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Smoking & Tobacco Abstracts & News

**STAN Bulletin
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3-September-2012**

Editor's note: The ERS e-cigarette story below is linked to the [presentation](#) 'Acute effect of e-cigarette on pulmonary function in healthy subjects and smokers' by Gennimata and colleagues at the European Respiratory Society [Congress](#) currently underway in Vienna. The Gennimata paper is part of a Thematic Poster [Session](#) on 'Tobacco and shisha exposure in children and adolescents' and other abstracts of interest from the session may be viewed from the links provided here and below.

Stan Shatenstein

Noteworthy:

"With advanced countries taking power to regulate industries, there is really no excuse for continuing with the status quo. Regulators will have no alternative but to simplify the cigarette recipes, to remove or reduce the levels of whatever carcinogens and toxins they can and to face up to the need to set parameters for the chemicals that influence the absorption of nicotine... Failure to downregulate the carcinogenicity, toxicity and addictiveness of the cigarette may mean we are making the same mistake for a third time. This time I absolve myself of responsibility." [Gray N. Tobacco Control: Reflections on Our Mistakes and Those Who Made Them, [Curr Oncol Rep](#)]

"The tobacco industry states that their only intent is to promote brand choices among adult smokers. But there is a difference between stated intent and documented impact (United States v. Philip Morris USA Inc.). Because, regardless of intent, the impact of tobacco marketing and promotion is to encourage underage youth. In fact, nearly 90% of smokers start by age 18 years; and more than 80% of underage smokers choose brands from among the top three most heavily advertised." [Koh H. A Federal Plan for Ending the Tobacco Epidemic, [N&TR](#)]

In the News:

- Australia/Ukraine: [WTO: Hard line taken on tobacco industry-friendly plain packs challenge](#)
- Australia: [Two-pack duty-free cigarette limit set to create havoc at Customs](#)
- Australia: [Vietnamese community has highest smoking rates, over 50% compared to 16% nationally](#)
- Bull WHO - Jones: [Wigand: Smoke-Free Kids: The fight to stub out tobacco](#)
- Canada: Ontario: Toronto: [Tobacco-free shisha gains popularity but health concerns remain](#) [[Waterpipe Fact Sheet](#)]
- ERS: Greece: [Electronic Cigarettes Cause Damage to Lungs](#) [[Gennimata: Acute effect on pulmonary function](#); [PR](#)] [[Session](#)]
- Germany: [Country marks five years of smoking ban in public buildings & transportation](#)
- Iran: [Shisha: Waterpipe smoking as bad as cigarettes for lungs, irrigated with sewage water](#) [[Respirol: Boskabady](#)]
- Lebanon: [Smoking ban in effect](#); [Protests to amend law](#); [Leading hotelier claims 10,000 jobs at risk](#)
- Malta/Australia/EU: [FCTC: BAT: The great debate: cigarette packaging](#)
- NZ/Australia: [Plain packaging: This time it's serious: Review of industry tactics](#); [Video](#)
- Philippines: [World Bank study highlights lucrative outbound smuggling of local cigarettes](#)
- Turkey: [Smokers to pay for cigarette-related diseases](#); [Official statistics show reduced consumption](#)
- Saudi Arabia: [Cigarette firms enticing youth with deceptive messages](#)
- UAE: [Shisha users suffer chronic respiratory symptoms, do not call themselves smokers](#)
- UK: [No-smoking nation by 2032 a realistic goal, campaigners claim](#)
- UK/US/Canada: [BAT: Smoking: Will cigarettes ever be safe?](#)
- US: [New York Times: Editorial: RYO, Cigar Tax & More Loopholes in Tobacco Regulation](#)
- US: [Proctor: What's Really in Your Cigarette? Industry documents reveal ammonia, sugars, cocoa & more](#)
- US: [The Atlantic: Opinion: Why Big Tobacco's 1st Amendment Rights Should Matter](#)
- US: [Secondhand tobacco smoke tied to flu complications in kids](#) [[J Pediatr: Wilson](#)]
- US: MO: [Big Tobacco will not fight cigarette tax increase after MSA concessions](#)

- US: VA: Richmond: [PM: New Tobacco Town apartments go smoke-free](#)
- Zimbabwe: [Savanna Tobacco: Smokers consume 5 million cigarettes daily from one firm](#)

In this Edition:

- *Addict Biol* - Cohrs: Germany: Impaired sleep quality & sleep duration in smokers
- *Am J Perinatol* - Andres: US: Tobacco Use Impact on Preterm Premature Rupture of the Membranes
- *Behav Brain Funct* - Tang: China: Regional homogeneity altered spontaneous activity in young chronic smokers
- *BMC Pub Health* - Vidrine: US: Project ACTION: Interactive mobile messaging for underserved smokers: RCT
- *BMJ Open* - Abu-Rmeileh: Occupied Palestinian Territory: West Bank: Analysing falls in CHD mortality, 1998-2009
- *Chest* - Rokadia: US: NHANES: Serum heavy metals & obstructive lung disease
- *Contemp Clin Dent* - Bansal: India: Punjab: Evaluation of micronuclei in tobacco users
- *Curr Oncol Rep* - Gray: Tobacco Control: Reflections on Our Mistakes & Those Who Made Them
- *Ethn Health* - Borrell: US: CARDIA: Racial discrimination, racial/ethnic segregation & health behaviors
- *Eur J Health Econ* - Keng: Taiwan: Stimulant & combined cigarette use effect on mortality: betel quid
- *Eur J Ob Gyn Reprod Biol* - Kareli: Cytogenetic evaluation of pre-pregnancy smoking in lymphocytes
- *Eur Resp J* - Warnier: COPD: Cessation strategies in patients with chronic obstructive pulmonary disease
- *Fut Microbiol* - Kumar: Smoking & subgingival ecosystem: pathogen-enriched community
- *Int J Adol Med Health* - Knishkowsky: Israel: Reaching Jewish ultra-orthodox adolescents: targeted smoking prevention
- *J Pers Disord* - Becoña: Spain: Axis II Disorders & Smoking Among General Population Adults
- *J Relig Health* - Garcia: US: Texas: Religion & Selected Health Behaviors Among Latinos
- *JNNP* - Kim: S. Korea: Impact of smoking cessation on the risk of subarachnoid haemorrhage
- *JPET* - Ferguson: Nicotine Treatment & Ethanol Self-administration Effects on CYP2 Genes & Pharmacokinetics
- *Life Sci* - Naem: Potential mechanism for smoking-associated hypoalbuminemia
- *Med Pr* - Puchalski: Poland: Actions reducing tobacco smoking at the workplace, company size & wealth
- *MMWR* - Augustson: US: Quitline Call & Website Visitor Increases: National Tobacco Education Campaign, 2012
- *N&TR* - Koh: US: SRNT: Editorial: Federal Plan for Ending the Tobacco Epidemic
- *Periodontol 2000* - Jürgensen: FCTC: Translating science into action: periodontal health & public health approaches
- *PLoS One* - Sharan: India: Betel nut & carcinogenesis: revisit with clinical perspective
- *Tob Control* - Braun: Argentina: Piggybacking as media advocacy strategy in a gender-oriented cessation programme

