

From: ["Stan Shatenstein" <shatensteins@sympatico.ca>](mailto:shatensteins@sympatico.ca)

To: [Undisclosed-Recipient:](#)

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Smoking & Tobacco Abstracts & News

**STAN Bulletin
28th Edition
30-August-2012**

Editor's note: This edition features an 8-part *Regulatory Toxicology and Pharmacology* series 'Reduced exposure evaluation of an Electrically Heated Cigarette Smoking System' (EHCSS) prepared by *Philip Morris International* R&D scientists at the company's laboratories in Switzerland and Germany. Taken together with the *Winston-Salem Journal* story on the RAI (*Reynolds American*) launch of its Zonnic NRT gum, this provides yet more evidence that the industry truly wants it all. In the companies' best-case scenario, they're preparing diligently for a smoke-free future and they want a foothold on all the alternatives. More realistically, the NRT and e-cigarette initiatives allow them to continue selling their pure poison cigarettes while also keeping a small number of quitters 'in the family'. They can also use the NRT/e-cigarette products synergistically as brand extensions in shrinking or dark advertising markets, including the no-logo/plain pack world that's coming. See below as well for the text of the unfortunate US [DC District Court Ruling](#) on cigarette warning labels that at least includes a well-argued dissent from Circuit Judge Rogers.

A new S. Korean study in the *Journal of Neurology, Neurosurgery and Psychiatry* ([JNNP](#)) showing a greatly increased risk of subarachnoid haemorrhage among smokers has generated a lot of news coverage already, but has not yet appeared Online First, so will be featured in an upcoming edition of this bulletin.

Stan Shatenstein

Noteworthy:

"In affirming the grant of summary judgment to the tobacco companies, the court applies the wrong level of scrutiny, disregarding the tobacco companies' history of deceptive advertising and the government's stated "primary goal, which is to effectively convey the negative health consequences of smoking on cigarette packages and in advertisements... Regardless of which level of scrutiny applies, the court errs in failing to examine both of the government's stated interests. In the rulemaking, the FDA articulated complementary, but distinct, interests in effectively conveying information about the negative health consequences of smoking to consumers and in decreasing smoking rates... Accordingly, because the district court erred in applying strict scrutiny to the commercial disclosures at issue, and because those disclosures, except as discussed below, appear to survive either level of scrutiny under traditional commercial speech precedent, I would reverse the grant of summary judgment, and I respectfully dissent." [Circuit Judge Rogers, dissenting. R.J. REYNOLDS TOBACCO COMPANY, ET AL., APPELLEES v. FOOD & DRUG ADMINISTRATION, ET AL., APPELLANTS, [United States District Court of Appeals for the District of Columbia](#)]

"The increased preference for Camel comes at a time when the brand has been exposed for its advertising practices that contain sexual innuendos, which may be tantalizing for adolescent audiences . These findings should help to inform policy makers and tobacco control officials to the ongoing need for monitoring advertising and marketing practices in an effort to limit brands from becoming popular among adolescents." [West JH et al. Tobacco brand preference among Mexican adolescents, [Int J Adol Med Health](#)]

In the News:

- Australia: [Sydney Morning Herald: Opinion: Big Tobacco's WTO complaint strategy plain to see](#)
- Australia: [Retailers given instructions on plain packs, duty-free limit on cigarettes slashed](#)
- Australia: [Big tobacco brands to target teens as plain packaging bites smoking rates](#)
- Australia: [Roxon: Family motivation for plain-packaging push; Kicking the Habit: Video](#)
- Lebanon: [Tourism Minister warns police severely understaffed, too few to enforce smoking ban](#)
- Malaysia: [Survey reveals tolerance of workplace smoking, more than half unfazed](#)
- NZ: [Herald: Cancer Society: Opinion: Tobacco is a dying industry however you view it](#)
- Saudi Arabia: [Parents alarmed over youths' shisha habits](#)
- S. Korea: [Smoking increases subarachnoid haemorrhage risk; Triple the danger; PR \[JNNP\]](#)
- UAE: [GCC to go ahead with cigarette warnings, tobacco lobby pressure resisted](#)

- UK: [Exercise may temporarily ease cigarette cravings: study \[Addiction: Haasova\]](#)
- UK/Australia: [Guernsey may adopt under-18 cigarette ban proposed by Tasmania](#)
- US: [RAI/Reynolds: Zonic: Tobacco company asks for smokers' trust in helping them quit](#)
- US: [New York Times: Editorial: Warning: Smoking Can Kill You: Support for plain packs appeal](#)
- US: [Philadelphia Inquirer: Editorial: Smoking warning labels will help save lives](#)
- US: [The Atlantic: Opinion: Is Cigarette Marketing Free Speech? \[DC District Court Ruling\]](#)
- US: CO: [Auditors question if tobacco taxes for smoking bans go beyond mandate & existing prohibitions](#)
- US: MD: [Baltimore Sun: Opinion: Taxes save lives: State should again raise the cost of smoking](#)

In this Edition:

