From:	"Stan Shatenstein" <shatensteins@sympatico.ca></shatensteins@sympatico.ca>
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Date:	5.7.2012 12:55:56
Subject:	STAN Bulletin: 12th Edition: 5-July-2012

Smoking & Tobacco Abstracts & News STAN Bulletin 12th Edition 5-July-2012

Editor's note: I have experienced difficulties with my Sympatico e-mail account over the past 24 hours. I believe the problem has been resolved, but if you requested any PDFs, or communicated with me recently for any other reason and did not receive a reply, please re-send your message.

Stan Shatenstein

In the News:

- Canada: Ottawa: Outdoor ban in force; Beach smoking defiance; Smoke rings & loopholes [Audio: CBC]
 - ESHRE: Smoking Increases The Risk Of Ectopic Pregnancy; PR: Abstract: BAD for Fallopian Tubes
- ESHRE: Smoking mothers' embryos experience developmental delay
 - EU: Moody's Investors Service upbeat on tobacco for next 12-18 months
- India: GATS: Tobacco products consume one-third of monthly incomes
- India: Uttar Pradesh: <u>Government raises VAT on cigarettes to 50%, ITC shares tumble</u>
- Indonesia: <u>Tobacco Farmers Protest Anti-Smoking Regulation Mandating Graphic Warnings</u>
- Ireland: <u>Tobacco firms are targeting women, lung cancer crisis</u>
- NZ: Corrections Minister: Prison smoking ban drastically reduces fires & dangerous activities
 - Pakistan: FCTC: Country signs convention on tobacco control, farmers express fears for livelihood
 - Spain: Madrid/Barcelona: Eurovegas casino: Health Minister declares smoking ban will not be lifted
 - UK: Imperial Tobacco gains on hopes of profit boost from new cigarette price rise
 - UK: The Independent: Opinion: Why we need to protect children from second-hand smoke
 - US: <u>RYO: Roll-Your-Own Shops May Have to Close Due to Federal Excise Tax Changes [Audio:</u> <u>Marketplace]</u>
 - US: NY: CLASH: Smokers' rights group sues to remove no-smoking signs at parks
 - US: <u>Cigarettes Made from Tobacco with Less Nicotine May Help Smokers Quit [CEB&P: Benowitz]</u>

In this Edition:

- Am J Chin Med Cheng: Acupoint Stimulation Effects on Cessation: Systematic Review & Meta-Analysis
- AJPH Pesko: US: Cigarette Price Minimization Strategies; Nelson: Work-Family Conflict & Smoking
- Ann Agric Environ Med Zatonski: EU: Tobacco smoking in countries of the European Union
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- Clin Exp Optom Brûlé: Canada: Quebec: Smoking cessation counselling practices among optometrists
- Dose Response Cox: PMI: CHD: Low-dose nonlinear effects of smoking on coronary heart disease risk
- Eur J Clin Nutr Poisson: France/UK: NI: Fruit & vegetable intake & smoking cessation
- Eur Urol Rink: UTOC: Smoking & Upper Tract Urothelial Carcinoma Post-Radical Nephroureterectomy Outcomes

- HER Procter-Scherdtel: Canada: Social norms & smoking bans on campus
- Int J Geriatr Psych Suemoto: Brazil: Depression & CV risk factors: large postmortem sample evidence
- Iran Red Cresc Med J Mansouri: Iran: Kish: Familial aggregation of cigarette smoking
- Int J Cancer Bray: Global estimates of cancer prevalence for 27 sites in the adult population, 2008
- J Addict Res Ther Berg: US: College Student Hookah Use: Psychosocial Factors & Health-Risk Behaviors
- J Anesth lida: Varenicline: Preventive effect on acute smoking-induced cerebral vessel endothelial function impairment
- J Dual Diagn George: Smoking Cessation in Bipolar Disorder: Implications for Future Research
- JMIR van Mierlo: Canada: CCS: Superusers in Cessation Social Networks: Demographics & Posting Behavior
- Korean J Fam Med Cho: Changes in skin color after smoking cessation; Kim: Seoul: SES, Initiation & Women
- Oral Oncol Tribius: Germany: HPV, smoking & outcome in head & neck carcinoma of unknown primary site
- Orphanet J Rare Dis Suri/Intern Med Tamaki: PLCH: Pulmonary langerhans cell histiocytosis: Too sick to smoke
- PLoS Med Stuckler: Manufacturing epidemics: Global producers' role in increased unhealthy commodity consumption
- PLoS One Aldrich: US: African Americans: Genetic Ancestry-Smoking Interactions & Lung Function: Cohort Study
- Resp Physiol Neurobiol Stéphan-Blanchard: Perinatal nicotine/smoking exposure & carotid chemoreceptors
- Rev Esp Cardiol Cordero: Spain: ACS: Smoking & Cardiologists' Attitude & Efficacy After Acute Coronary Syndromes
- Soc Sci Med Rochel de Camargo: Identifying science being bent: TI fight to deny SHS health hazards
- Tob Control Thrasher: Mexico: Linking mass media campaigns to pictorial cigarette pack warning labels
- Tob Induc Dis Kruger: US: DocStyles: Physician advice on avoiding SHS exposure & cessation service referrals
- Vasc Health Risk Manage Abunassar: Canada: Smoking status & sex in weight management for obesity

Abstracts:

Systematic Review and Meta-Analysis of the Effects of Acupoint Stimulation on Smoking Cessation

Am J Chin Med. 2012 2012;40(3):429-442.

Cheng HM, Chung YC, Chen HH, Chang YH, Yeh ML.

Abstract

Smoking represents a serious worldwide public health problem because of its close association with the development of chronic disease and cancer. Acupoint stimulation has been used as treatment mode for smoking cessation but its efficacy remains controversial. This systematic review and meta-analysis aimed to determine the effects of acupoint stimulation on smoking cessation rate and daily cigarette consumption. Electronic literature searches in eight electronic databases up to March 2011 were performed to identify acupoint stimulation for smoking cessation. The outcomes assessed were smoking cessation rate and cigarette consumption. We assessed abstinence from smoking at the earliest and last measured time points, and at the 3- and 6-month follow-ups. Meta-analysis was performed using CMA software. A total of 20 RCTs were included in the meta-analysis. A significant effect of acupoint stimulation was found in smoking cessation rates and cigarette consumption at immediate, 3- and 6-month follow-ups, with effect sizes 1.24 (95%Cl = 1.07 ~ 1.43, p = 0.003), -2.49 (95%Cl = -4.65 ~ -0.34, p = 0.02), 1.70 (95%Cl = 1.17 ~ 2.46, p = 0.01), and 1.79 (95%Cl = 1.13 ~ 2.82, p = 0.01), respectively. Multi-modality treatments, especially acupuncture combined with smoking cessation or other interventions, can help smokers to eschew smoking during treatment, and to avoid relapse after treatment.

http://www.worldscinet.com/ajcm/40/4003/S0192415X12500334.html

Cigarette Price Minimization Strategies Used by Adults

Am J Public Health. 2012 Jun 28. [Epub ahead of print]

Pesko MF, Kruger J, Hyland A.

Abstract

We used multivariate logistic regressions to analyze data from the 2006 to 2007 Tobacco Use Supplement of the Current Population Survey, a nationally representative sample of adults. We explored use of cigarette price minimization strategies, such as purchasing cartons of cigarettes, purchasing in states with lower after-tax cigarette prices, and

purchasing on the Internet. Racial/ethnic minorities and persons with low socioeconomic status used these strategies less frequently at last purchase than did White and high-socioeconomic-status respondents.

http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300861

Also:

Assessing the Relationship Between Work–Family Conflict and Smoking http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2011.300413

Tobacco smoking in countries of the European Union

Ann Agric Environ Med. 2012 Jun 27;19(2):181-92.