Abstracts:

Impaired sleep quality and sleep duration in smokers-results from the German Multicenter Study on Nicotine Dependence

[Addict Biol](#). 2012 Aug 23. doi: 10.1111/j.1369-1600.2012.00487.x. [Epub ahead of print]

[Cohrs S](#), [Rodenbeck A](#), [Riemann D](#), [Szagun B](#), [Jaehne A](#), [Brinkmeyer J](#), [Gründer G](#), [Wienker T](#), [Diaz-Lacava A](#), [Mobascher A](#), [Dahmen N](#), [Thuerauf N](#), [Kornhuber J](#), [Kiefer F](#), [Gallinat J](#), [Wagner M](#), [Kunz D](#), [Grittner U](#), [Winterer G](#).

Abstract

Cigarette smoking is a severe health burden being related to a number of chronic diseases. Frequently, smokers report about sleep problems. Sleep disturbance, in turn, has been demonstrated to be involved in the pathophysiology of several disorders related to smoking and may be relevant for the pathophysiology of nicotine dependence. Therefore, determining the frequency of sleep disturbance in otherwise healthy smokers and its association with degree of nicotine dependence is highly relevant. In a population-based case-control study, 1071 smokers and 1243 non-smokers without lifetime Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Axis I disorder were investigated. Sleep quality (SQ) of participants was determined by the Pittsburgh Sleep Quality Index. As possible confounders, age, sex and level of education and income, as well as depressiveness, anxiety, attention deficit hyperactivity, alcohol drinking behaviour and perceived stress, were included into multiple regression analyses. Significantly more smokers than non-smokers (28.1% versus 19.1%; $P < 0.0001$) demonstrated a disturbed global SQ. After controlling for the confounders, impaired scores in the component scores of sleep latency, sleep duration and global SQ were found significantly more often in smokers than non-smokers. Consistently, higher degrees of nicotine dependence and intensity of smoking were associated with shorter sleep duration. This study demonstrates for the first time an elevated prevalence of sleep disturbance in smokers compared with non-smokers in a population without lifetime history of psychiatric disorders even after controlling for potentially relevant risk factors. It appears likely that smoking is a behaviourally modifiable risk factor for the occurrence of impaired SQ and short sleep duration.

The Impact of Tobacco Use on Preterm Premature Rupture of the Membranes

[Am J Perinatol.](#) 2012 Aug 28. [Epub ahead of print]

[Andres RL](#), [Zhao Y](#), [Klebanoff MA](#), [Hauth JC](#), [Caritis SN](#), [Carey JC](#), [Wapner RJ](#), [Iams JD](#), [Leveno KJ](#), [Miodovnik M](#), [Sibai B](#), [Van Dorsten JP](#), [Dombrowski MP](#), [O'Sullivan MJ](#), [Langer O](#); for the Eunice Kennedy Shriver National Institute of Child Health and Human Development Maternal-Fetal Medicine Units Network.

Abstract

Objective To determine if tobacco use increases the incidence of preterm premature rupture of the membranes (pPROM) or alters perinatal outcomes after pPROM. **Study Design** This is a secondary analysis of the databases of three completed Eunice Kennedy Shriver National Institute of Child Health and Human Development-supported Maternal Fetal Medicine Units Network studies. Self-reported tobacco exposure data was obtained. Its relationship with the incidence of pPROM and associated neonatal outcome measures were assessed. **Results** There was no difference in the incidence of pPROM when comparing nonsmokers to those using tobacco. Although a trend was seen between the incidence of pPROM and the amount smoked, this did not reach statistical significance. Among the patients with pPROM, the use of tobacco was not associated with an increase in perinatal morbidity. **Conclusion** Our data do not support a significant relationship between tobacco use and pPROM.

<https://www.thieme-connect.de/ejournals/abstract/10.1055/s-0032-1322517>

Altered spontaneous activity in young chronic cigarette smokers revealed by regional homogeneity

[Behav Brain Funct.](#) 2012 Aug 22;8(1):44. [Epub ahead of print]

[Tang J](#), [Liao Y](#), [Deng Q](#), [Liu T](#), [Chen X](#), [Wang X](#), [Xiang X](#), [Chen H](#), [Hao W](#).

Abstract

BACKGROUND:

Few studies have been previously published about the resting state brain activity in young chronic smokers, although many previous fMRI studies have shown that the task-related activity pattern is altered in chronic smokers.

METHODS:

In the present study, forty-five healthy smokers (age: 27.9 [PLUS-MINUS SIGN] 5.6 year) and forty-four healthy non-smoking control subjects (age: 26.3 [PLUS-MINUS SIGN] 5.8 year) have been imaged with functional magnetic resonance imaging (fMRI) and analyzed with the regional homogeneity (ReHo) approach.

RESULTS:

Compared with healthy controls, decreased ReHo was found in smokers in the right inferior frontal cortex and increased ReHo was found in the left superior parietal lobe ($P < 0.01$, 35 Voxels, Alphasim corrected).

CONCLUSIONS:

Our data suggested that, during resting state, neural function is less synchronized in the right inferior frontal cortex and more synchronized in the left superior parietal lobe in chronic smokers compared to non-smokers. The decreased synchronization in the right inferior frontal cortex may reflect lacking of control over reward-related behavior, and the increased synchronization may reflect smoking urges.

<http://www.behavioralandbrainfunctions.com/content/8/1/44/abstract>

<http://www.behavioralandbrainfunctions.com/content/pdf/1744-9081-8-44.pdf>

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

A randomized controlled trial to assess the efficacy of an interactive mobile messaging intervention for underserved smokers: Project ACTION

BMC Public Health. 2012 Aug 25;12(1):696. [Epub ahead of print]

[Vidrine DJ](#), [Fletcher FE](#), [Danysh HE](#), [Marani S](#), [Irvin Vidrine J](#), [Cantor SB](#), [Prokhorov AV](#).

Abstract**BACKGROUND:**

Despite a significant decrease in smoking prevalence over the past ten years, cigarette smoking still represents the leading cause of preventable morbidity and mortality in the United States. Moreover, smoking prevalence is significantly higher among those with low levels of education and those living at, or below, the poverty level. These groups tend to be confronted with significant barriers to utilizing more traditional smoking cessation intervention approaches. The purpose of the study, Project ACTION (Adult smoking Cessation Treatment through Innovative Outreach to Neighborhoods), is to utilize a mobile clinic model, a network of community sites (i.e., community centers and churches) and an interactive mobile messaging system to reach and deliver smoking cessation treatment to underserved, low-income communities.