- Addiction - Tzelepis: Australia: NSW: Abstinence predictors among smokers recruited actively to quitline support
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- Ann Ig - Pellegrino: Italy: Electronic cigarettes: evaluation of chemical & fine particulate matter exposure
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- Int J Adol Med Health - West: Mexico: Tobacco brand preference among adolescents
- JAH - Do: S. Korea: Youth employment, income & smoking initiation: Panel data
- J Health Serv Res Pol - Allan: UK: Scotland: Reasons for failing to complete an incentive-based cessation scheme
- J Nepal Health Res Counc - Aryal: Kathmandu: Perceived risk of cigarette smoking among college students
- J Pediatr Health Care - Robinson: TTM: Integrative review of adolescent cessation
- N&TR - King: US: Flavored Cigar Smoking Among Adults: NATS 2009-2010 Findings
- Pediatr Infect Dis J - Metzger: US: Smoking in Pregnancy & Infant Infectious Disease Hospitalization & Mortality
- Reg Tox Pharm - Schorp: PMI: EHCSS: Electrically Heated Cigarette Smoking System: Reduced exposure evaluation
- Reg Tox Pharm - Tricker: UK/S. Korea/Japan: PMI: EHCSS: Reduced exposure evaluation: Eight-day RCT
- Reg Tox Pharm - Tricker: Japan: PMI: EHCSS: Reduced exposure evaluation: Menthol cigarette: 6-day RCT

Abstracts:

Predictors of abstinence among smokers recruited actively to quitline support

Addiction

[Early View \(Online Version of Record published before inclusion in an issue\)](#)

Article first published online: **28 AUG 2012**

Flora Tzelepis, Christine L. Paul, Raoul A. Walsh, John Wiggers, Sarah L. Duncan and Jenny Knight

Abstract

Aims

Active recruitment of smokers increases the reach of quitlines; however, some quitlines restrict proactive telephone counselling (i.e. counsellor-initiated calls) to smokers ready to quit within 30 days. Identifying characteristics associated with successful quitting by actively recruited smokers could help to distinguish those most likely to benefit from proactive telephone counselling. This study assessed the baseline characteristics of actively recruited smokers associated with prolonged abstinence at 4, 7 and 13 months and the proportion achieving prolonged abstinence that would miss out on proactive telephone counselling if such support was offered only to smokers intending to quit within 30 days at baseline.

Design

Secondary analysis of a randomized controlled trial in which the baseline characteristics associated with prolonged abstinence were examined.

Setting

New South Wales (NSW) community, Australia.

Participants

A total of 1562 smokers recruited at random from the electronic NSW telephone directory.

Measurements

Baseline socio-demographic and smoking-related characteristics associated with prolonged abstinence at 4, 7 and 13 months post-recruitment.

Findings

Waiting more than an hour to smoke after waking and intention to quit within 30 days at baseline predicted five of the six prolonged abstinence measures. If proactive telephone counselling was restricted to smokers who at baseline intended to quit within 30 days, 53.8–65.9% of experimental group participants who achieved prolonged abstinence would miss out on telephone support.

Conclusions

Less addicted and more motivated smokers who are actively recruited to quitline support are more likely to achieve abstinence. Most actively recruited smokers reported no intention to quit within the next 30 days, but such smokers still achieved long-term abstinence.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03998.x/abstract>

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03998.x/pdf>

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

Alcohol and Tobacco Lower the Age of Presentation in Sporadic Pancreatic Cancer in a Dose-Dependent Manner: A Multicenter Study

[Am J Gastroenterol.](#) 2012 Aug 28. doi: 10.1038/ajg.2012.288. [Epub ahead of print]

[Anderson MA](#), [Zolotarevsky E](#), [Cooper KL](#), [Sherman S](#), [Shats O](#), [Whitcomb DC](#), [Lynch HT](#), [Ghiorzo P](#), [Rubinstein WS](#), [Vogel KJ](#), [Sasson AR](#), [Grizzle WE](#), [Ketcham MA](#), [Lee SY](#), [Normolle D](#), [Plonka CM](#), [Mertens AN](#), [Tripon RC](#), [Brand RE](#).

Abstract

OBJECTIVES:

The objective of this study was to examine the association between tobacco and alcohol dose and type and the age of onset of pancreatic adenocarcinoma (PancCa).

METHODS:

Prospective data from the Pancreatic Cancer Collaborative Registry were used to examine the association between age of onset and variables of interest including: gender, race, birth country, educational status, family history of PancCa, diabetes status, and tobacco and alcohol use. Statistical analysis included logistic and linear regression, Cox proportional hazard regression, and time-to-event analysis.

RESULTS:

The median age to diagnosis for PancCa was 66.3 years (95% confidence intervals (CIs), 64.5-68.0). Males were more likely than females to be smokers (77% vs. 69%, $P=0.0002$) and heavy alcohol and beer consumers (19% vs. 6%, 34% vs. 19%, $P<0.0001$). In univariate analysis for effects on PancCa presentation age, the following were significant: gender, alcohol and tobacco use (amount, status and type), family history of PancCa, and body mass index. Both alcohol and tobacco had dose-dependent effects. In multivariate analysis, alcohol status and dose were independently associated with increased risk for earlier PancCa onset with greatest risk occurring in heavy drinkers (HR 1.62, 95% CI 1.04-2.54). Smoking status had the highest risk for earlier onset pancreatic cancer with a HR of 2.69 (95% CI, 1.97-3.68) for active smokers and independent effects for dose ($P=0.019$). The deleterious effects for alcohol and tobacco appear to resolve after 10 years of abstinence.

CONCLUSIONS:

Alcohol and tobacco use are associated with a dose-related increased risk for earlier age of onset of PancCa. Although beer drinkers develop pancreatic cancer at an earlier age than nondrinkers, alcohol type did not have a significant effect after controlling for alcohol dose.