Zatoński W, Przewoźniak K, Sulkowska U, West R, Wojtyła A.

Abstract

Background: Existing smoking prevalence comparisons between the 'old' and 'new' members of the European Union (EU) give a misleading picture because of differences in methodology. A major EU project designed to find ways of closing the health gap between the member states, included the first ever comparison of smoking prevalence between these countries using a methodology that minimises potential biases. Methods: A detailed analysis of methods and data from the most recent nationwide studies was conducted in the adult population of 27 countries of the European Union and Russia as an external comparator. To maximise comparability, daily smoking in the age range 20-64 was used. Prevalence of current daily smoking, former smoking and never smoking were age-standardised and calculated separately for males and females. Findings: The European map of smoking prevalence shows that male smoking prevalence is much higher in the new than the old members of the EU, whereas in females the reverse is true, but there are also very large differences in smoking rates between particular countries within the same region. Sweden clearly has the lowest prevalence, and the prevalence in the United Kingdom (UK) at the time of the surveys emerges as near the average for old-Europe but higher than, for example, Ireland. Interpretation: Restricting the analysis to daily smokers aged 20-64 produces a map of Europe in which variation in prevalence between individual countries within regions is as important as variation across regions. Survey methods need to be harmonised across countries to enable comparisons involving all ages and non-daily as well as daily smokers.

http://aaem.pl/abstracted.php?level=5&ICID=1002007

Note: Open Access. Full text PDF freely available from link immediately above.

Neural Expression of Nicotine's Antidepressant Properties during Tryptophan Depletion: An EEG Study in Healthy Volunteers at Risk for Depression

Biol Psychol. 2012 Jun 25. [Epub ahead of print]

Knott V, Thompson A, Shah D, Ilivitsky V.

Abstract

Nicotine amelioration of serotonergically mediated mood dysregulation may contribute to the comorbidity between cigarette smoking and depression, a disorder which is associated with aberrant activation and hemispheric asymmetry in frontal and posterior cortical regions. This randomized, double-blind study in 20 healthy volunteers with a positive family history of depression examined the effects of transdermal nicotine on mood and EEG changes accompanying transient reductions in serotonin induced by acute tryptophan depletion (ATD). Increased self-ratings of depressed mood and elevation in left frontal high alpha power (decreased activation) were evidenced with ATD (vs. balanced mixture) in participants treated with the placebo but not the nicotine treated group. Nicotine alone increased vigor and posterior high alpha bilaterally, and during ATD it prevented the reduction in left frontal high alpha that was evident in the placebo patch group. These findings indicate that in depression prone individuals, nicotine acts to stabilize the mood lowering and associated frontal functional asymmetry elicited by an acute decrease in brain serotonin.

http://www.sciencedirect.com/science/article/pii/S0301051112001342

The impact of intrauterine tobacco exposure on the cerebral mass of the neonate based on the measurement of head circumference

Brain Behav. 2012 May;2(3):243-8.

Król M, Florek E, Piekoszewski W, Bokiniec R, Kornacka MK.

Abstract

The objective of the study was to assess cerebral mass, based on head circumference measurements in neonates exposed to tobacco smoke in utero, and to determine the relative proportions of the cerebral and body mass. The study included 147 neonates born in the period 2003-2004 at the Princess Anna Mazowiecka University Hospital and admitted to the Neonatal and Intensive Care Department of the Medical University in Warsaw. Subjects were divided into three groups on the basis of maternal status as active, passive, or nonsmokers determined by maternal urinary cotinine concentration and a questionnaire. Neonates whose mothers were active smokers throughout the whole period of pregnancy had a lower head circumference and in consequence a lower cerebral mass significantly more frequently when compared with those whose mothers were nonsmokers, P= 0.002. (Median difference in cerebral mass was 48.27 g.) The risk of lower cerebral mass was 3.9 (1.4-10.8, CI 95%) in the group of neonates whose mothers actively smoked cigarettes during pregnancy. A negative correlation was seen between cerebral mass and maternal urinary cotinine concentration (correlation coefficient r=-23, P= 0.006). The ratio of the cerebral to body mass of the neonate, however no such effect was observed in neonates whose mothers were passive smokers. The deficiency in cerebral mass increased with greater smoking intensity. Active smoking by the mother during pregnancy inhibits the growth of the brain as well as that of the body mass of the neonate.

http://onlinelibrary.wiley.com/doi/10.1002/brb3.49/abstract http://onlinelibrary.wiley.com/doi/10.1002/brb3.49/pdf

Note: Open Access. Full text PDF freely available from link immediately above.

Smoking cessation therapy during pregnancy

Canadian Family Physician May 2012 vol. 58 no. 5 525-527

Alex M. Cressman, Anna Pupco, Eunji Kim, Gideon Koren and Pina Bozzo

Abstract

Question Despite being highly motivated to quit, many of my patients struggle with smoking cessation during pregnancy. Can you comment on the current treatment options and discuss their safety and efficacy during pregnancy?

Answer Given the considerable and well-documented adverse effects of antenatal smoking on mother and fetus, pharmacotherapy for smoking cessation should be considered. Available medications include nicotine replacement therapy, sustained-release bupropion, and varenicline. Nicotine replacement therapy and bupropion do not appear to increase the risk of major malformations; however, there is currently limited evidence on the use of varenicline during pregnancy. Given that these agents are only marginally successful in smoking cessation, their use should always be accompanied by behavioural counseling and education to maximize quit rates.

Conclusion

Behavioural therapy and patient education should be recommended as first-line therapy for smoking cessation. In the event that patients fail to stop smoking or do not respond to behavioural therapy, NRT or bupropion can be offered after an informed discussion of the benefits and risks of therapy.

http://www.cfp.ca/content/58/5/525.abstract http://www.cfp.ca/content/58/5/525.full.pdf+html

Note: Open Access. Full text PDF freely available from link immediately above.

Smoking cessation counselling practices among Québec optometrists: evaluating beliefs, practices, barriers

and needs

Clin Exp Optom. 2012 Jun 19. doi: 10.1111/j.1444-0938.2012.00748.x. [Epub ahead of print]

Brûlé J, Abboud C, Deschambault E.

Abstract

Background: Despite the fact that cigarette smoking is a well known risk factor for many ocular diseases, very little data exist regarding optometrists' interventions in smoking cessation counselling with their patients. The aim of this study was to evaluate the practices, perceptions and educational needs of Québec optometrists regarding smoking cessation counselling. Methods: A self-administered questionnaire pertaining to smoking cessation counselling practices was mailed to 600 optometrists licensed in Québec. Results: The response rate was 51 per cent. The majority (90 per cent) of respondents (n = 288) reported having the required knowledge of ocular diseases related to smoking. Most respondents recognised that optometrists should ask their patients if they smoke (73 per cent), should advise their smoking patients to stop smoking (65 per cent) and should be cognisant of the resources available that can support patients in their efforts to guit smoking (65 per cent). Few responders asked their patients on a regular basis if they indeed smoked (16 per cent) or advised them to stop, if such was the case (29 per cent). Moreover, only eight per cent of respondents knew the resources toward which they should direct their patients who wish to stop smoking. Only eight per cent of respondents perceived themselves as being competent to offer counselling. For 72 per cent of the respondents, the main obstacle to smoking cessation counselling was the lack of knowledge about counselling. Approximately half (48 per cent) of respondents are interested in acquiring competencies in smoking cessation counselling. Conclusion: Based on the results of the present study, optometrists in Québec are well aware of the effects of smoking on ocular health and the importance of educating their patients; however, they might not possess the required skills to assist their patients in guitting smoking. Because they have not received sufficient training, optometrists in Québec remain an untapped resource in tobacco cessation counselling.

http://onlinelibrary.wiley.com/doi/10.1111/j.1444-0938.2012.00748.x/abstract

Low-dose nonlinear effects of smoking on coronary heart disease risk

Dose Response. 2012;10(2):219-32. Epub 2011 Oct 14.