METHODS:

We are using a group-randomized design, with the community site as the sampling unit, to compare the efficacy of three smoking cessation interventions: 1) Standard Care - brief advice to quit smoking, nicotine replacement therapy (NRT), and self-help materials; 2) Enhanced Care - standard care components plus a cell phone-delivered text/graphical messaging component; and 3) Intensive Care - enhanced care components plus a series of 11 cell phone-delivered proactive counseling sessions. An economic evaluation will also be performed to evaluate the relative cost effectiveness of the three treatment approaches. We will recruit 756 participants (252 participants in each of the 3 intervention groups). At the time of randomization, participants complete a baseline assessment, consisting of smoking history, socio-demographic, and psychosocial variables. Monthly cell phone assessments are conducted for 6 months-post enrollment, and a final 12-month follow-up is conducted at the original neighborhood site of enrollment. We will perform mixed-model logistic regression to compare the efficacy of the three smoking cessation intervention treatment groups.

DISCUSSION:

It is hypothesized that the intensive care approach will most successfully address the needs of the target population and result in the highest smoking cessation rates. In addition to increasing cessation rates, the intervention offers several features (including neighborhood outreach and use of mHealth technology) that are likely to reduce treatment barriers while enhancing participant engagement and retention to treatment.

Trial registration This randomized controlled trial is registered with clinicaltrials.gov registration number NCT00948129.

<http://www.biomedcentral.com/1471-2458/12/696/abstract>

<http://www.biomedcentral.com/content/pdf/1471-2458-12-696.pdf>

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

Analysing falls in coronary heart disease mortality in the West Bank between 1998 and 2009

BMJ Open. 2012 Aug 24;2(4). pii: e001061. doi: 10.1136/bmjopen-2012-001061. Print 2012.

[Abu-Rmeileh NM](#), [Shoaibi A](#), [O'Flaherty M](#), [Capewell S](#), [Husseini A](#).

Abstract**OBJECTIVES:**

To analyse coronary heart disease (CHD) mortality and risk factor trends in the West Bank, occupied Palestinian territory between 1998 and 2009.

DESIGN:

Modelling study using CHD IMPACT model.

SETTING:

The West Bank, occupied Palestinian territory.

PARTICIPANTS:

Data on populations, mortality, patient groups and numbers, treatments and cardiovascular risk factor trends were obtained from national and local surveys, routine national and WHO statistics, and critically appraised. Data were then integrated and analysed using a previously validated CHD model. PRIMARY AND SECONDARY OUTCOME MEASURES: CHD deaths prevented or postponed are the main outcome.

RESULTS:

CHD death rates fell by 20% in the West Bank, between 1998 and 2009. Smoking prevalence was initially high in men, 51%, but decreased to 42%. Population blood pressure levels and total cholesterol levels also decreased. Conversely, body mass index rose by 1-2 kg/m² and diabetes increased by 2-8%. Population modelling suggested that more than two-thirds of the mortality fall was attributable to decreases in major risk factors, mainly total cholesterol, blood pressure and smoking. Approximately one-third of the CHD mortality decreases were attributable to treatments, particularly for secondary prevention and heart failure. However, the contributions from statins, surgery and angioplasty were consistently small.

CONCLUSIONS:

CHD mortality fell by 20% between 1998 and 2009 in the West Bank. More than two-third of this fall was due to decreases in major risk factors, particularly total cholesterol and blood pressure. Our results clearly indicate that risk factor reductions in the general population compared save substantially more lives to specific treatments for individual patients. This emphasizes the importance of population-wide primary prevention strategies.

<http://bmjopen.bmj.com/content/2/4/e001061.long>

<http://bmjopen.bmj.com/content/2/4/e001061.full.pdf+html>

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

Serum heavy metals and obstructive lung disease: Results from the National Health and Nutrition Examination Survey (NHANES)

Chest. 2012 Aug 13. doi: 10.1378/chest.12-0595. [Epub ahead of print]

[Rokadia H, Agarwal S.](#)

Abstract

BACKGROUND Exposure to hazardous heavy metals like cadmium and lead has been associated with several chronic diseases. Heavy metal exposure may contribute to increased oxidative stress and inflammation in the lungs resulting in tissue destruction manifesting clinically as obstructive lung disease (OLD). We aimed to evaluate the association between serum cadmium and lead concentration and OLD. **METHODS** Pooled cross-sectional data from the National Health and Nutrition Examination Survey (NHANES) 2007-2010 were used. OLD was defined as FEV1/FVC ratio \leq 0.7 by spirometry. Active smokers were defined as self-reported current smokers or measured serum cotinine \geq 10ng/mL. Serum cadmium and lead levels were measured using mass spectrometry. **RESULTS** The prevalence (95% CI) of OLD was 12.4% (10.2 - 13.6%). The mean (SE) cadmium levels in the OLD group were significantly higher in comparison to normal controls [0.51 (1.04) versus 0.33 (1.02): $p \leq 0.001$]. Similarly, mean (SE) serum lead was significantly higher in the OLD group compared to the control population [1.73 (1.02) versus 1.18 (1.0): $p \leq 0.001$]. The association between OLD and smoking was significantly attenuated after adjusting for serum cadmium concentration. In addition, we demonstrated a progressive increase in serum cadmium concentrations with worsening FEV1% predicted values among smokers in our study population. **CONCLUSION** In a large representative sample of the US population, we demonstrated a significant association of OLD with serum cadmium and lead concentrations. Cadmium appeared to partially mediate the association between smoking and OLD. A dose-response effect was observed in smokers between increasing cadmium concentration and progressively worsening lung function.

<http://journal.publications.chestnet.org/article.aspx?articleid=1345144>
<http://journal.publications.chestnet.org/data/Journals/CHEST/0/chest.12-0595.pdf>

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

Evaluation of micronuclei in tobacco users: A study in Punjabi population

[Contemp Clin Dent](#). 2012 Apr;3(2):184-7.

[Bansal H](#), [Sandhu VS](#), [Bhandari R](#), [Sharma D](#).

Abstract

INTRODUCTION:

The assessment of micronuclei in exfoliated cells is a promising tool for the study of epithelial carcinogens and can be used to detect chromosome breakage or mitotic interference, thought to be relevant to carcinogenesis.

AIM:

The present study aimed to detect micronuclei in exfoliated oral mucosal cells in individuals using various tobacco forms from the last 5 years.