<http://www.nature.com/ajg/journal/vaop/ncurrent/abs/ajg2012288a.html>

Electronic cigarettes: an evaluation of exposure to chemicals and fine particulate matter (PM) for an Italian brand

Ann Ig. 2012 Jul-Aug;24(4):279-88.

[Pellegrino RM](#), [Tinghino B](#), [Mangiaracina G](#), [Marani A](#), [Vitali M](#), [Protano C](#), [Osborn JF](#), [Cattaruzza MS](#).

Abstract

The "electronic (e-)cigarette" generates intense scientific debate about its use. Its popularity is increasing worldwide as a method to reduce/quit smoking, and to smoke indoors when restrictions on smoking tobacco are present. WHO recommends caution, until its effectiveness in helping smokers is clarified, and the possible harm evaluated. The aim of this study was to assess the content of the aromatic liquid mixture and its vapour and the Particulate Matter (PM) emissions of an Italian brand of e-cigarette and to compare its PM emissions with a conventional cigarette. Propylene glycol (66%) and glycerine (24%) were main components in the liquid, while the flavouring substances were less than 0.1%. The same substances were detected in the vapour in similar proportions. Fine and ultrafine PM emissions were higher for the conventional versus the e-cigarette (e.g.: PM₁₀=922 vs 52 microg/m³; PM₁=80 vs 14 microg/m³). The e-cigarette seems to give some advantages when used instead of the conventional cigarette, but studies are still scanty: it could help smokers to cope with some of the rituals associated with smoking gestures and to reduce or eliminate tobacco consumption avoiding passive smoking. However, the e-cigarette causes exposure to different chemicals compared with conventional cigarettes and thus there is a need for risk evaluation for both e-cigarettes and passive steam exposure in smokers and non smokers.

http://www.seu-roma.it/annali_igiene/apps/autos.php

Predicting tobacco use among high school students by using the global youth tobacco survey in Riyadh, Saudi Arabia

Ann Thorac Med. 2012 Jul;7(3):122-9.

[Al Moamary MS](#), [Al Ghobain MO](#), [Al Shehri SN](#), [Gasmelseed AY](#), [Al-Hajjaj MS](#).

Abstract

OBJECTIVE:

To identify the predictors that lead to cigarette smoking among high school students by utilizing the global youth tobacco survey in Riyadh, Kingdom of Saudi Arabia (KSA).

METHODS:

A cross-sectional study was conducted among high school students (grades 10-12) in Riyadh, KSA, between April 24, 2010, and June 16, 2010.

RESULTS:

The response rate of the students was 92.17%. The percentage of high school students who had previously smoked cigarettes, even just 1-2 puffs, was 43.3% overall. This behavior was more common among male students (56.4%) than females (31.3%). The prevalence of students who reported that they are currently smoking at least one cigarette in the past 30 days was 19.5% (31.3% and 8.9% for males and females, respectively). "Ever smoked" status was associated with male gender (OR = 2.88, confidence interval [CI]: 2.28-3.63), parent smoking (OR = 1.70, CI: 1.25-2.30) or other member of the household smoking (OR = 2.11, CI: 1.59-2.81) who smoked, closest friends who smoked (OR = 8.17, CI: 5.56-12.00), and lack of refusal to sell cigarettes (OR = 5.68, CI: 2.09-15.48).

CONCLUSION:

Several predictors of cigarette smoking among high school students were identified.

<http://www.thoracicmedicine.org/article.asp?issn=1817-1737;year=2012;volume=7;issue=3;spage=122;epage=129;aulast=Al;type=0>
http://www.thoracicmedicine.org/temp/AnnThoracMed73122-7331045_202150.pdf

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

Research Letter

A Sense of Calling and Primary Care Physicians' Satisfaction in Treating Smoking, Alcoholism, and Obesity

Arch Intern Med. Published online August 27, 2012

Kenneth A. Rasinski, PhD; Ryan E. Lawrence, MD, MDiv; John D. Yoon, MD; Farr A. Curlin, MD

Nicotine dependence, obesity, and alcoholism respond to treatment by primary care physicians, but research suggests established treatment protocols are rarely used. It may be that physicians shy away from addressing these multifaceted, often obdurate conditions because they find that treating them is unsatisfying. We use the results of a national survey of primary care physicians to examine correlates of physician satisfaction in treating these conditions. We hypothesized that physician satisfaction would be lower for physicians who believe patients are responsible for these conditions and who are dissatisfied with their careers. We hypothesized that treatment satisfaction would be higher for physicians who view medicine as a calling...

Results. Physicians were most satisfied with treating nicotine dependence (62% experienced "some" or "a lot" of satisfaction), followed by obesity (57% experienced "some" or "a lot" of satisfaction) and alcoholism (50% said they experienced "some" or "a lot" of satisfaction; P.01 for all comparisons). Multivariable analyses (Table) showed that physicians who indicated that medicine was a calling were significantly more likely to report satisfaction treating each condition (nicotine dependence, adjusted odds ratio [AOR], 1.9; obesity, AOR, 1.9; alcoholism, AOR, 1.6). Those dissatisfied with medicine as a career were significantly less likely to report satisfaction treating nicotine dependence (AOR, 0.7) and alcoholism (AOR, 0.6). Physicians who believed that the patient was responsible for the condition were significantly less likely to report satisfaction treating alcoholism (some vs no responsibility, AOR, 0.3; a lot vs no responsibility, AOR, 0.3)....