Cox LA Jr.

Abstract

Some recent discussions of adverse human health effects of active and passive smoking have suggested that low levels of exposure are disproportionately dangerous, so that "The effects of even brief (minutes to hours) passive smoking are often nearly as large (averaging 80% to 90%) as chronic active smoking" (Barnoya and Glantz, 2005). Recent epidemiological evidence (Teo et al., 2006) suggests a more linear relation. This paper reexamines the empirical relation between self-reported low levels of active smoking and risk of coronary heart disease (CHD) in public-domain data from the National Health and Nutrition Examination Survey (NHANES). Consistent with biological evidence on J-shaped and U-shaped relations between smoking-associated risk factors and CHD risks, we find that low levels of active smoking do not appear to be associated with increased CHD risk. Several methodological challenges in epidemiology may explain how model-derived estimates can predict low-dose linear or concave dose-response estimates, even if the empirical (i.e., data-based) relation does not show a clear increased risk at the lowest doses.

ACKNOWLEDGEMENT

The work reported was supported in part by Philip Morris International (PMI). The opinions, data examined, and research questions addressed (especially, whether the hypothesis of hormesis is inconsistent with NHANES data) are solely the author's, who also retained the right to publish all findings without review by PMI.

http://dose-response.metapress.com/app/home/contribution.asp?referrer=parent&backto=searcharticlesresults,6,9; http://dose-response.metapress.com/media/56we0cgmep6jym8e4nr2/contributions/2/2/3/5/22355u432361455t.pdf

Note: Open Access, tobacco-industry funded research. Full text PDF freely available from link immediately above.

Fruit and vegetable intake and smoking cessation

Eur J Clin Nutr. 2012 Jun 27. doi: 10.1038/ejcn.2012.70. [Epub ahead of print]

Poisson T, Dallongeville J, Evans A, Ducimetierre P, Amouyel P, Yarnell J, Bingham A, Kee F, Dauchet L.

Abstract

Background/Objectives:In cohort studies, fruit and vegetable (F&V) intake is associated with lower cardiovascular diseases (CVDs). Former smokers often have a higher F&V intake than current smokers. If a high intake of F&V precedes smoking cessation, the latter may explain the favorable association between F&V intake and CVD among smokers. The objective was to assess whether higher F&V intake precedes smoking cessation.Subjects/Methods:The study population comprised 1056 male smokers from Lille (France) and Belfast (Northern Ireland) aged 50-59 years on inclusion in 1991. At baseline, participants completed self-administered questionnaires related to smoking habits, demographic, socioeconomic factors and diet. At the 10-year follow-up, smoking habits were assessed by mailed questionnaire.Results:After 10 years, 590 out of 1056 smokers had quit smoking (70.7% of smoker in Lille and 37.8% in Belfast). After adjusting for center, consumption of F&V was associated with quitting (odds ratio (OR) for high versus low F&V intake: 1.73; 95% confidence interval (CI): (1.22-2.45); P-trend=0.002). After further adjustment for sociodemographic factors, body mass index and medical diet, the association was still statistically significant (OR: 1.59; 95% CI (1.12-2.27); P-trend=0.01). In a model fully adjusted for age, smoking intensity, alcohol consumption and physical activity, the association was no longer significant (P=0.14).Conclusions:Higher F&V intake precedes smoking cessation. Hence, smoking cessation could affect the causal interpretation of the association between F&V and CVD in smokers.

http://www.nature.com/ejcn/journal/vaop/ncurrent/full/ejcn201270a.html

Impact of Smoking on Oncologic Outcomes of Upper Tract Urothelial Carcinoma After Radical Nephroureterectomy

Eur Urol. 2012 Jun 22. [Epub ahead of print]

Rink M, Xylinas E, Margulis V, Cha EK, Ehdaie B, Raman JD, Chun FK, Matsumoto K, Lotan Y, Furberg H, Babjuk M, Pycha A, Wood CG, Karakiewicz PI, Fisch M, Scherr DS, Shariat SF; for the Upper Tract Urothelial Carcinoma Collaboration.

Abstract

BACKGROUND:

Cigarette smoking is a common risk factor for developing upper tract urothelial carcinoma (UTUC).

OBJECTIVE:

To assess the impact of cigarette smoking status, cumulative smoking exposure, and time from cessation on oncologic UTUC outcomes in patients treated with radical nephroureterectomy (RNU).

DESIGN, SETTING, AND PARTICIPANTS:

A total of 864 patients underwent RNU at five institutions. The median follow-up in this retrospective study was 50 mo. Smoking history included smoking status, quantity of cigarettes per day (CPD), duration in years, and years from smoking cessation. The cumulative smoking exposure was categorized as light-short-term (≤19 CPD and ≤19.9 yr), moderate (all combinations except light-short-term and heavy-long-term), and heavy-long-term (≥20 CPD and ≥20 yr).

INTERVENTIONS:

RNU with or without lymph node dissection. No patient received neoadjuvant chemotherapy.

OUTCOME MEASUREMENTS AND STATISTICAL ANALYSIS:

Univariable and multivariable logistic regression and competing risk regression analyses assessed the effects of smoking on oncologic outcomes.

RESULTS AND LIMITATIONS:

A total of 244 patients (28.2%) never smoked; 297 (34.4%) and 323 (37.4%) were former and current smokers, respectively. Among smokers, 87 (10.1%), 331 (38.3%), and 202 (23.4%) were light-short-term, moderate, and heavy-long-term smokers, respectively. Current smoking status, smoking \geq 20 CPD, \geq 20 yr, and heavy-long-term smoking were associated with advanced disease (p values \leq 0.004), greater likelihood of disease recurrence (p values \leq 0.01), and cancer-specific mortality (p values \leq 0.05) on multivariable analyses that adjusted for standard features. Patients who quit smoking \geq 10 yr prior to RNU did not differ from never smokers regarding advanced tumor stages, disease recurrence, and cancer-specific mortality, but they had better oncologic outcomes then current smokers and those patients who quit smoking <10 yr prior to RNU. The study is limited by its retrospective nature.

CONCLUSIONS:

Cigarette smoking is significantly associated with advanced disease stages, disease recurrence, and cancer-specific mortality in patients treated with RNU for UTUC. Current smokers and those with a heavy and long-term smoking exposure have the highest risk for poor oncologic outcomes. Smoking cessation >10 yr prior to RNU seems to mitigate some detrimental effects. These results underscore the need for smoking cessation and prevention programs.

http://www.sciencedirect.com/science/article/pii/S0302283812007300

Social norms and smoking bans on campus: interactions in the Canadian university context

Health Educ Res. 2012 Jun 20. [Epub ahead of print]

Procter-Scherdtel A, Collins D.