MATERIALS AND METHODS:

A total of 75 healthy male subjects (25 smokeless tobacco users, 25 smokers, and 25 non-tobacco users) were selected for the study. Smears were obtained with moistened wooden spatula from buccal mucosa and fixed with 95% alcohol. All the cytologic smears were stained by Papanicolaou technique. From each slide, ~1000 cells were examined under the 400× magnification and where micronucleated (MN) cells were located, they were examined under the 1000× magnification.

RESULT:

MN cells were found to be significantly higher in smokeless tobacco users than in smokers and controls.

CONCLUSION:

A positive correlation is found between increased micronucleus frequency and tobacco-using habits. So micronucleus assay can be used as a biomarker of genotoxicity.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3425103/>

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

Tobacco Control: Reflections on Our Mistakes and Those Who Made Them

[Curr Oncol Rep](#). 2012 Aug 26. [Epub ahead of print]

[Gray N](#)

In 2000, upon standing down from what could be reasonably seen as a leadership position in the world of tobacco control, I wrote an article in which I confessed to some of my mistakes [1] and was rewarded by favourable comments from some of my colleagues for my honesty. Now, 12 years later, this invited commentary offers an opportunity to reflect on the mistakes (as well as some of the successes) that the global tobacco control movement (TCM) has made, and to pay tribute to some of those who took us forward.

In focussing on mistakes, I intend to be selective but should not be seen as a critic of the remarkable progress we have made in controlling the marketing and use of tobacco up to the present point where we are seeing the recent Australian legislation for plain packaging tested in the courts by the tobacco industry. In particular, I pay tribute to the development of behavioural science and

the way in which it has been applied to bring political progress...

Arriving at the year 2012, the world has changed. Tobacco products are now subject to regulatory control in Canada and the USA and the approach taken by TobReg will receive attention. I am aware that a significant number of members of the TCM are apprehensive at the thought of regulating something as complex as tobacco and tobacco smoke, and have even heard suggestions that regulatory changes might make things worse by changing the basis of cigarette design. These fears are surely groundless in that they ignore the fact that we have removed lead and benzene from petrol, removed nitrogen oxides and sulphides from car exhausts, eradicated certain refrigerants to protect the ozone layer and reduced the levels of PAHs from coal-fired electricity generators. No example exists of carcinogen removal making a product worse...

<http://www.springerlink.com/content/g24w7q0j3734u216/>

Racial discrimination, racial/ethnic segregation, and health behaviors in the CARDIA study

[Ethn Health](#). 2012 Aug 22. [Epub ahead of print]

[Borrell LN](#), [Kiefe CI](#), [Diez-Roux AV](#), [Williams DR](#), [Gordon-Larsen P](#).

Abstract

Objectives. Racial discrimination has been associated with unhealthy behaviors, but the mechanisms responsible for these associations are not understood and may be related to residential racial segregation. We investigated associations between self-reported racial discrimination and health behaviors before and after controlling for individual- and neighborhood-level characteristics; and potential effect modification of these associations by segregation. **Design.** We used data from the longitudinal Coronary Artery Risk Development in Young Adults (CARDIA) study for 1169 African-Americans and 1322 whites. To assess racial discrimination, we used a four category variable to capture the extent and persistence of self-reported discrimination between examination at years 7 (1992-1993) and 15 (2000-2001). We assessed smoking status, alcohol consumption, and physical activity at year 20 (2005-2006). Segregation was examined as the racial/ethnic composition at the Census tract level. **Results.** Discrimination was more common in African-Americans (89.1%) than in whites (40.0%). Living in areas with high percentage of blacks was associated with less reports of discrimination in African-Americans but more reports in whites. After adjustment for selected characteristics including individual- and neighborhood-level socioeconomic conditions and segregation, we found significant positive associations of discrimination with smoking and alcohol consumption in African-Americans and with smoking in whites. African-Americans experiencing moderate or high discrimination were more physically active than those reporting no discrimination. Whites reporting some discrimination were also more physically active than those reporting no discrimination. We observed no interactions between discrimination and segregation measures in African-Americans or whites for any of the three health behaviors. **Conclusions.** Racial discrimination may impact individuals' adoption of healthy and unhealthy behaviors independent of racial/ethnic segregation. These behaviors may help individuals buffer or reduce the stress of discrimination.

<http://www.tandfonline.com/doi/abs/10.1080/13557858.2012.713092>

The effect of stimulants and their combined use with cigarettes on mortality: the case of betel quid

[Eur J Health Econ](#). 2012 Aug 21. [Epub ahead of print]

[Keng SH](#), [Sheu SJ](#).

Abstract

Ten percent of the world's population use betel quid, making betel quid the fourth most used substance in the world. In Taiwan, there are an estimated 1.5 million users and the majority of them are also smokers. The number of people who died from oral cancer rose more than five times over the period from 1987 to 2006. In this study, we employ propensity score matching and the Weibull hazard model with instrumental variables to examine the health effects of betel quid chewing, in particular the health effect of its combined use with cigarettes. We show that betel quid chewing and smoking have a significant negative effect on health, and that the 10-year death hazard for joint users of betel quid and cigarettes doubles that for abstainers. Moreover, betel quid chewing is as harmful to health as smoking. We also find that betel quid chewing and smoking significantly increase the odds of dying from oral and oesophagus cancers.

<http://www.springerlink.com/content/a758413286j42254/>

Cytogenetic evaluation of pre-pregnancy smoking in maternal and newborn lymphocytes

[Eur J Obstet Gynecol Reprod Biol.](#) 2012 Aug 23. [Epub ahead of print]

[Kareli DE](#), [Pouliliou SE](#), [Nikas IH](#), [Psillaki AN](#), [Galazios GC](#), [Liberis VA](#), [Lialiaris TS](#).

Abstract

OBJECTIVE:

To study cytogenetic damage in order to estimate the effect of pre-pregnancy smoking on pregnant women and their fetuses.

STUDY DESIGN:

Lymphocyte cultures were obtained from peripheral blood of 20 women who quit smoking during pregnancy, and umbilical cord blood of their newborns at delivery. Cytogenetic analyses were performed for sister chromatid exchanges (SCEs), proliferation rate index (PRI) and mitotic index (MI) using the Fluorescence Plus Giemsa staining technique. Twenty non-smoking women and their newborns were evaluated as controls. CPT-11, a known antineoplastic, was used as a positive genotoxic agent in order to correlate non-smoking women with smoking women and reveal any underlying chromosome instability. Statistical evaluation of SCE frequencies, PRI and MI was based on independent samples t-test in order to estimate the effect of pre-pregnancy smoking on mothers and their newborns.

RESULTS:

SCEs were induced in the cord blood lymphocytes of newborns whose mothers smoked before pregnancy when they were exposed to the mutagenic agent CPT-11 ($p < 0.01$). A similar increase in SCEs was observed in both non-smoking and smoking mothers exposed to CPT-11. Newborns in both groups had significantly lower SCE levels than their mothers ($p < 0.01$).