<http://archinte.jamanetwork.com/article.aspx?articleid=1352788>

ANALYSIS

Why corporate power is a public health priority

BMJ 2012; 345 doi: 10.1136/bmj.e5124 (Published 21 August 2012)

Gerard Hastings

The marketing campaigns of multinational corporations are harming our physical, mental, and collective wellbeing.

Gerard Hastings urges the public health movement to take action

12.11.2012

The work of Professor Richard Doll provides two key lessons for public health. The first, that we must do all we can to eradicate the use of tobacco, has been well learnt and is being energetically acted upon. The second, more subtle learning—that our economic system has deep flaws—remains largely ignored. And yet, lethal though tobacco is, the harm being done to public health by our economic system is far greater.

Industrial epidemics

Furthermore, the two are intimately connected: tobacco has remained such an intractable problem only because our economic system allows free ranging corporations to market it. The same applies to the other two “industrial epidemics”¹ that constitute such a large share of the public health burden: alcohol misuse and obesity. In each case evocative promotion, ubiquitous distribution, perpetual new product development, and seductive pricing strategies are used to encourage unhealthy consumption. And in each case painstaking research and review have shown the obvious truth that this marketing effort succeeds, especially with the young.^{2 3 4} The consequence has been the inevitable escalation of lifestyle illnesses such as cancer, heart disease, cirrhosis, and diabetes...

The customer always comes second

Furthermore, the corporate marketers’ focus on customer satisfaction is in reality specious; the fiduciary duty of corporations gives them a legal obligation to prioritise the needs, not of the consumer, but of the shareholder. How else could we have tobacco companies, who are consummate marketers, continuing to produce products that kill one in two of their most loyal customers? The corporate marketers’ self centred purpose, then, is “to recognise and achieve an economic advantage which endures.”⁷ Not an economic advantage for the customer—just for the company. This is the same single minded and dysfunctional principle that continues to drive the financial sector...

Broadening public health

These are massive problems that demand urgent attention and radical measures. There are some signs that public health is up for this challenge. The Framework Convention on Tobacco Control—“the world’s first global public health treaty”¹⁸—shows that the global reach of corporate power can be controlled. Similarly, Marmot’s pioneering work on the social determinants of health shows that there is an appetite for taking a broad perspective and “turning public health knowledge into political action.”¹⁹ And, more recently, Rayner and Lang have called for a broader “ecological” perspective which recognises that “public health is often improved by movements and people prepared to challenge conventional assumptions and the status quo.”..

<http://www.bmj.com/content/345/bmj.e5124>

Why do Romanian junior high school students start to smoke?

Child: Care, Health and Development

[Early View \(Online Version of Record published before inclusion in an issue\)](#)

Article first published online: **29 AUG 2012**

L. M. Lotrean, I. Mesters and H. de Vries

Abstract

Background

Adolescence is a crucial period in the development of smoking behaviour. To develop efficient prevention programmes for teenagers, it is essential to understand why adolescents start to smoke. The objective of this study was to assess the predictors of smoking onset among Romanian junior high school students aged 13–14.

Methods

The data were obtained from a two-wave, 9-month longitudinal study carried out among 504 junior high school non-smokers from Cluj-Napoca, Romania. Questionnaires assessed smoking behaviour, attitudes, social influence, self-efficacy and intention regarding smoking (motivational variables), as well as different sociodemographic features.

Results

The results from the logistic regression analysis revealed that baseline lower self-efficacy in refraining from smoking in several social situations, baseline pressures from peers to smoke and baseline intentions to smoke significantly increased the risk of non-smokers to become smokers at follow-up 9 months later.

Conclusions

These findings underline that reinforcing social self-efficacy to refuse smoking, resisting peer pressures and maintaining negative intentions regarding smoking are essential ingredients for smoking prevention programmes among Romanian junior high school students.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1365-2214.2012.01428.x/abstract>

Association of Smoking with Cardiovascular and Infection-Related Morbidity and Mortality in Chronic Hemodialysis

[Clin J Am Soc Nephrol](#). 2012 Aug 23. [Epub ahead of print]

[Mc Causland FR](#), [Brunelli SM](#), [Waikar SS](#).

Abstract

BACKGROUND AND OBJECTIVES:

Smoking is common in the hemodialysis population and is associated with increased all-cause mortality and development of cardiovascular disease. Cause-specific outcomes have not yet been examined in detail. This study investigated the association of baseline smoking status with all-cause, cardiovascular, and infection-related morbidity and mortality in patients undergoing long-term hemodialysis.

DESIGN, SETTING, PARTICIPANTS, & MEASUREMENTS:

Post hoc analysis of the HEMO Study in patients with available comorbidity, clinical, and nutritional data. Cox proportional hazards regression models were fit to estimate the association of smoking status with mortality. Poisson and negative binomial regression models were fit to estimate the association of smoking status with hospitalization rate.