Abstract

Smoking bans offer practical protection against environmental tobacco smoke and highlight the decreasing normative status of smoking. At Canadian universities, indoor smoking is now completely prohibited, but regulations vary with respect to outdoor smoking. The purpose of this research was to conceptualize the interactions of smoking bans on campus with changing social norms around smoking. Interviews were conducted with 36 key informants, exploring the development and normative significance of smoking bans at three case study institutions. Five key themes were identified in the transcripts. First, universities were understood as community leaders and role models. Second, they were viewed as institutions with a mandate to promote health. Third, students were generally perceived to view smoke-free environments and lifestyles as normative. Fourth, respondents also acknowledged that students remain vulnerable to social and behavioural influences that can encourage smoking. Finally, they articulated bans' normative effects: restricting where smoking occurs on campus may discourage initiation and support cessation. Our findings suggest that health-promoting policies, such as smoking bans, can be motivated by changes in social norms and that their implementation reinforces this norm shift. Moreover, the contextual and compositional characteristics of universities mean they are uniquely placed to adopt such initiatives.

http://her.oxfordjournals.org/content/early/2012/06/20/her.cys075.abstract

Depression and cardiovascular risk factors: evidence from a large postmortem sample

Int J Geriatr Psychiatry. 2012 Jun 29. doi: 10.1002/gps.3850. [Epub ahead of print]

Suemoto CK, Damico MV, Ferretti RE, Grinberg LT, Farfel JM, Leite RE, Nitrini R, Lafer B, Jacob-Filho W, Pasqualucci CA; Brazilian Aging Brain Study Group.

Abstract

OBJECTIVES:

We aimed to investigate the association of depression with cardiovascular risk factors and diseases (CVRFD) in a large population-based sample.

METHODS:

12.11.2012

This cross-sectional study included 1012 deceased individuals greater than 50 years of age from a general autopsy service located in São Paulo, Brazil. Demographics, socioeconomic profile, and CVRFD information were collected by caregivers from the deceased individuals from the Brazin Bank of the Brazilian Aging Brain Study Group. Depression diagnosed using the Structured Clinical Interview for Diagnostic and Statistical Mental Disorders was the main outcome.

RESULTS:

Depression was associated with female gender (odds ratio (OR) = 1.86; 95% confidence interval (CI) = 1.28-2.71, p = 0.001), widowhood (OR = 1.54; 95% CI = 1.03-2.32, p = 0.04), physical inactivity (OR = 1.61; 95% CI = 1.15-2.26, p = 0.006), and smoking (OR = 2.03; 95% CI = 1.40-2.95, p < 0.001) after multivariate logistic regression analysis. Other CVRFD were not associated with the presence of depression.

CONCLUSIONS:

In our cross-sectional study, sedentary individuals and smokers showed a higher chance of depression during lifetime. Measures to control these common risk factors could decrease the incidence of depression.

...A higher prevalence of depression among smokers has also been described previously (Almeida *et al.*, 2007; Korhonen *et al.*, 2011). Smoking was related to the presence of late-life depression, sleep disturbances, sexual dysfunction, and increases in fatigue. A causal relationship between symptoms of nicotine dependence and depression was suggested by a prospective study (Boden *et al.*, 2010). It has been proposed that smoking causes changes in neurotransmitter levels in the brain, leading to an increased risk of depression (Haustein *et al.*, 2002). Similar to physical inactivity, the causal relationship between smoking and depression could not be inferred in our study...

http://onlinelibrary.wiley.com/doi/10.1002/gps.3850/abstract

The familial aggregation of cigarette smoking in Kish, Iran

Iran Red Crescent Med J. 2012 Mar;14(3):158-63. Epub 2012 Mar 1.

Mansouri A, Alvandi I, Mohammad K, Zeraati H, Fotouhi A.

Abstract

BACKGROUND:

Based on WHO reports, smoking is an epidemic in developing countries. One of important issues about this behavior is its distribution pattern in family members. The main purpose of this study was to evaluate if cigarette smoking had a tendency to cluster or aggregate in the families and what the determinants were.

METHODS:

Using a multi-stage random cluster sampling approach, a household survey was conducted in Kish Island in 2009. We used the Alternating Logistic Regressions algorithm to model to show the familial aggregation.

RESULTS:

The odds ratio for the aggregation of cigarette smoking between family members was 1.63 (1.29-2.06) which increased to 1.96 (1.50-2.55) after adjustment for demographic factors. There was no significant correlation between siblings' cigarette smoking nor was between spouses but the pairwise odds ratio for parents offspring was significant. In other words, cigarette smoking in at least one of the parents increased the odds of being a smoker in offspring significantly.

CONCLUSION:

The study showed that the smoking behavior aggregated in families significantly. The inter-parent offspring aggregation was the main component of the familial aggregation. Higher education and age-gender interaction were determinants of smoking in the families. The programs for prevention and cessation of this behavior in the community might be more successful if they were designed in a family-based rather than an individual-based approach.

Socioeconomic disparities and smoking habits in metabolic syndrome: evidence from Isfahan healthy heart program http://ircmj.com/?page=article&article.id=2038

Note: Open Access. Full text PDFs freely available from links immediately above.

Global estimates of cancer prevalence for 27 sites in the adult population in 2008

International Journal of Cancer

Accepted Article (Accepted, unedited articles published online for future issues) Accepted manuscript online: 3 JUL 2012

Freddie Bray, Jian-Song Ren, Eric Masuyer and Jacques Ferlay

Abstract

Recent estimates of global incidence and survival were utilised to update previous figures of limited duration prevalence to the year 2008. The number of cancer patients diagnosed between 2004 and 2008 who were still alive at the end of 2008 in the adult population are described by world region, country and the human development index. The 5-year global cancer prevalence is estimated to be 28.8 million in 2008. Close to half of the prevalence burden is in areas of very high human development that comprise only one-sixth of the world's population. Breast cancer continues to be the most prevalent cancer in the vast majority of countries globally, with cervix cancer the most prevalent cancer in much of Sub-Saharan Africa and Southern Asia, while prostate cancer dominates in North America, Oceania, and Northern and Western Europe. Stomach cancer is the most prevalent cancer in Eastern Asia (including China), oral cancer ranks as most prevalent in Indian men, while Kaposi sarcoma has the highest 5-year prevalence among men in 11 countries in Sub-Saharan Africa. The methods used to estimate point prevalence appears to give reasonable results at the global level. The figures highlight the need for longer-term care targeted at managing patients with certain very frequently-diagnosed cancer forms. To be of greater relevance to cancer planning, the estimation of other time-based measures of global prevalence is warranted.

http://onlinelibrary.wiley.com/doi/10.1002/ijc.27711/abstract

Psychosocial Factors and Health-Risk Behaviors Associated with Hookah use among College Students

J Addict Res Ther S2:001. doi:10.4172/2155-6105.S2-001

Carla J. Berg, Gillian L. Schauer, Omar A. Asfour, Akilah N. Thomas and Jasjit S. Ahluwalia

Abstract

Introduction: Prevalence of hookah or waterpipe smoking is increasing in the United States, particularly among collegeaged students. Little research has examined the relationship between hookah smoking, other risk-seeking behaviors, and specific personality factors. The current study aims to address this gap in the literature. **Methods:** A random sample of 10,000 students at two southeastern state universities were recruited to complete an online survey containing 230 questions assessing sociodemographics, other substance use, and psychosocial factors. Of students invited to participate, 2,206 (22.1%) returned a completed survey **Results:** Past 30-day hookah use was found among 6.8% (n=141) of the sample. Binary logistic regression indicated that, after controlling for age, ethnicity, and highest parental education, hookah use was associated with being male (p<.001), being a nondaily or daily smoker versus a nonsmoker (p<.001), more frequent alcohol consumption (p<.001), greater sensation seeking (p<.001), lower levels of conscientiousness (p<.001), and greater openness to experiences (p=.01). **Conclusions:** Understanding the psychological and personality profiles of hookah users may allow public health practitioners and health care providers to identify high-risk individuals and design targeted interventions addressing users and those at risk for use.