CONCLUSION:

Pre-pregnancy smoking results in cytogenetic damage for both mothers and newborns, and is an important risk factor for cancer and/or other genetic-related diseases. Smoking cessation needs to occur well before conception in order to avoid the strong cytogenetic association between pre-pregnancy smoking by mothers and their newborns.

<http://www.ejog.org/article/S0301-2115%2812%2900363-6/abstract>

<http://www.sciencedirect.com/science/article/pii/S0301211512003636>

Smoking cessation strategies in patients with chronic obstructive pulmonary disease

Eur Respir J published 30 August 2012, 10.1183/09031936.00014012

M.J. Warnier, E.E.S.van Riet, F.H. Rutten, M.L.De Bruin, and A.P.E. Sachs

Abstract

Smoking cessation is the cornerstone of treatment of chronic obstructive pulmonary disease (COPD) patients. This systematic review evaluates the effectiveness of behavioural and pharmacological smoking cessation strategies in COPD patients.

Medline was searched from January 2002 to October 2011. Randomized controlled trials, evaluating the effect of smoking cessation interventions for COPD patients, published in English, were selected. Methodological quality of included trials was assessed with the Delphi List by two reviewers independently. Relative risks of smoking cessation of intervention compared to controls were calculated.

Eight studies met the inclusion criteria. Heterogeneity was observed for study population, the intervention strategy, the follow up period and the outcome. According to the Delphi List methodological quality scores, five studies were considered to be of acceptable quality. Pharmacological therapy combined with behavioural counselling was more effective than each strategy separately. In COPD patients, the intensity of counselling did not seem to influence the results, nor did the choice of drug therapy make a difference.

This systematic review makes clear that in COPD patients, pharmacological therapy combined with behavioural

counselling is more effective than each strategy separately. The intensity of counselling nor the type of anti-smoking drug made a difference.

<http://erj.ersjournals.com/cgi/content/abstract/09031936.00014012v1>

Smoking and the subgingival ecosystem: a pathogen-enriched community

Future Microbiol. 2012 Aug;7:917-9.

[Kumar PS.](#)

For the better part of the 20th century, the effect of tobacco smoking on the periodontium was largely ignored. Research during this era combined smokers and nonsmokers into a single group [1,2] resulting in a distorted perception of the etiology of the disease and, by extension, its treatment. Hence, smoking-related periodontitis has been called the 'hidden epidemic of the 20th century' [3]. However, investigations over the past few decades have established that 41.9% of periodontitis is attributable to smoking [4], and that smokers have a clinically distinct presentation of periodontitis, with deeper pockets, more extensive and severe attachment loss, and greater levels of bone destruction than nonsmokers [5-7]. The risk for periodontal disease increases 5-15-fold in smokers, being proportional to the duration and amount of smoking [4]. With over 1.2 billion adult smokers worldwide [8], and annual expenditure on treatment and prevention of periodontitis exceeding US\$14 billion in the USA alone [9], the 'hidden epidemic of the 20th century' has become a serious public health concern that demands urgent attention...

One of the difficulties associated with establishing a causal role for smoking in altering the subgingival biofilm lies in demonstrating that the causal agent (smoking) predated the condition (change in microbial profile). Since this is impossible to achieve in humans, we have longitudinally examined the responses of health and disease-associated subgingival microbial communities to smoking cessation. Within 3 months of quitting smoking, changes can be observed in the subgingival microbiome [18]. The microbial community shifts from a pathogen-enriched biofilm containing high levels of *Parvimonas micra*, *Treponema denticola* and *Filifactor alocis* to a health-compatible community with higher levels of *Veillonella parvula* [19]. It is important to validate these findings with a large sample size and comprehensive bacterial characterization methods.

So when does the pathogen enrichment occur? Bacteria colonize the oral cavity within a few hours after birth. Colonization of the gingival crevice occurs initially by bacterial interactions with the tooth and later by interbacterial interactions, leading to the formation of an organized, cooperating community called the biofilm [20]. This biofilm plays an important role in maintaining oral health by maintaining low levels of pathogenic bacteria and by educating the immune system. Current evidence indicates that pathogen enrichment occurs within 24-h of biofilm formation in smokers [21]. Smoking also appears to prevent a stable bacterial colonization in the biofilm, leading to lower levels of health-compatible colonizers. Thus, smoking appears to impact biofilm formation from the moment of its development, changing it from a health-compatible community to a pathogen-enriched community, predisposing the individual to periodontal disease.

<http://www.futuremedicine.com/doi/full/10.2217/fmb.12.71>

<http://www.futuremedicine.com/doi/pdf/10.2217/fmb.12.71>

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

Reaching Jewish ultra-orthodox adolescents: results from a targeted smoking prevention trial

Int J Adolesc Med Health. 2011 Nov 29;24(2):173-9. doi: 10.1515/ijamh.2012.026.

[Knishkowsky B](#), [Verbov G](#), [Amitai Y](#), [Stein-Zamir C](#), [Rosen L](#).

Abstract

Background: Ultra-orthodox, Jewish adolescent boys are considered to have relatively high smoking rates, but are generally not targeted by Israel's smoking prevention programs. **Objective:** The objective of this trial was to test the effectiveness of a religion-based tobacco control intervention in reducing smoking prevalence among these youth. **Methods:** The study population participants were 340 boys from 63 religious boys' schools in Jerusalem. The intervention consisted of a mailing that included a pamphlet describing the health effects of and rabbinical prohibitions on smoking. A cluster randomized trial was conducted between March and May, 2005. The primary endpoint was current smoking status. Secondary endpoints were future intent to smoke and attitudes towards smoking. Generalized estimating equations and mixed models of analysis of variance were used to perform the analyses. **Results:** The intervention did not significantly affect current smoking, intent to smoke or attitudes towards smoking. Prevalence of smoking and future

intent to smoke were higher in schools without enforced smoking regulations [odds ratio (OR) 2.74, $p=0.026$, OR 3.38, $p=0.018$]. Increased smoking prevalence was associated with a high prevalence of smoking among friends ($p=0.031$) and not finding smoking repulsive ($p=0.024$). Conclusions: This study adds to the public health literature linking smoke-free schools and peer influences to adolescent smoking. Pamphlets containing rabbinic prohibitions on smoking initiation did not affect smoking behavior or intent to smoke.

<http://www.degruyter.com/view/j/ijamh.2012.24.issue-2/ijamh.2012.026/ijamh.2012.026.xml>

Axis II Disorders and Cigarette Smoking Among Adults from the General Population

[J Pers Disord.](#) 2012 Aug 28. [Epub ahead of print]

[Becoña E](#), [Del Río EF](#), [López-Durán A](#), [Piñeiro B](#), [Martínez U](#).