RESULTS:

Complete data were available for 1842 individuals (44% male, 63% black, 45% diabetic). Mean age was 58±14 years. At baseline, 17% were current smokers and 32% were former smokers. After case-mix adjustment, compared with never smoking, current smoking was associated with greater infection-related mortality (hazard ratio [HR], 2.04; 95% confidence interval [CI], 1.32-3.10) and all-cause mortality (HR, 1.44; 95% CI, 1.16-1.79) and greater cardiovascular (incidence rate ratio [IRR], 1.49; 95% CI, 1.22-1.82), infection-related (IRR, 1.35; 95% CI, 1.11-1.64) and all-cause (IRR, 1.43; 95% CI, 1.24-1.65) hospitalization rates. The population attributable fraction (i.e., fraction of observed deaths that may have been avoided) was 5.3% for current smokers versus never-smokers and 2.1% for current versus former smokers.

CONCLUSIONS:

Active smoking is prevalent in the chronic hemodialysis population and is associated with greater all-cause, cardiovascular, and infection-related morbidity and mortality.

<http://cjasn.asnjournals.org/content/early/2012/08/22/CJN.03880412.abstract>

Tobacco brand preference among Mexican adolescents

[Int J Adolesc Med Health](#). 2011 Nov 29;24(2):143-8. doi: 10.1515/ijamh.2012.021

[West JH](#), [Hall PC](#), [Page RM](#), [Trinidad DR](#), [Lindsay GB](#).

Abstract

Abstract Introduction: Advertising plays a major role in smoking behavior and forming brand preferences. Additionally, the most advertised tobacco brands have also been the most preferred. Maintaining brand loyalty in Latin America remains a priority for the tobacco industry. **Objective:** The purpose of this study was to explore tobacco brand preference trends from 2003 to 2006, and explore marketing and advertising factors that might be associated with these trends. **Study group:** Data for this study came from Mexican adolescents residing in cities that participated in the Global Youth Tobacco Survey in both 2003 and 2006 and reported smoking either Marlboro or Camel cigarettes in the past 30 days. **Methods:** Respondents reported the brand name of their preferred cigarette during the past 30 days. Multivariate regression analysis was used to determine differences by brand preference and exposure to tobacco marketing and advertising, which was assessed using six items. **Results:** In 2003, most adolescents preferred Marlboro. By 2006, older boys preferred Camel cigarettes to Marlboro, while girls' preference for Camel was similar to their preference for Marlboro. Adolescents that preferred Camel cigarettes in 2003 also reported greater exposure to tobacco marketing and advertising. **Conclusion:** Findings indicate that there are ongoing shifts in youth brand preference in Mexico, and that these shifts might be related to marketing and advertising practices. There is an ongoing need for monitoring marketing and advertising practices in an effort to protect adolescents from tobacco company exploits.

<http://www.degruyter.com/view/j/ijamh.2012.24.issue-2/ijamh.2012.021/ijamh.2012.021.xml>

Youth employment, income, and smoking initiation: results from Korean panel data

[J Adolesc Health](#). 2012 Sep;51(3):226-32. Epub 2012 Mar 28.

[Do YK](#), [Finkelstein EA](#).

Abstract

PURPOSE:

To estimate the effect of youth employment and income on smoking initiation, this study tests whether youth with higher incomes from either employment or allowance are more likely to smoke, and, if so, whether it is the employment effect or the income effect that affects youth smoking initiation.

METHODS:

Data from the 2003-2007 Korea Youth Panel Study were used to estimate the effect of youth employment and income on smoking initiation. A fixed-effects linear probability model was estimated to control for unobserved individual heterogeneity, which may affect both youth employment/income and smoking initiation.

RESULTS:

Even after controlling for unobserved individual heterogeneity, youth employment raised the probability of smoking initiation by 4.4% points, but neither employment income nor allowance was significantly associated with youth smoking initiation.

CONCLUSIONS:

Youth employment is an important risk factor for smoking initiation in South Korea, suggesting that workplaces that hire youth may be an appropriate target for antismoking interventions.

<http://www.sciencedirect.com/science/article/pii/S1054139X12000237>

Related JAH Editorial:

Workplace Strategies Are Needed to Protect Youth Across the Globe From Starting to Smoke

<http://www.sciencedirect.com/science/article/pii/S1054139X12002534>

Also:

Previous Use of Alcohol, Cigarettes, and Marijuana and Subsequent Abuse of Prescription Opioids in Young Adults

<http://www.sciencedirect.com/science/article/pii/S1054139X12002315>

Paying the price for an incentive: an exploratory study of smokers' reasons for failing to complete an incentive based smoking cessation scheme

[J Health Serv Res Policy](#). 2012 Aug 24. [Epub ahead of print]

[Allan C](#), [Radley A](#), [Williams B](#).

Abstract**OBJECTIVES:**

In 2009, one Scottish region launched a smoking cessation programme offering a weekly financial incentive of £12.50 over a 12-week period. However, a significant proportion of registered participants dropped out of the programme, some even failing to collect the financial reward they were owed. We explore reasons for disengagement and failure to re-engage within this group.

METHOD:

Individuals (n = 14) were interviewed in depth. Transcripts from recorded interviews formed the dataset and were analysed using the "Framework" method.

RESULTS:

Incentives appeared to introduce a potential change/reversal in the felt contractual relationship between service provider and client: the client was now the provider and being paid to quit. This led to an increased sense of obligation towards the service, and enhanced feelings of failure, guilt and shame post-relapse, and reluctance to continue engagement or re-engagement. Other service factors promoting disengagement included issues of practical delivery through location, timing, administrative burden and incentive preference.