http://www.omicsonline.org/2155-6105/2155-6105-S2-001.php?aid=2236 http://www.omicsonline.org/2155-6105/2155-6105-S2-001.pdf

Related J Addict Res Ther Editorial:

The Waterpipe; a New Way of Hooking Youth on Tobacco http://www.omicsonline.org/2155-6105/2155-6105-S2-e001.php?aid=6169

http://www.omicsonline.org/2155-6105/2155-6105-S2-e001.pdf

Also:

Diurnal Evening Type is Associated with Current Smoking, Nicotine Dependence and Nicotine Intake in the Population Based National FINRISK 2007 Study http://www.omicsonline.org/2155-6105/2155-6105-S2-002.php?aid=4149 http://www.omicsonline.org/2155-6105/2155-6105-S2-002.pdf Functional Brain Imaging of Tobacco Exposure in Humans http://www.omicsonline.org/2155-6105/2155-6105-S2-003.php?aid=4129 http://www.omicsonline.org/2155-6105/2155-6105-S2-003.pdf Oral Nicotine Self-Administration in Rodents http://www.omicsonline.org/2155-6105/2155-6105-S2-004.php?aid=6335 http://www.omicsonline.org/2155-6105/2155-6105-S2-004.pdf Magnesium and Zinc Involvement in Tobacco Addiction http://www.omicsonline.org/2155-6105/2155-6105-S2-005.php?aid=6610 http://www.omicsonline.org/2155-6105/2155-6105-S2-005.php?aid=6610 http://www.omicsonline.org/2155-6105/2155-6105-S2-005.pdf The Cigarette-Carrying Habit of Occasional Smokers http://www.omicsonline.org/2155-6105/2155-6105-S2-006.php?aid=6430

http://www.omicsonline.org/2155-6105/2155-6105-S2-006.pdf

Note: Open Access. Full text PDFs freely available from links immediately above.

Preventive effect of varenicline on impairment of endothelial function in cerebral vessels induced by acute smoking in rats

J Anesth. 2012 Jun 29. [Epub ahead of print]

lida M, lida H, Takenaka M, Tanabe K, Iwata K.

Abstract

Preoperative smoking cessation is important for recovery from surgery without complications. Available evidence suggests nicotine replacement therapy could be safe and effective in the perioperative period. On the other hand, the newly developed selective nicotinic acetylcholine (ACh) receptor partial agonist, varenicline tartrate, is also effective as an aid for smoking cessation and helps people to stop smoking. During the transitional phase between the decision to stop smoking and actual smoking cessation, patients could use varenicline before undertaking smoking cessation. We have previously reported that acute cigarette smoking can cause impairment of endothelium-dependent vasodilation in cerebral vessels; thus, the use of varenicline before surgery in a patient who is still a smoker may not be safe with regard to endothelial function. Therefore, to assess the safety of varenicline in terms of endothelial function, we evaluated its effect on the acute smoking-induced impairment of endothelium-dependent cerebral vasodilation. In anesthetized Sprague-Dawley rats, we applied ACh topically to pial vessels; then, after administering intravenous varenicline or saline injection, we reexamined the ACh-induced vasodilator response both before and after smoking. Under control conditions, cerebral pial arterioles were dose-relatedly dilated by ACh. After smoking, 10(-5) M ACh constricted the arterioles following saline pretreatment (diameter -7.6 ± 1.8 %, n = 6), but induced dilation following varenicline pretreatment (diameter $+15.3 \pm 3.3$ %, n = 6). Thus, varenicline may prevent the smoking-induced impairment of endothelium-dependent vasodilation in cerebral pial arterioles.

http://www.springerlink.com/content/5m61107106010756/

A Review of Smoking Cessation in Bipolar Disorder: Implications for Future Research

Journal of Dual Diagnosis <u>Volume 8</u>, <u>Issue 2</u>, 2012 Special Issue: Innovative Interventions for Treating Tobacco Addiction Among Persons With Co-occurring Mental Illness and Addiction: New Approaches to Improve Outcomes

Tony P. George, Becky S. Wu & Andrea H. Weinberger

Abstract

Tobacco smoking is common in people with bipolar disorder, and rates of smoking cessation are lower than in the general population. A literature review found 11 clinical research publications on bipolar disorder and tobacco, including only one smoking cessation pharmacotherapy trial. This article will review these findings and discuss possible reasons for the high rates of tobacco addiction among persons with bipolar disorder, as well as specific vulnerability factors that may contribute to tobacco treatment failure. An approach to the clinical assessment and treatment of tobacco dependence is described for this subgroup of smokers. Finally, recommendations are made for planning future treatment studies in persons with bipolar disorder.

http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.671717 Also:

Innovative Interventions for Treating Tobacco Addiction Among Persons With Co-occurring Mental Illness and Addiction: New Approaches to Improve Outcomes

http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.672159

Acceptance and Mindfulness-Based Tobacco Cessation Interventions for Individuals With Mental Health Disorders http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.670846

Shared Decision Making and Behavioral Support Interventions for People With Severe Mental Illness and Tobacco Dependence

http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.671093

Peer Supports for Tobacco Cessation for Adults With Serious Mental Illness: A Review of the Literature http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.670847

Varenicline Should Be Used as a First-Line Treatment to Help Smokers With Mental Illness Quit <u>http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.670848</u>

Varenicline for Smoking Cessation in Schizophrenia: Safety and Effectiveness in a 12-Week Open-Label Trial http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.663675

A Preliminary Feasibility Study of Varenicline for Smoking Cessation in Bipolar Disorder

http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.671067

Smoking and Co-occurring Disorders: Implications for Smoking Cessation Interventions for Adolescents in Residential Addiction Treatment

http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.666152

Implementing Tobacco Education and Cessation Services at a Large Community Mental Health Center: Lessons Learned http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.670897

Addressing Tobacco Through Organizational Change in a Hospital-Based Mental Health Center in China: The Intervention and Lessons Learned in a Pilot Implementation Project

http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.672116

Using a Multidisciplinary Approach for Pregnant Women With Nicotine Dependence and Co-occurring Disorders http://www.tandfonline.com/doi/abs/10.1080/15504263.2012.671119

Superusers in Social Networks for Smoking Cessation: Analysis of Demographic Characteristics and Posting Behavior From the Canadian Cancer Society's Smokers' Helpline Online and StopSmokingCenter.net

J Med Internet Res. 2012 Jun 26;14(3):e66.

van Mierlo T, Voci S, Lee S, Fournier R, Selby P.

Abstract

BACKGROUND:

Online social networks are popular components of behavior-change websites. Research has identified the participation of certain network members who assume leadership roles by providing support, advice, and direction to other members. In the literature, these individuals have been variously defined as key players, posters, active users, or caretakers. Despite their identification, very little research has been conducted on the contributions or demographic characteristics of this population. For this study, we collectively categorized key players, posters, active users, and caretakers as superusers.

OBJECTIVES:

To analyze data from two large but distinct Web-assisted tobacco interventions (WATI) to help gain insight into superuser demographic characteristics and how they use social networks.

METHODS:

We extracted cross-sectional data sets containing posting behaviors and demographic characteristics from a free, publicly funded program (the Canadian Cancer Society's Smokers' Helpline Online: SHO), and a free, privately run program (StopSmokingCenter.net: SSC).