Abstract

The present study examined whether personality disorders (PDs) are associated with cigarette smoking, and the possible influence of nicotine dependence, sociodemographic variables, and the presence of any lifetime Axis I mental disorder in these relationships. The sample was made up of 1,081 adult participants from the Spanish general population and was stratified by smoking status (519 smokers and 562 non-smokers). PDs were assessed by means of the International Personality Disorder Examination Questionnaire, Module DSM-IV. Results indicated that participants with a paranoid, a narcissistic, a borderline, an antisocial, or an obsessive-compulsive PD had a higher probability for being smokers and for being nicotine-dependent. The only exception was the schizoid PD, because participants with this Axis II disorder had a lower probability for being nicotine-dependent smokers. The association between PDs and smoking was maintained even after adjusting for all covariates. Findings are discussed in relation to the influence of Axis II disorders on smoking cessation interventions.

<http://guilfordjournals.com/doi/abs/10.1521/pedi.2012.26.051>

Religion and Selected Health Behaviors Among Latinos in Texas

[J Relig Health.](#) 2012 Aug 22. [Epub ahead of print]

[Garcia G](#), [Ellison CG](#), [Sunil TS](#), [Hill TD](#).

Abstract

Though research has shown that religion provides a protective influence with respect to a number of health-related outcomes, little work has examined its influence on patterns of alcohol (especially binge drinking) and tobacco consumption among Latinos in Texas. Thus, we used a probability sample of Texas adults to test this relationship via logistic regression. Our results revealed that clear distinctions emerge on the basis of both denomination and frequency of attendance. Specifically, Protestants who regularly attend religious services are significantly more likely to be abstainers and to have never smoked, while those with no religious affiliation exhibit relatively unfavorable risk profiles. These findings persist despite a range of socio-demographic controls. Our study supports the assertion that religion may serve as an important protective influence on risky health behaviors.

<http://www.springerlink.com/content/n209577128367276/>

Impact of smoking cessation on the risk of subarachnoid haemorrhage: a nationwide multicentre case control study

[J Neurol Neurosurg Psychiatry](#) Published Online First: 30 August 2012 doi:10.1136/jnnp-2012-302538

Chi Kyung Kim, Beom Joon Kim, Wi-Sun Ryu, Seung-Hoon Lee, Byung-Woo Yoon

Abstract

Background and purpose Subarachnoid haemorrhage (SAH) is the most devastating cerebrovascular disease. Cigarette smoking is one of the established risk factors for SAH, but the risk of SAH has not been properly elucidated in relation to smoking cessation.

Methods We performed a nationwide multicentre case control study involving 33 hospitals in Korea. A total of 426 SAH cases and 426 age and sex matched controls were enrolled. We obtained detailed information on lifestyle, medical history and, in particular, smoking habits from participants using structured questionnaires.

Results 148 SAH patients (37.4%) were current smokers compared with 103 (24.2%) controls, giving an adjusted OR of 2.84 (95% CI, 1.63 to 4.97) after controlling for possible confounders. Based on cumulative dose of smoking (pack years), the risk of SAH was found to increase in a dose-responsive fashion. Smoking cessation (≥ 5 years) caused a reduction in SAH to 59% ($p < 0.05$). However, participants with a history of heavy smoking (≥ 20 cigarettes per day) had a 2.3 times increased risk of SAH compared with participants who had never smoked ($p < 0.05$).

Conclusions We have demonstrated that cigarette smoking increases the risk of SAH, but smoking cessation decreases the risk in a time dependent manner, although this beneficial effect may be diminished in previous heavy smokers. To forestall tragic SAH events, our results call for more global and vigorous efforts for people to stop smoking.

<http://jnnp.bmj.com/content/early/2012/08/02/jnnp-2012-302538.abstract>

Related news coverage & PR:

Smoking increases brain bleed risk

http://www.google.com/hostednews/ukpress/article/ALeqM5h0_oVxDU29oJ4bLISUgcWEYXIrUA

Smoking more than 20 cigarettes a day triples chance of brain haemorrhage

<http://www.dailymail.co.uk/health/article-2195585/Smoking-20-cigarettes-day-triples-chance-brain-haemorrhage.html>

Smokers More Than Double Their Risk of Burst Aneurysm

<http://www.sciencedaily.com/releases/2012/08/120829195212.htm>

Differential Effects of Nicotine Treatment and Ethanol Self-administration on CYP2A6, CYP2B6 and Nicotine Pharmacokinetics in African Green Monkeys

J Pharmacol Exp Ther published 30 August 2012, 10.1124/jpet.112.198564

Charmaine S Ferguson, Sharon Miksys, Roberta M Palmour, and Rachel F Tyndale

Abstract

In primates, nicotine is metabolically inactivated in the liver by CYP2A6 and possibly CYP2B6. Changes in the levels of these two enzymes may impact nicotine pharmacokinetics and influence smoking behaviors. This study investigated the independent and combined effects of ethanol self-administration and nicotine treatment (0.5 mg/kg bid s.c.) on hepatic CYP2A6 and CYP2B6 levels (mRNA, protein and enzymatic activity), in vitro nicotine metabolism and in vivo nicotine pharmacokinetics in monkeys. CYP2A6 mRNA and protein levels, and in vitro coumarin (selective CYP2A6 substrate) and nicotine metabolism were decreased by nicotine treatment but unaffected by ethanol. CYP2B6 protein levels and in vitro bupropion (selective CYP2B6 substrate) metabolism were increased by ethanol but unaffected by nicotine treatment; CYP2B6 mRNA levels were unaltered by either treatment. Combined ethanol and nicotine exposure decreased CYP2A6 mRNA and protein levels, as well as in vitro coumarin and nicotine metabolism, and increased CYP2B6 protein levels and in vitro bupropion metabolism, with no change in CYP2B6 mRNA levels. Chronic nicotine resulted in higher nicotine plasma levels achieved after nicotine administration, consistent with decreased CYP2A6. Ethanol alone, or combined ethanol and nicotine, resulted in lower nicotine plasma levels by a mechanism independent of the change in these enzymes. Thus, nicotine can decrease hepatic CYP2A6 reducing the metabolism of its substrates, including nicotine, while ethanol can increase hepatic CYP2B6 increasing the metabolism of CYP2B6 substrates. In vivo nicotine pharmacokinetics are differentially affected by ethanol and nicotine, but when both drugs are used in combination the effect more closely resembles ethanol alone.

