The gas phase is composed among others by carbon monoxide, ammonia, ketones, formaldehyde, acetaldehyde, acrolein. The particulate phase contains nicotine and tar. The tar is a compound of more than 40 carcinogenic substances known, formed from the combustion of tobacco. Among them, arsenic, nickel, benzopyrene, cadmium, residues of pesticides, radioactive substances, such as Polonium 210, acetone, naphthalene and phosphorus until P4/P6, substances used to poison the rats. Carbon monoxide (CO) has affinity with the hemoglobin (Hb) present in red blood cell counts, which carry oxygen to all organs of the body. The binding of CO with hemoglobin form the compound called carboxyhemoglobin, which hinders the oxygenation of the blood, depriving some organs of oxygen and causing diseases such as atherosclerosis. Nicotine is considered by the World Health Organization / WHO a psychoactive drug that causes dependence. The nicotine acts in the central nervous system such as cocaine, with a difference: arrive around 9 seconds to the brain (INCA - the National Cancer Institute).

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Some individuals when they stop smoking have physical changes - anxiety, difficulty concentrating, irritability, uncontrollable desire to smoke. This is called a syndrome of abstinence (ROSA, 2006).

Most of these symptoms begins several hours after stopping smoking and reaches maximum intensity within 24 to 48 hours, decreasing gradually over a period of up to two weeks (ROSA, 2006).

The whole treatment is only valid when the person really wants to stop his addiction. The interest, effort and willpower of the patient are very important for the treatment of addiction, and is therefore vital to psychological well-being of the patient. In addition, the patient must overcome the force of habit, which is often higher than the force of habit that in many cases is responsible for relapse during treatment (ROSA, 2006).
FINAL CONSIDERATIONS
The objectives of the work were achieved, since the reduction of cigarettes in all volunteers was considerably good. All volunteers showed a reduction of cigarettes each day and each session. There was reported by, improvement in quality of life, increased provision in activities of daily life, decrease or absence of side effects arising from smoke and improvement in emotional (the anxiety).
It is understood that the Auriculoacupuncture, stimulated and provided relaxation and wellness, natural way of inhibiting the desire to smoke, without drugs or assault to the body. Acupuncture, however, controls the desire to smoke, but not modify the habit. For the complete success of the treatment sought to develop a proposal therapy individualized to each volunteer, with guidelines that encourage behavioral changes, breathing practices of specific exercises and physical exercises for the rehabilitation of the body and organic balance.

BIBLIOGRAPHY

ABSTRACT
SMOKING AND TREATMENT WITH ACUPUNCTURE HEADSET – CASES STUDY OF CLINICAL
Smoking is currently the subject of universal interest being considered by the World Health Organization (WHO) the leading cause of preventable death worldwide. Acupuncture therapy is a specialty recognized by the World Health Organize since 1976 that uses the Auricular Acupuncture as therapeutic resource to stimulate certain points which are located in the ear, to rebalance the body. This study aims to evaluate improvements in reducing the consumption of cigarettes in smokers as well as analyze optimization of quality of life and well being of volunteers searched. We evaluated and treated five volunteers between 35 and 54 years with chief complaint of smoking in the town of Balneário Camboriú / SC. Anamnesis was conducted with a questionnaire to detect emotional problems, primary and secondary complaints that may be involved with smoking. At the test was conducted Fagerstrom to analyze the degree of dependence on nicotine in the body. The volunteers were subjected to the application of needles semipermanent of 1.5 mm, according to the complaints and perceived changes in the questionnaire. Specific points were used to treat smoking being the Shen Men, Kidney, the sympathetic nervous system, Vice bilateral, Lung (2X), Diaphragm (in case of cough), external nose, mouth (if associated with hunger), Intestine, Liver, Anxiety 1 and 2, Liver yang 1 and 2, Tension and Heart. The reduction of cigarettes through Auriculotherapy occurred in all volunteers. The effectiveness of auricular therapy for reduction of cigarettes to smokers was 100% (all volunteers reduced the number of cigarettes daily). As for the secondary benefits of this treatment there was improvement in the respiratory system (cough, corzya, hoarseness, respiratory system), digestive (gastritis, heartburn), emotional (irritability, anxiety).
Keywords: Auriculotherapy; Smoking; Quality of Life.

RÉSUMÉ
LE TABAGISME ET LE TRAITEMENT PAR AURICULOTHÉRAPIE - ETUDE DE CAS CLINIQUE
Le tabagisme est actuellement l'objet d'un intérêt universel en cours d'examen par l'Organisation Mondiale de la Santé (OMS), la principale cause évitable de décès dans le monde. Auriculothérapie est une spécialité reconnue par l'mondiale de la santé organisé depuis 1976 les utilisations que l'auriculothérapie comme ressource thérapeutique à stimuler certains points qui sont situés dans l'oreille, pour rééquilibrer l'organisme. Cette étude vise à évaluer les améliorations dans la réduction de la consommation de cigarettes chez les fumeurs ainsi que analyser optimization de la qualité de vie et le bien-être des bénévoles recherchés. Nous avons évalué et traité cinq volontaires entre 35 et 54 ans, chef plainte du tabagisme dans la ville de Balnéário Camboriú / SC. Anamnèse a été menée avec un questionnaire pour détecter les problèmes émotionnels, primaire et secondaire que les plaintes mai être associés au tabagisme. Lors de l'essai a été effectué de Fagerström pour analyser le degré de dépendance à la nicotine dans l'organisme. Les volontaires ont été soumis à l'application de la semi-aiguilles de 1,5 mm, selon les plaintes et la perception des changements dans le questionnaire. Des points spécifiques ont été utilisés pour traiter les fumeurs en un Fagerström, des nez, les systèmes nerveux sympathique, Vice bilatéral, Lung (2X), Diaphragme (en cas de toux), des nez, la bouche (si elle est associée à la fain), l'intestin Grosso, du foie, de l'anxiété 1 et 2, du foie yang 1 et 2, la tension et le coeur. La réduction de cigarettes par l'auriculothérapie eu lieu dans tous les bénévoles. L'efficacité de la thérapie auriculaire de réduction des fumeurs de cigarettes a été de 100%, c'est-à-dire, tous les bénévoles réduit le nombre de cigarettes par jour. En ce qui concerne les avantages secondaires de ce traitement il ya eu amélioration dans le système respiratoire (toux, corzya, la raucité de la voix, système respiratoire), digestives (gastrite, brûlures d’estomac), émotionnels (irritabilité, anxiété).
Mots-clés: L'auriculothérapie; Tabagisme; Qualité de la Vie.