RESULTS:

Within the reporting period (SHO: June 26, 2008 to October 12, 2010; SSC: May 17, 2007 to October 12, 2010), 21,128 individuals registered for the SHO and 11,418 registered for the SSC. Within the same period, 1670 (7.90%) registrants made at least one post in the SHO social network, and 1627 (14.25%) registrants made at least one post in the SSC social network. SHO and SSC superusers accounted for 0.4% (n = 95) and 1.1% (n = 124) of all registrants, and 5.7% (95/1670) and 7.62% (124/1627) of all social network participants, and contributed to 34.78% (29,422/84,599) and 46.22% (61,820/133,753) of social network content, respectively. Despite vast differences in promotion and group management rules, and contrary to the beliefs of group moderators, there were no statistically significant differences in demographic characteristics between the two superuser groups.

CONCLUSIONS:

To our knowledge, this is the first study that compared demographic characteristics and posting behavior from two separate eHealth social networks. Despite vast differences in promotional efforts and management styles, both WATI attracted superusers with similar characteristics. As superusers drive network traffic, organizations promoting or supporting WATI should dedicate resources to encourage superuser participation. Further research regarding member dynamics and optimization of social networks for health care purposes is required.

http://www.jmir.org/2012/3/e66/

Also:

From online randomized controlled trials to participant preference studies: morphing the San Francisco stop smoking site into a worldwide smoking cessation resource http://www.jmir.org/2012/3/e64/

Note: Open Access. Full html texts freely available from links immediately above.

Changes in skin color after smoking cessation

Korean J Fam Med. 2012 Mar;33(2):105-9. Epub 2012 Mar 30.

Cho YH, Jeong DW, Seo SH, Lee SY, Choi EJ, Kim YJ, Lee JG, Lee YH, Bae MJ, Chin HW.

Abstract

This study was performed to assess changes in skin color over 1 month after smoking cessation. The study population consisted of 49 men who participated in a smoking cessation program from March 2010 to June 2010 at a public health centre in Yangsan, South Korea. Thirty-four men who stop smoking completely were included in our study. Instrumental evaluations of skin color were performed using Mexameter (MX 18; Courage and Khazaka Electronic GmbH) at the beginning of the study and at 1-week and 4-week follow-up visits. Skin color was evaluated by measurement of 2 main color bases-melanin and haemoglobin-with the results expressed as melanin index (MI) and erythema index (EI). Both MI and EI were significantly reduced at the 4-week follow-up visit on all 7 sites measured. We anticipate that desirable effects on skin color after smoking cessation will play a positive role in maintaining smoking abstinence in routine clinical practice.

http://pdf.medrang.co.kr/Kafm/033/Jkafm033-02-06.pdf

Also:

Socioeconomic Indicators Associated with Initiation and Cessation of Smoking among Women in Seoul http://pdf.medrang.co.kr/Kafm/033/Jkafm033-01-01.pdf

Note: Open Access. Full text PDFs freely available from links immediately above.

HPV status in patients with head and neck of carcinoma of unknown primary site: HPV, tobacco smoking, and outcome

Oral Oncol. 2012 Jun 25. [Epub ahead of print]

Tribius S, Hoffmann AS, Bastrop S, Görögh T, Haag J, Röcken C, Clauditz T, Grob T, Wilczak W, Tennstedt P, Borcherding A, Petersen C, Hoffmann M.

Abstract

OBJECTIVES:

Infection with human papillomavirus (HPV) is linked to oropharyngeal cancer. This analysis investigated possible associations between HPV status, smoking history and survival outcome in patients with neck metastasis and carcinoma of unknown primary (CUP).

MATERIALS AND METHODS:

Registries at the Universities of Hamburg and Kiel were searched for patients with CUP diagnosed from 2002 to 2011 who had formalin-fixed and paraffin-embedded metastatic lymph node samples available. All patients underwent routine diagnostic procedures to establish the primary site and received radiotherapy (60Gy using conventional fractionation) with or without concurrent cisplatin-based chemotherapy depending on disease extent. Genotyping was performed using polymerase chain reaction; p16([INK4a]) expression was assessed using immunohistochemistry.

RESULTS:

Sixty-three patients were included; 23 (37%) had HPV DNA/p16+ samples and 40 (63%) were negative for either/both markers. A high proportion of patients had a history of tobacco smoking; significantly fewer patients with HPV+/p16+ samples were smokers than those who were negative for either/both markers (61% vs. 90%, respectively; p=0.0067). There were no statistically significant differences between overall or recurrence-free survival in HPV+/p16+ patients vs. those negative for either/both markers. Overall survival appeared to be superior in patients with <10 pack-years smoking history and HPV+/p16+ disease.

CONCLUSIONS:

This study, the largest to date investigating HPV status in head and neck CUP, identified HPV and p16 overexpression in over one-third of patients. Tobacco smoking history appeared to affect survival in HPV+/p16+ patients. Smoking status should be considered as a prognostic factor in patients with CUP, along with HPV DNA status.

http://www.oraloncology.com/article/S1368-8375%2812%2900187-X/abstract http://www.sciencedirect.com/science/article/pii/S136883751200187X

Pulmonary langerhans cell histiocytosis

Orphanet J Rare Dis. 2012 Mar 19;7:16.

Suri HS, Yi ES, Nowakowski GS, Vassallo R.

Abstract

Pulmonary Langerhans Cell Histiocytosis (PLCH) is a relatively uncommon lung disease that generally, but not invariably, occurs in cigarette smokers. The pathologic hallmark of PLCH is the accumulation of Langerhans and other inflammatory cells in small airways, resulting in the formation of nodular inflammatory lesions. While the overwhelming majority of patients are smokers, mechanisms by which smoking induces this disease are not known, but likely involve a combination of events resulting in enhanced recruitment and activation of Langerhans cells in small airways. Bronchiolar inflammation may be accompanied by variable lung interstitial and vascular involvement. While cellular inflammation is prominent in early disease, more advanced stages are characterized by cystic lung destruction, cicatricial scarring of airways, and pulmonary vascular remodeling. Pulmonary function is frequently abnormal at presentation. Imaging of the chest with high resolution chest CT scanning may show characteristic nodular and cystic abnormalities. Lung biopsy is necessary for a definitive diagnosis, although may not be required in instances were imaging findings are highly

characteristic. There is no general consensus regarding the role of immunosuppressive therapy in smokers with PLCH. All smokers must be counseled on the importance of smoking cessation, which may result in regression of disease and obviate the need for systemic immunosuppressive therapy. The prognosis for most patients is relatively good, particularly if longitudinal lung function testing shows stability. Complications like pneumothoraces and secondary pulmonary hypertension may shorten life expectancy. Patients with progressive disease may require lung transplantation.

http://www.ojrd.com/content/7/1/16 http://www.ojrd.com/content/pdf/1750-1172-7-16.pdf

Related Intern Med study:

Spontaneous regression of pulmonary involvement after smoking reduction and removal of and radiation therapy for Langerhans cell histiocytosis of the sphenoid bone: which comes first, the chicken or the egg? <u>https://www.jstage.jst.go.jp/article/internalmedicine/51/5/51 5 497/ article</u> <u>https://www.jstage.jst.go.jp/article/internalmedicine/51/5/51 5 497/ pdf</u>

Note: Open Access. Full text PDFs freely available from links immediately above.

Related New York Times Well Blog:

Think Like a Doctor: Too Sick to Smoke Solved! http://well.blogs.nytimes.com/2012/06/29/think-like-a-doctor-too-sick-to-smoke-solved/

Manufacturing epidemics: the role of global producers in increased consumption of unhealthy commodities including processed foods, alcohol, and tobacco

PLoS Med. 2012 Jun;9(6):e1001235. Epub 2012 Jun 26.

Stuckler D, McKee M, Ebrahim S, Basu S.