<http://jpet.aspetjournals.org/cgi/content/abstract/jpet.112.198564v1>

Inhibition of apolipoprotein A-I gene by the aryl hydrocarbon receptor: A potential mechanism for smoking-associated hypoaliproteinemia

Life Sciences

Volume 91, Issues 1–2, 26 July 2012, Pages 64–69

[Emad Naem](#), [Rosalyn Alcalde](#), [Margaret Gladysz](#), [Sandra Mesliniene](#), [Sarada Jaimungal](#), [Mae Sheikh-Ali](#), [Michael J. Haas](#), [Norman C.W. Wong](#), [Arshag D. Mooradian](#)

Abstract**Aims**

Smokers have lower plasma concentrations of high-density lipoprotein (HDL) cholesterol and apolipoprotein A-I (apo A-I) compared with nonsmokers. To determine the molecular basis of this observation, the effect of activation of the aryl hydrocarbon receptor (AhR) on apo A-I gene expression was examined.

Main methods

HepG2 cells were treated with AhR receptor agonists benzo(a)pyrene (BaP) and CAY10465, and AhR receptor antagonist CAY10464 and apo A-I protein, mRNA levels and promoter activity were measured. The effect of nicotine on apo A-I protein secretion was also tested. Using a series of apo A-I gene promoter deletion constructs, a xenobiotic response element (XRE) was identified.

Key findings

Treatment of HepG2 cells with the AhR receptor agonists BaP and CAY10465, inhibited apo A-I protein synthesis while nicotine, which does not bind AhR had no effect. Benzo(a)pyrene treatment also suppressed apo A-I mRNA and gene promoter activity. Treatment of HepG2 cells with the AhR receptor antagonist CAY10464 reversed the suppressive effect of BaP on apo A-I gene expression. A putative xenobiotic response element (XRE) was identified between nucleotides – 325 and – 186 (relative to the transcriptional start site, + 1).

Significance

These results suggest that the cigarette smoking related environmental contaminant BaP promotes hypoalphalipoproteinemia in part through activation of the hepatic AhR.

<http://www.sciencedirect.com/science/article/pii/S0024320512002974>

Related coverage:

Researchers ID chemical in cigarette smoke linked to lowered levels of 'good' cholesterol

<http://medicalxpress.com/news/2012-08-id-chemical-cigarette-linked-lowered.html>

Actions reducing tobacco smoking at the workplace--do larger and richer companies solve the problem better?

[Med Pr. 2012;63\(3\):257-70.](#)

[Puchalski K, Korzeniowska E.](#)

Abstract**BACKGROUND:**

Workplaces are an important subject of state policy regarding smoking. They are obliged to comply with the prohibition of smoking in public places, except special smoking-rooms--if the employer decides to create such. This paper discusses the Polish enterprises activity in relation to smoking, according to new legal obligations and principles of health promotion programs. Furthermore, the article raises the question whether companies' size and economic situation differentiate their attitude to smoking.

MATERIAL:

1002 interviews (computer-assisted telephone interview - CATI) conducted in November/December 2010 (date of entry into force of the new law regarding smoking at the workplace) in a representative sample workplace employing above 50 employees.

RESULTS:

A total smoking prohibition applies in 23% of companies, smoking is allowed only in special smoking-rooms and outside the building in 54% of enterprises, in 23% of companies regulations are inconsistent with the state policy (for example smoking allowed in the corridors). Apart from smoking bans, companies introduce disciplinary punishments for breaking them and health education (in the absence of other activities promoting non-smoking). In one in three companies' the management does not enforce the compliance with the introduced regulations. Generally, the management does not see a connection between employees smoking and the functioning of the company. In every second company, employees to a greater or lesser extent break the smoking ban. Companies' economic situation does not differentiate their attitude to the problem, the size of employment only slightly.

CONCLUSIONS:

The results obtained can be used for future evaluation of the effectiveness of the state tobacco control policy and proper direction of the programs aimed at releasing companies from smoke as well as campaigns prepared for employers.

<http://www.ncbi.nlm.nih.gov/pubmed/22880448>

<http://www.medycynapracy.org/>

Increases in Quitline Calls and Smoking Cessation Website Visitors During a National Tobacco Education Campaign — March 19–June 10, 2012

MMWR Weekly

August 31, 2012 / 61(34);667-670

Mass media campaigns and telephone quitlines are effective in increasing cessation rates among cigarette smokers (1–5). During March 19–June 10, 2012, CDC aired Tips from Former Smokers (TIPS), the first federally funded, nationwide, paid-media tobacco education campaign in the United States. The TIPS campaign featured former smokers talking about their experiences living with diseases caused by smoking. The campaign was primarily intended to encourage adult smokers aged 18–54 years to quit by making them aware of the health damage caused by smoking and letting them know that they could call the telephone quitline portal 1-800-QUIT-NOW or visit the National Cancer Institute (NCI) smoking cessation website (<http://www.smokefree.gov>) if they needed free help to quit. The campaign included advertising on national and local cable television, local radio, online media, and billboards, and in movie theaters, transit venues, and print media. To determine the effects of the TIPS campaign on weekly quitline call volume and weekly unique visitors to the cessation website, CDC analyzed call and visitor data immediately before, during, and immediately after the campaign period and compared them with data from the corresponding weeks in 2011. This report summarizes the results of that analysis, which found that the number of weekly calls to the quitline from the 50 states, the District of Columbia, Guam, and Puerto Rico increased 132% (207,519 additional calls) during the TIPS campaign, and the number of unique visitors to the cessation website increased 428% (510,571 additional unique visitors). These results indicate that many smokers are interested in quitting and learning more about cessation assistance, and will respond to motivational messages that include an offer of help...

Reported by

Erik Augustson, Mary Anne Bright, Stephen Babb, Ann Malarcher, Robert Rodes, Diane Beistle, Timothy McAfee, Paul Mowery

This report indicates that an evidence-based national tobacco education media campaign with adequate reach and frequency can lead to substantial increases in calls to a national portal for state quitlines and unique visitors to a cessation website. The increase indicates that many smokers are interested in quitting and in finding out more about cessation assistance, and will respond to motivational messages that include an offer of help. This analysis provides additional evidence that, within the context of comprehensive tobacco control efforts, tobacco education media campaigns are an important intervention for increasing cessation.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6134a2.htm>

<http://www.cdc.gov/mmwr/pdf/wk/mm6134.pdf>

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

A Federal Plan for Ending the Tobacco Epidemic

Nicotine Tob Res (2012) 14 (9): 1006-1011. doi: 10.1093/ntr/nts167 First published online: August 31, 2012

[Howard Koh](#)

...I remember being first introduced to the time-honored hospital teaching ritual of "Attending Rounds." In this exercise, students and interns would present an "interesting patient" to an attending faculty member and, in turn, that professor would lead us in a discussion about optimal patient care and management. I remember being a young intern presenting a new patient with lung cancer. And, in the Attending Rounds, we collectively reviewed the history, the physical exam, the biopsy results, the staging, treatment options, and the grim prognosis. Then, as the session was ending, the Attending concluded—"You know—this is all due to tobacco. Someone should do something about this."