CONCLUSION:

The future design of incentive-based schemes should be cognisant of the potential impact on the client-professional relationship. Increasing the value of the incentive may overcome clients' antipathy towards bureaucracy and monitoring, but may simultaneously exacerbate the sense of failure and resultant stigma associated with relapse. It may be more cost-effective to reduce barriers/costs such as inconvenience, lack of privacy, timing and embarrassment of association of attendance at the pharmacy with methadone use. Alternatively, risks may be managed by reframing weekly rewards as three separate month-long stages, increasing a sense of achievement that a particular stage has been achieved before any relapse.

<http://jhsrp.rsmjournals.com/content/early/2012/08/24/jhsrp.2012.011084.abstract>

Perceived risk of cigarette smoking among college students

[J Nepal Health Res Counc](#). 2011 Oct;9(2):176-80.

[Aryal UR](#), [Lohani SP](#).

Abstract

Background: Many studies have indicated that the young adults (18-24 years) were not fully aware of health

consequences of cigarette smoking. The objective of the study is to determine the prevalence of cigarette smoking among college students and to assess how they perceive the risks of cigarette smoking. Methods: A cross-sectional study was carried out in Kathmandu valley during mid February and March 2011. This study comprises 340 students from seven private public health colleges of Kathmandu valley. The anonymous question contains information on demographic characteristics, smoking habits, and smoking related risk perception. Data was analyzed by both descriptive and inferential statistics including logistic regression with the help of Microsoft Excel 2007 and SPSS 11.5 version. Results: Overall prevalence rate of ever smokers was 33% and about 16% were current smokers. Non-smokers were about 3 times more likely than smokers to report that smoking one to five cigarettes per day was harmful (aOR =2.60; 95% CI: 1.34-5.05). Similarly, Non Smokers were 2 times more likely to believe the statement that people get addicted to tobacco as to cocaine or heroin (aOR =2.27; 95%CI: 1.33-4.57). Nearly one fifth of smokers and non-smokers believed that smoking on a weekend or a couple of days a week was harmful, and there was no significant difference between two groups (P>0.05). Conclusions: The study reveals the smoker students were less aware of risks of cigarette smoking and its health consequences. Thus there is a need to promote effective anti-smoking messages focusing effects of each cigarette they smoke. Keywords: college students, smoking, risk perceptions.

[http://www.jnhrc.com.np/index.php?journal=nhrc&page=article&op=view&path\[\]=351](http://www.jnhrc.com.np/index.php?journal=nhrc&page=article&op=view&path[]=351)

[http://www.jnhrc.com.np/index.php?journal=nhrc&page=article&op=viewFile&path\[\]=351&path\[\]=326](http://www.jnhrc.com.np/index.php?journal=nhrc&page=article&op=viewFile&path[]=351&path[]=326)

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

An integrative review of adolescent smoking cessation using the transtheoretical model of change

[J Pediatr Health Care](#). 2012 Sep;26(5):336-45. Epub 2011 Feb 26.

[Robinson LM](#), [Vail SR](#).

Abstract

INTRODUCTION:

The purpose of this literature review is to report the effectiveness of trials using the Transtheoretical Model of Change for achieving smoking cessation among adolescents.

METHOD:

An integrative literature review was performed. Two reviewers searched the Internet for randomized, controlled trials or observational studies of adolescent smoking cessation trials reported between 1999 and June 2009 that used the Transtheoretical Model of Change.

RESULTS:

Six randomized controlled trials remained after all inclusion and exclusion criteria were met. Each study was reviewed qualitatively and odds ratio and quit rates were calculated. Four studies demonstrated an odds ratio of greater than 1.0, and in four studies significantly better quit rates were found in the intervention arm versus the control arm at the endpoint evaluation.

DISCUSSION:

Evidence exists for the effectiveness of stage-based interventions in promoting smoking cessation in adolescents.

<http://www.sciencedirect.com/science/article/pii/S0891524510003810>

Flavored Cigar Smoking Among U.S. Adults: Findings From the 2009–2010 National Adult Tobacco Survey

Nicotine Tob Res first published online August 27, 2012

Brian A. King, Shanta R. Dube, and Michael A. Tynan

Abstract

Introduction: Under its authority to regulate tobacco products, the U.S. Food and Drug Administration prohibited certain characterizing flavors in cigarettes in September 2009; however, flavored cigars are still permitted to be manufactured, distributed, and sold. This study assessed the prevalence and correlates of flavored cigar smoking among U.S. adults.

Methods: Data were obtained from the 2009–2010 National Adult Tobacco Survey, a national landline and cell phone survey of adults aged ≥ 18 years old residing in the 50 U.S. states and the District of Columbia. National and state estimates of flavored cigar use were calculated overall and among current cigar smokers; national estimates were calculated by sex, age, race/ethnicity, educational attainment, annual household income, U.S. Census Region, and sexual orientation.

Results: The national prevalence of flavored cigar smoking was 2.8% (95% confidence interval [CI] = 2.6%–3.1%; state range: 0.6%–5.7%) and was greater among those who were male, younger in age, non-Hispanic Other race, less educated, less wealthy, and lesbian, gay, bisexual, or transgendered (LGBT). Nationally, the prevalence of flavored cigar use among cigar smokers was 42.9% (95% CI = 40.1%–45.7%; state range: 11.1%–71.6%) and was greater among those who were female, younger in age, Hispanic, non-Hispanic Other race, less educated, less wealthy, and LGBT.