Abstract

In an article that forms part of the PLoS Medicine series on Big Food, David Stuckler and colleagues report that unhealthy packaged foods are being consumed rapidly in low- and middle-income countries, consistent with rapid expansion of multinational food companies into emerging markets and fueling obesity and chronic disease epidemics.

...We begin by examining two main questions: (1) Where is the consumption of unhealthy commodities rising most rapidly? and (2) What determines the pace and scale of these increases? For comparison, we analyse data on global trends in tobacco and alcohol commodities. We conclude by identifying policy interventions that could shift dietary patterns in a healthier direction and making recommendations for future research...

NCDs [noncommunicable diseases] are the current and future leading causes of global ill health; unhealthy commodities, their producers, and the markets that power them, are their leading risk factors. Until health practitioners, researchers, and politicians are able to understand and identify feasible ways to address the social, economic, and political conditions that lead to the spread of unhealthy food, beverage, and tobacco commodities, progress in areas of prevention and control of NCDs will remain elusive.

http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1001235

Note: Open Access. Full text PDF freely available from link immediately above.

Genetic Ancestry-Smoking Interactions and Lung Function in African Americans: A Cohort Study

PLoS One. 2012;7(6):e39541. Epub 2012 Jun 21.

Aldrich MC, Kumar R, Colangelo LA, Williams LK, Sen S, Kritchevsky SB, Meibohm B, Galanter J, Hu D, Gignoux CR, Liu Y, Harris TB, Ziv E, Zmuda J, Garcia M, Leak TS, Foreman MG, Smith LJ, Fornage M, Liu K, Burchard EG; for the Health ABC and CARDIA Studies.

Abstract

BACKGROUND:

Smoking tobacco reduces lung function. African Americans have both lower lung function and decreased metabolism of tobacco smoke compared to European Americans. African ancestry is also associated with lower pulmonary function in African Americans. We aimed to determine whether African ancestry modifies the association between smoking and lung function and its rate of decline in African Americans.

METHODOLOGY/PRINCIPAL FINDINGS:

We evaluated a prospective ongoing cohort of 1,281 African Americans participating in the Health, Aging, and Body Composition (Health ABC) Study initiated in 1997. We also examined an ongoing prospective cohort initiated in 1985 of 1,223 African Americans in the Coronary Artery Disease in Young Adults (CARDIA) Study. Pulmonary function and tobacco smoking exposure were measured at baseline and repeatedly over the follow-up period. Individual genetic ancestry proportions were estimated using ancestry informative markers selected to distinguish European and West African ancestry. African Americans with a high proportion of African ancestry had lower baseline forced expiratory volume in one second (FEV(1)) per pack-year of smoking (-5.7 ml FEV(1)/ smoking pack-year) compared with smokers with lower African ancestry (-4.6 ml in FEV(1)/ smoking pack-year) (interaction P value = 0.17). Longitudinal analyses revealed a suggestive interaction between smoking, and African ancestry on the rate of FEV(1) decline in Health ABC and independently replicated in CARDIA.

CONCLUSIONS/SIGNIFICANCE:

African American individuals with a high proportion of African ancestry are at greater risk for losing lung function while smoking.

http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0039541

Also:

Chronic obstructive pulmonary disease is associated with low levels of vitamin D <u>http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0038934</u> Testosterone is associated with erectile dysfunction: a cross-sectional study in chinese men <u>http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0039234</u>

Note: Open Access. Full text PDFs freely available from links immediately above.

Perinatal nicotine/smoking exposure and carotid chemoreceptors during development

Respir Physiol Neurobiol. 2012 Jun 25. [Epub ahead of print]

Stéphan-Blanchard E, Bach V, Telliez F, Chardon K.

Abstract

Tobacco smoking is still a common habit during pregnancy and is the most important preventable cause of many adverse perinatal outcomes. Prenatal smoking exposure can produce direct actions of nicotine in the fetus with the disruption of body and brain development, and actions on the maternal-fetal unit by causing repeated episodes of hypoxia and exposure to many toxic smoke products (such as carbon monoxide). Specifically, nicotine through binding to nicotinic acetylcholine receptors have ubiquitous effects and can affect carotid chemoreception development through structural, functional and neuroregulatory alterations of the neural circuits involved in the chemoafferent pathway, as well as by interfering with the postnatal resetting of the carotid bodies. Reduced carotid body chemosensitivity and tonic activity have thus been reported by the majority of the human and animal studies. This review focuses on the effects of perinatal exposure to tobacco smoke and nicotine on carotid chemoreceptor function during the developmental period. A description of the effects of smoking and nicotine on the control of breathing related to carotid body activity, and of the possible physiopathological mechanisms at the origin of these disturbances is presented.

http://www.sciencedirect.com/science/article/pii/S1569904812001747

Also:

Novel Regression Equations Predicting Lung Age from Varied Spirometric Parameters http://www.sciencedirect.com/science/article/pii/S1569904812001760

Attitude and Efficacy of Cardiologists With Respect to Smoking in Patients After Acute Coronary Syndromes

Rev Esp Cardiol. 2012 Jun 25. [Epub ahead of print] [Article in English, Spanish]

Cordero A, Bertomeu-Martínez V, Mazón P, Cosín J, Galve E, Lekuona I, de la Guía F, Gonzalez-Juanatey JR.

Abstract

INTRODUCTION AND OBJECTIVES:

Smoking is one of the most prevalent risk factors in acute coronary syndrome patients. The aim of this study was to assess the attitudes of cardiologists to the smoking habits of these patients

METHODS:

A prospective multicenter registry of acute coronary syndrome patients. The primary endpoint was defined as smoking abstinence and the secondary endpoint as the incidence of all-cause mortality or nonfatal myocardial infarction.

RESULTS:

The study population included 715 patients; 365 were current smokers. During follow-up (median, 375,0 days [interquartile range, 359.3-406.0 days]), 110 patients (30.6%) received smoking cessation support (19.7% at hospital discharge and 37.6% at month 3), specialized units and varenicline being the strategies most frequently used. No clinical differences were observed between patients who received smoking cessation support and those who did not, except for a higher prevalence of previous coronary heart disease in those who received support. In the multivariate analysis, the only variable independently associated with receiving smoking cessation support was previous coronary heart disease (odds ratio=3.16; 95% confidence interval, 1.64-6.11; P<.01). The abstinence rate was 72.3% at month 3 and 67.9% at 1 year; no differences were observed between the patients who received smoking cessation support and those who did not. During follow-up, a nonsignificant trend toward a lower incidence of the secondary endpoint was observed among the patients who were smokers at the time of acute coronary syndrome and who achieved abstinence (P=.07).

CONCLUSIONS:

Use of smoking cessation support strategies is limited in acute coronary syndrome patients and is more widespread among those with previous coronary heart disease.

http://www.revespcardiol.org/sites/default/files/elsevier/eop/S1885-5857%2812%2900169-7.pdf http://www.revespcardiol.org/sites/default/files/elsevier/eop/S0300-8932%2812%2900234-5.pdf

Note: Open Access. Full text PDFs freely available in English and Spanish from links immediately above.

How to identify science being bent: The tobacco industry's fight to deny second-hand smoking health hazards as an example

Social Science & Medicine Available online 13 June 2012

Kenneth Rochel de Camargo Jr.