RESUMEN
FUMAR Y EL TRATAMIENTO CON AURICULOTERAPIA - ESTUDIO DE CASOS CLÍNICOS
Fumar es actualmente objeto de interés universal siendo examinado por la Organización Mundial de la Salud (OMS) la principal causa de muerte prevenible en todo el mundo. Terapia de acupuntura es una especialidad reconocida por la organización de Mundial de la Salud desde 1976 que utiliza el Auriculoacupuncture como recurso terapéutico para estimular ciertos puntos que se encuentran en el oído, para reequilibrar el cuerpo. Este estudio tiene como objetivo evaluar las mejoras en la reducción del consumo de cigarrillos en los fumadores, así como analizar la optimización de la calidad de vida y el bienestar de los voluntarios para realizar las búsquedas. Nosotros hemos evaluado y tratado cinco voluntarios de entre 35 y 54 años, jefe de
El consumo de tabaco en la ciudad de Balneario Camboriú / SC. Anamnésis se llevó a cabo con un cuestionario para detectar problemas emocionales, primaria y secundaria las denuncias que pudieran estar implicados con el consumo de tabaco. En el ensayo se realizó a Fagerström analizar el grado de dependencia de la nicotina en el cuerpo. Los voluntarios fueron sometidos a la aplicación de agujas semipermanentes de 1,5 mm, de acuerdo con las denuncias y la percepción de los cambios en el cuestionario. Puntos específicos fueron utilizados para tratar el tabaquismo: Shen Men, el riñón, el sistema nervioso simpático, vice bilateral, pulmón (2X), diafragma (en el caso de la tos), nariz, la boca (si está asociada con el hambre), intestino Grosso, el hígado, Ansiedad 1 y 2, el hígado yang 1 y 2, la tensión y el corazón, la reducción de los cigarrillos a través de Auriculoacupuntura se produjo en todos los voluntarios. La eficacia de la terapia auricular para la reducción de los cigarrillos a los fumadores fue del 100%, es decir, todos los voluntarios redujo el número de cigarrillos al día. En cuanto a los beneficios secundarios de este tratamiento se mejora en el sistema respiratorio (tos, rinitis, ronquera, sistema respiratorio), digestivo (gastroitis, ardor de estómago), emocionales (irritabilidad, ansiedad).

Palabras clave: Acupuntura auricular; Tabaquismo; Calidad de Vida.

RESUMO

TABAGISMO E TRATAMENTO COM ACUPUNTURA AURICULAR - ESTUDO DE CASOS CLÍNICOS

O tabagismo é, atualmente, assunto de interesse universal sendo considerado pela Organização Mundial da Saúde (OMS) a principal causa de morte evitável em todo o mundo. A Acupuntura é uma especialidade terapêutica reconhecida pela Organizarão Mundial da Saúde desde 1976 que usa a Auriculoacupuntura como recurso terapêutico para estimular determinados pontos que se localizam no pavilhão auricular, para reequilibrar o organismo. Este trabalho destina-se a avaliar melhoras na redução do consumo de cigarros em tabagistas, bem como analisar otimização da qualidade de vida e bem estar dos voluntários pesquisados. Foram avaliados e tratados cinco voluntários entre 35 e 54 anos com queixa principal de tabagismo na cidade de Balneário Camboriú/SC. Foi realizada anamnese com um questionário a fim de detectar problemas emocionais, queixas primárias e secundárias que possam estar envolvidas com o tabagismo. Concomitantemente fora realizado o Teste de Fagerström para analisar o grau de dependência da nicotina no organismo. Os voluntários foram submetidos à aplicação de agulhas semipermanentes de 1,5 mm, conforme as queixas e alterações percebidas no questionário. Foram usados pontos específicos para tratar o tabagismo sendo eles o Shen Men, Rín, Sistema Nervoso Simpático, Vício bilateral, Pulmão (2X), Diafragma e Tosse (em caso de tosse), Nariz externo, Boca (se associado à fome), Intestino Grosso, Fígado, Ansiedade 1 e 2, Fígado yang 1 e 2, Tensão e Coração. A redução de cigarros através da Auriculoacupuntura ocorreu em todos os voluntários. A eficácia da terapia auricular para redução de cigarros de tabagistas foi de 100%, ou seja, todos os voluntários reduziram o número de cigarros diariamente. Quanto aos benefícios secundários desse tratamento houve melhora no sistema respiratório (tosse, coriza, pigarro, sistema respiratório), digestivo (gastroitis, azia), emocional (irritabilidade, ansiedade).

Palavras-chave: Acupuntura Auricular; Tabagismo; Qualidade de Vida.