So that's why I am here with you today. Because years later, I can tell you that "someone" is you. And that someone is me. And that someone is all of us gathered here, to support each other to end the tobacco epidemic—the premier public health challenge of our time...

We need to accelerate addiction science and tobacco control research and do so in a transdisciplinary fashion. We need research in basic science, in clinical medicine, in policy, and in public health to employ the concept of disciplinary diversity in our research, from bench to bedside, and from bedside to community. For example, we want to accelerate the development of more effective medications to help smokers quit, which depends on a better understanding of neuropharmacology and the identification of promising molecular targets. We need better translational research to clarify the role that mental illness and other comorbidities play in tobacco use. We need better health services research to identify the best ways to promote effective treatments for the more than 70% of smokers who visit a primary care physician each year ([Fiore et al., 2008](#)). Identifying the most effective clinical treatments for tobacco dependence that can be integrated into busy health care settings is essential for managing the chronic disease of tobacco dependence. And we need more policy research on areas such as pricing, clean indoor air policies, and media strategies used by states and municipalities in their communities.

<http://ntr.oxfordjournals.org/content/14/9/1006.extract>

Also:

2012 SRNT Annual Meeting Summary

<http://ntr.oxfordjournals.org/content/14/9/1003.extract>

Translating science into action: periodontal health through public health approaches

[Periodontol](#) 2000. 2012 Oct;60(1):173-87. doi: 10.1111/j.1600-0757.2012.00451.x

[Jürgensen N](#), [Petersen PE](#), [Ogawa H](#), [Matsumoto S](#).

Abstract

Clinical and public health research data have shown that a number of individual, professional and community health measures may be valuable in preventing the major oral diseases. The fundamental gap in knowledge, however, is not confined to 'what to do' but rather 'how' to translate the scientific findings into effective and sustainable programs for groups and populations. The advances in oral health science have not yet benefitted the poor and disadvantaged population groups around the world to the fullest extent possible and this has led to inequalities in periodontal health as well as in other chronic diseases. Research on the causative role of tobacco use in periodontal disease is strong because of the fact that tobacco-induced disease ultimately may lead to the loss of teeth. Studies also indicate that wound healing may be negatively affected by the use of tobacco. Likewise, research has shown that extreme use of alcohol, poor diet and nutrition, and psychological stress all have negative effects on periodontal health. Research on sociobehavioral risk factors has great implication to prevent periodontal disease. The case for tobacco is illustrated in this report. The global exposure to tobacco use in adults and adolescents is outlined. Because of the global Framework Convention for Tobacco Control (2003), the solid research on the harmful effect of tobacco is now being widely used for public health. The importance of tobacco prevention within the context of health-promoting schools is emphasized. Research on other population-directed strategies and their implications on public health would be instrumental to integrated prevention of chronic disease and periodontal disease. Community interventions and delivery of preventive oral care by oral health services may have positive outcomes for periodontal health but periodontal research needs to be further strengthened by the provision of sound evidence. It is somewhat remarkable that research on true population-directed actions in prevention of periodontal disease is most unusual. The high need for reorientation of periodontal research toward public health is discussed in this report as well as the responsibilities of oral health organizations, research institutions and health

authorities.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1600-0757.2012.00451.x/abstract>

Association of betel nut with carcinogenesis: revisit with a clinical perspective

PLoS One. 2012;7(8):e42759. Epub 2012 Aug 13.

[Sharan RN](#), [Mehrotra R](#), [Choudhury Y](#), [Asotra K](#).

Abstract

Betel nut (BN), betel quid (BQ) and products derived from them are widely used as a socially endorsed masticatory product. The addictive nature of BN/BQ has resulted in its widespread usage making it the fourth most abused substance by humans. Progressively, several additives, including chewing tobacco, got added to simple BN preparations. This addictive practice has been shown to have strong etiological correlation with human susceptibility to cancer, particularly oral and oropharyngeal cancers. The PUBMED database was searched to retrieve all relevant published studies in English on BN and BQ, and its association with oral and oropharyngeal cancers. Only complete studies directly dealing with BN/BQ induced carcinogenesis using statistically valid and acceptable sample size were analyzed. Additional relevant information available from other sources was also considered. This systematic review attempts to put in perspective the consequences of this widespread habit of BN/BQ mastication, practiced by approximately 10% of the world population, on oral cancer with a clinical perspective. BN/BQ mastication seems to be significantly associated with susceptibility to oral and oropharyngeal cancers. Addition of tobacco to BN has been found to only marginally increase the cancer risk. Despite the widespread usage of BN/BQ and its strong association with human susceptibility to cancer, no serious strategy seems to exist to control this habit. The review, therefore, also looks at various preventive efforts being made by governments and highlights the multifaceted intervention strategies required to mitigate and/or control the habit of BN/BQ mastication.

<http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0042759>

Also:

The effect of systematic clinical interventions with cigarette smokers on quit status and the rates of smoking-related primary care office visits

<http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0041649>

Time trends in blood pressure, body mass index and smoking in the Vietnamese population: a meta-analysis from multiple cross-sectional surveys

<http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0042825>

Interaction between Smoking and HLA-DRB1*04 Gene Is Associated with a High Cardiovascular Risk in Brazilian Amazon Patients with Rheumatoid Arthritis

<http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0041588>

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

Piggybacking as a media advocacy strategy to increase enrolments in a gender-oriented smoking cessation programme

Tob Control Published Online First: 31 August 2012

Sandra Noemi Braun, Paola Morello, Adriana Angel, Diego Sanchez Gelos, María V Armaleo

Abstract

Argentina is probably moving to the third phase of the smoking epidemic. Female smoking prevalence is expected to increase over the coming years. In Argentina, smoking cessation programmes usually do not provide specific treatment tailored to women. We implemented a 'piggybacking' media strategy with the goal of announcing the opening of the first gender-oriented smoking cessation programme in Argentina. Piggybacking is a well-known media advocacy strategy in which the newsworthiness of a particular story is increased by releasing it at the same time as a breaking news story about a related topic. We prepared a press release/report about tobacco use among women, as well as our gender-

oriented clinic, for the local news media, which appeared in print around the time a well-known young Argentinean actress died. To assess the impact of this strategy, we reviewed media coverage after the press release was issued. We also compared the number of new participants in our programme during the 4 months before and after the report's publication. During the 4 months following our press release, we found five reports in print media, gave 22 radio and seven television interviews, and found 30 digital media publications drawing on our press release. When comparing the 4 months before with the 4 months after the strategy, new participants in our programme increased by 246.15%. This strategy could be a suitable alternative to other media advocacy strategies to increase the number of new participants in smoking cessation programmes.

<http://tobaccocontrol.bmj.com/content/early/2012/08/30/tobaccocontrol-2012-050506.abstract>

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