Conclusions: More than two fifths of current cigar smokers report using flavored cigars. Disparities in flavored cigar use also exist across states and subpopulations. Efforts to curb flavored cigar smoking have the potential to reduce the prevalence of overall cigar smoking among U.S. adults, particularly among subpopulations with the greatest burden.

<http://ntr.oxfordjournals.org/content/early/2012/08/17/ntr.nts178.abstract>

Association of Maternal Smoking during Pregnancy with Infant Hospitalization and Mortality Due to Infectious Diseases

[Pediatr Infect Dis J.](#) 2012 Aug 27. [Epub ahead of print]

[Metzger MJ](#), [Halperin AC](#), [Manhart LE](#), [Hawes SE](#).

Abstract

BACKGROUND:

Maternal smoking is associated with infant respiratory infections and with increased risk of low birthweight (LBW) infants and preterm birth. This study assesses the association of maternal smoking during pregnancy with both respiratory and non-respiratory infectious disease (ID) morbidity and mortality in infants.

METHODS:

We conducted two retrospective case-control analyses of infants born in Washington State from 1987-2004 using linked birth certificate, death certificate, and hospital discharge records. One assessed morbidity—infants hospitalized due to ID within one year of birth (47,404 cases/48,233 controls). The second assessed mortality—infants who died within one year due to ID (627 cases/2,730 controls).

RESULTS:

Maternal smoking was associated with both hospitalization (Adjusted Odds Ratio (AOR)=1.52; 95%CI: 1.46, 1.58) and mortality (AOR=1.51; 95%CI: 1.17, 1.96) due to any ID. In subgroup analyses, maternal smoking was associated with hospitalization due to a broad range of ID including both respiratory (AOR=1.69; 95%CI: 1.63, 1.76) and non-respiratory ID (AOR=1.27; 95%CI: 1.20, 1.34). Further stratification by birthweight and gestational age did not appreciably change these estimates. In contrast, there was no association of maternal smoking with ID infant mortality when only LBW infants were considered.

CONCLUSIONS:

Maternal smoking was associated with a broad range of both respiratory and non-respiratory ID outcomes. Despite attenuation of the mortality association among LBW infants, ID hospitalization was found to be independent of both birthweight and gestational age. These findings suggest that full-term infants of normal weight whose mothers smoked may suffer an increased risk of serious ID morbidity and mortality.

http://journals.lww.com/pidj/Abstract/publishahead/Association_of_Maternal_Smoking_during_Pregnancy.98587.aspx

Reduced exposure evaluation of an Electrically Heated Cigarette Smoking System. Part 1: Non-clinical and clinical insights

[Regulatory Toxicology and Pharmacology](#)

In Press, Uncorrected Proof, Available online 22 August 2012

Matthias K. Schorp, Anthony R. Tricker, Ruth Dempsey
Philip Morris International R&D, Philip Morris Products S.A., Neuchâtel, Switzerland.

Abstract

The following series of papers presents an extensive assessment of the Electrically Heated Cigarette Smoking System EHCSS series-K cigarette vs. conventional lit-end cigarettes (CC) as an example for an extended testing strategy for evaluation of reduced exposure. The EHCSS produces smoke through electrical heating of tobacco. The EHCSS series-K heater was designed for exclusive use with EHCSS cigarettes, and cannot be used to smoke (CC). Compared to the University of Kentucky Reference Research cigarette 2R4F and a series of commercial CC, mainstream cigarette smoke of both the non-menthol and menthol-flavored EHCSS cigarettes showed a reduced delivery of a series of selected harmful and potentially harmful constituents (HPHC), mutagenic activity determined using the *Salmonella typhimurium* Reverse Mutation (Ames) assay, and cytotoxicity in the Neutral Red Uptake Assay. Clinical evaluations confirmed reduced exposure to HPHC and excretion of mutagenic material under controlled clinical conditions. Reductions in HPHC exposure were confirmed in a real-world ambulatory clinical study. Potential biomarkers of cardiovascular risk were also reduced under real-world ambulatory conditions. A modeling approach, 'nicotine bridging', was developed based on the determination of nicotine exposure in clinical evaluations which indicated that exposure to HPHC for which biomarkers of exposure do not exist would also be reduced.

Conflict of Interest statement

All authors are or were Philip Morris International (PMI) R&D employees. The work reported in all eight parts of this supplement was funded by PMI R&D.

<http://www.sciencedirect.com/science/article/pii/S0273230012001651>

Also:

Reduced exposure evaluation of an Electrically Heated Cigarette Smoking System. Part 2: Smoke chemistry and in vitro toxicological evaluation using smoking regimens reflecting human puffing behavior

<http://www.sciencedirect.com/science/article/pii/S0273230012001614>

Note: Tobacco industry research.