Abstract

Social studies of science have produced a critical description of science that challenges traditional ideas about "objectivity" and "neutrality". Given evidence that scientific tools have been used to undermine solid science against the interests of the general public as opposed to protecting society from findings prematurely declared to be facts, this article asks: how can one differentiate between the usual proceedings of scientists and deliberate attempts to distort science? In order to respond to this question, the author presents systematic studies of the distortion (or "bending") of science, with

special attention to the role of public relation firms in the process. Drawing on examples from the tobacco industry, the article concludes that there are two key features of the tobacco industry case that indicate that distortions in science may have taken place: the fact that controversies surrounding tobacco has been centered in public forums, and legal or regulatory arenas more than scientific domains; and the presence of conflicts of interest in authorship and funding.

http://www.sciencedirect.com/science/article/pii/S0277953612004443

Also:

Disaggregating Canadian immigrant smoking behaviour by country of birth <u>http://www.sciencedirect.com/science/article/pii/S0277953612004212</u> Smoking among construction workers: The nonlinear influence of the economy, cigarette prices, and antismoking sentiment <u>http://www.sciencedirect.com/science/article/pii/S0277953612004741</u> The changing gender differences in life expectancy in Korea 1970-2005 <u>http://www.sciencedirect.com/science/article/pii/S0277953612003942</u>

Linking mass media campaigns to pictorial warning labels on cigarette packages: a cross-sectional study to evaluate effects among Mexican smokers

Tob Control Published Online First: 29 June 2012

James F Thrasher, Nandita Murukutla, Rosaura Pérez-Hernández, Jorge Alday, Edna Arillo-Santillán, Claudia Cedillo, Juan Pablo Gutierrez

Abstract

Objective This study assessed the effects of pictorial health warning labels (HWLs) and a linked media campaign in Mexico.

Methods Cross-sectional data were collected from a population-based sample of 1756 adult smokers, aged 18–55 years, during the initial implementation of pictorial HWLs, which some smokers had seen on cigarette packages while others had seen only the text-based HWLs. Exposure to the campaign and pictorial HWLs was assessed with aided recall methods, and other questions addressed attention and cognitive impact of HWLs, knowledge related to HWL and campaign content, and quit-related thoughts and behaviours. Logistic and linear regression models were estimated to determine associations between key outcomes and intervention exposure.

Results In bivariate and multivariate adjusted models, recall of pictorial HWLs and of the campaign were positively associated with greater attention to and cognitive impact of HWLs, whereas only pictorial HWL exposure was associated with having refrained from smoking due to HWLs. Both recall of pictorial HWLs and of the campaign were independently associated with greater knowledge of secondhand smoke harms and toxic tobacco constituents. Smokers who recalled only the pictorial HWLs were more likely to try to quit than smokers who recalled neither the pictorial HWLs nor the campaign (17% vs 6%, p<0.001).

Conclusions Consistent with other studies, adult smokers' exposure to new pictorial HWLs in Mexico was associated with psychosocial and behavioural responses related to quit behaviour. Exposure to the complementary media campaign was associated with independent additive effects on campaign-related knowledge, and it enhanced psychosocial responses to pictorial HWLs.

http://tobaccocontrol.bmj.com/content/early/2012/06/28/tobaccocontrol-2011-050282.abstract

Also:

Cost and effectiveness of the nationwide government-supported Smoking Cessation Clinics in the Republic of Korea http://tobaccocontrol.bmj.com/content/early/2012/06/28/tobaccocontrol-2011-050110.abstract Motivations for genetic testing for lung cancer risk among young smokers http://tobaccocontrol.bmj.com/content/early/2012/06/28/tobaccocontrol-2011-050110.abstract

Physician advice on avoiding secondhand smoke exposure and referrals for smoking cessation services

Tobacco Induced Diseases 2012, 10:10 (2 July 2012)

Kruger J, Trosclair A, Rosenthal A, Babb S, Rodes RM

Abstract

Background

Secondhand smoke (SHS) exposure causes premature death and disease. Eliminating smoking in indoor spaces is the only way to fully protect nonsmokers from SHS exposure, and also contributes to helping smokers quit smoking. Primary health care providers can play an important role in advising non-smoking patients to avoid SHS exposure, cautioning current smokers against exposing others to SHS, and referring tobacco users to cessation programs.

Methods

The purpose of this paper is to examine primary care provider (obstetricians/gynecologists, pediatricians, and general practitioners) advice regarding SHS exposure and referral to cessation programs. Using data from the 2008 DocStyles survey (n=1,454), we calculated the prevalence and adjusted odds ratios for offering patients advice regarding SHS exposure and referring adults who smoked or used other tobacco products to a cessation program. Results

The current study found that among a convenience sample of primary care providers, 94.9% encouraged parents to take steps to protect children from SHS exposure, 86.1% encouraged smokers to make their homes and cars smoke-free, and 77.4% encouraged nonsmokers to avoid SHS exposure. Approximately 44.0% of primary care providers usually or always referred patients who smoked or used tobacco products to cessation programs such as a quitline, a group cessation class, or one-on-one counseling.

Conclusion

Findings from a convenience sample of primary care providers who participated in a web-based survey, suggests that many primary care providers are advising parents to protect children from SHS exposure, encouraging patients who smoke to maintain smoke-free homes and cars, and advising smokers on ways to avoid exposing others to SHS. Healthcare providers are encouraged to advise patients to avoid SHS exposure and to refer patients who use tobacco products to cessation services.

http://www.tobaccoinduceddiseases.com/content/10/1/10/abstract http://www.tobaccoinduceddiseases.com/content/pdf/1617-9625-10-10.pdf

Note: Open Access. Full text PDF freely available from link immediately above.

Smoking status and sex as indicators of differences in 2582 obese patients presenting for weight management

Vascular Health and Risk Management Published Date May 2012 Volume 2012:8 Pages 291 - 298

Michael J Abunassar, George A Wells, Robert R Dent

Abstract

Background: Smoking remains the most common preventable cause of death. Very little tobacco exposure can increase cardiovascular disease risk. The relationship between smoking, sex, and weight remains unclear. Methods: Between September 1992 and June 2007, 2582 consenting patients starting the Ottawa Hospital Weight Management program were grouped by sex and smoking status. "Former smokers" (771 females, 312 males) had quit for at least 1 year. "Smokers" (135 females, 54 males) smoked >9 cigarettes daily. There were 979 females and 331 males who never smoked. Using SAS 9.2 statistical software, the prevalence of coronary artery disease (CAD), type 2 diabetes (T2DM), major depressive disorder (MDD), and medication use among the groups was compared (Chi-square $[\chi^2]$). Anthropometric measurements, lipid, glucose and thyroid levels were compared using analysis of variance (ANOVA). Interactions were assessed using 2-way ANOVA analysis for continuous data, and logistic regression for discrete data. **Results:** Smokers were more likely to have MDD (χ^2), lower high-density lipoprotein levels and higher triglyceride levels than other groups. Former smokers had a greater prevalence of CAD, T2DM on pharmacotherapy, and impaired fasting glucose than other groups. They were also more likely to be taking lipid-lowering agents and antihypertensives (χ^2). Never smokers had less MDD, CAD, and were less likely to be on antidepressants than the other groups. Males were more likely to have CAD and T2DM than females. Females were more likely to have MDD than males. Interactions between smoking status and sex were found for age, weight, fasting glucose and thyroid-stimulating hormone levels. Conclusion: Obese never smokers suffer from the fewest chronic diseases. Obese former smokers have a greater

prevalence of CAD, T2DM on pharmacotherapy, and impaired fasting glucose than other groups. Thus, clinicians and researchers should avoid combining former smokers with never smokers as "nonsmokers" in research and treatment decisions. The results of this study call for a longitudinal study comparing these groups over the weight management program.

http://www.dovepress.com/smoking-status-and-sex-as-indicators-of-differences-in-2582-obese-pati-peer-reviewed-article-VHRM

Note: Open Access. Full text PDF freely available from link immediately above.

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