Reduced exposure evaluation of an electrically heated cigarette smoking system. Part 3: Eight-day randomized clinical trial in the UK

[Regulatory Toxicology and Pharmacology](#)

Available online 22 August 2012

[Anthony R. Tricker](#), [Adrian J. Stewart](#), [Claire Martin Leroy](#), [Dirk Lindner](#), [Matthias K. Schorp](#), [Ruth Dempsey](#)

Philip Morris International R&D, Philip Morris Products S.A., Neuchâtel, Switzerland

Abstract

A randomized, controlled, open-label, parallel-group, single-center study to determine biomarkers of exposure to nine selected harmful and potentially harmful constituents (HPHC) in cigarette smoke and urinary excretion of mutagenic material in 160 male and female subjects smoking *Marlboro* cigarettes (6 mg tar, 0.5 mg nicotine, and 7.0 mg CO) at baseline. Subjects were randomized to continue smoking *Marlboro* cigarettes, or switch to using an electrically heated cigarette smoking system (EHCSS) smoking one of two EHCSS series-K cigarettes, the EHCSS-K6 cigarette (5 mg tar, 0.3 mg nicotine, and 0.6 mg CO) or the EHCSS-K3 cigarette (3 mg tar, 0.2 mg nicotine, and 0.6 mg CO), or switch to smoking *Philip Morris One* cigarettes (1 mg tar, 0.1 mg nicotine, and 2.0 mg CO), or to no-smoking. The mean decreases from baseline to Day 8 were statistically significant ($p < 0.05$) for all determined HPHC including benzene and CO (the primary objectives), and urinary excretion of mutagenic material in the EHCSS-K6 (range $-35.5 \pm 29.2\%$ to $-79.4 \pm 14.6\%$ [mean \pm standard deviation]), EHCSS-K3 (range $-41.2 \pm 26.6\%$ to $-83.1 \pm 9.2\%$), and PM1 (range $-14.6 \pm 24.1\%$ to $-39.4 \pm 17.5\%$) groups. The largest reductions in exposure occurred in the no-smoking group (range $-55.4 \pm 45.0\%$ to

-100.0 ± 0.0%).

Conflict of Interest statement

All authors are or were Philip Morris International (PMI) R&D employees. The work reported in all eight parts of this supplement was funded by PMI R&D.

<http://www.sciencedirect.com/science/article/pii/S0273230012001675>

Also:

Reduced exposure evaluation of an Electrically Heated Cigarette Smoking System. Part 4: Eight-day randomized clinical trial in Korea

<http://www.sciencedirect.com/science/article/pii/S0273230012001705>

Reduced exposure evaluation of an electrically heated cigarette smoking system. Part 5: 8-Day randomized clinical trial in Japan

<http://www.sciencedirect.com/science/article/pii/S0273230012001602>

Note: Tobacco industry research.

Reduced exposure evaluation of an electrically heated cigarette smoking system. Part 6: 6-day randomized clinical trial of a menthol cigarette in Japan

[Regulatory Toxicology and Pharmacology](#)

In Press, Uncorrected Proof, Available online 22 August 2012

[Anthony R. Tricker](#), [Shigato Kanada](#), [Kohji Takada](#), [Claire Martin Leroy](#), [Dirk Lindner](#), [Matthias K. Schorp](#), [Ruth Dempsey](#)

Philip Morris International R&D, Philip Morris Products S.A., Neuchâtel, Switzerland

Abstract

A randomized, controlled, open-label, parallel-group, single-center study to determine biomarkers of exposure to 12 selected harmful and potentially harmful constituents (HPHC) in cigarette smoke, excretion of mutagenic material in urine, and serum Clara cell 16-kDa protein (CC16) in 102 male and female Japanese subjects who smoked *Marlboro Ultra Lights Menthol* cigarettes (M4J^M; 4 mg tar and 0.3 mg nicotine) at baseline. Subjects were randomized to continue smoking M4J^M, or switch to smoking either the electrically heated cigarette smoking system menthol cigarette (EHCSS-K6^M; 5 mg tar and 0.3 mg nicotine) or the *Lark One* menthol cigarette (Lark1^M; 1 mg tar and 0.1 mg nicotine), or to no-smoking. The mean decreases from baseline to Day 5/6 were statistically significant ($p < 0.05$) for exposure to 10 of 12 cigarette smoke HPHC including the primary endpoint (carbon monoxide) and urinary excretion of mutagenic material in the EHCSS-K6^M group (-12.3% to -83.4%). Smaller, but statistically significant reductions ($p < 0.05$) occurred in the Lark1^M group (-3.3% to -35.2%), with the exception of urinary mutagens. The largest mean reductions (all $p < 0.05$) in exposure to cigarette smoke HPHC and excretion of mutagenic material occurred in the no-smoking group (-1.4% to -93.6%). Serum CC16, an indicator of lung epithelial injury, was not significantly different between groups.

Conflict of Interest statement

All authors are or were Philip Morris International (PMI) R&D employees. The work reported in all eight parts of this supplement was funded by PMI R&D.

<http://www.sciencedirect.com/science/article/pii/S027323001200164X>

Also:

Reduced exposure evaluation of an Electrically Heated Cigarette Smoking System. Part 7: A one-month, randomized, ambulatory, controlled clinical study in Poland

<http://www.sciencedirect.com/science/article/pii/S0273230012001638>

Reduced exposure evaluation of an Electrically Heated Cigarette Smoking System. Part 8: Nicotine Bridging - estimating smoke constituent exposure by their relationships to both nicotine levels in mainstream cigarette smoke and in smokers

<http://www.sciencedirect.com/science/article/pii/S0273230012001626>

Note: Tobacco industry research.

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Stan Shatenstein
Editor & Publisher, STAN Bulletin

Smoking & Tobacco Abstracts & News
5492-B Trans Island
Montreal, QC Canada H3W 3A8
shatensteins@sympatico.ca

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