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Subject: STAN Bulletin: 35th Edition: 24-September-2012

Smoking & Tobacco Abstracts & News

STAN Bulletin

35th Edition

24-September-2012

Noteworthy:

"The combined effects of past and future changes in obesity and smoking are likely to result in an improvement in US life expectancy over the next 30 years. This improvement occurs because the advantages of reductions in smoking outweigh the penalty imposed by increases in obesity. Over the next decade, however, the combined effects are likely to produce only a very small improvement in mortality for the combined sexes because the heaviest smoking cohorts of American women are still in or approaching the ages of greatest vulnerability to death." [Preston SH, Stokes A, Mehta NK, Cao B. Projecting the Effect of Changes in Smoking and Obesity on Future Life Expectancy in the United States, [NBER](#)]

In the News:

- Canada: Ontario: [Hamilton Spectator: Opinion: Review board should ban smoking in movies for youth](#)
- India: Delhi [Gutka: Capital government to outlaw popular chewing tobacco: Video](#)
- India: [Films will have to show strong editorial justification for smoking scenes](#)
- Malaysia: [The Star: Opinion: Time to increase tax on cigarettes](#)
- Philippines: [WHO charges major source of smuggled cigarettes overseas](#)
- Singapore/Australia: Tasmania: [Smoke-free Generation plan good for image: Video](#)
- S. Africa: [Government aims to stub out tobacco branding, new proposals under review](#)
- Switzerland: [Voters reject full ban on smoking in public spaces; Deep division prior to vote](#)
- Thailand: [Cigarette sales volume dips: Excise hike causes short-term 'anomaly'](#)
- UK: [Imperial Tobacco: Emerging markets help boost revenues](#)
- US: [Home Stress, Work Stress Linked With Increased Smoking \[AJPH: Nelson\]](#)
- US: FTC: [Companies spend less on cigarette, ST promotion in recent years \[Reports: Cigarettes/ST\]](#)

In this Edition:

- Addiction - Borland: Australia: Population-level effects of automated cessation help programs: RCT
- Addiction - Green: Transportation into Narrative Worlds: Entertainment Media Influences on Tobacco Use Implications
- Addict Behav - Ussher: Tobacco withdrawal symptoms & urges to smoke in pregnant versus non-pregnant smokers
- AJPH - King: US: Current Tobacco Use Among Adults: National Adult Tobacco Survey
- AJPH - Max: US: Deaths From Secondhand Smoke Exposure: Economic Implications
- AJPH - Pearson: US: Menthol Cigarette Ban: Impact on Public Opinion & Smokers' Intention to Quit
- Cochrane Data Syst Rev - Coleman: Pharmacological interventions for promoting cessation during pregnancy
- Curr HIV/AIDS Rep - Niaura: US: Strategies to Promote Smoking Cessation Among HIV-infected Individuals
- Eur Psych - Lam: UK: HALS: SHS exposure & mental health: Cross-sectional & prospective analyses
- Food Chem Tox - Flouris: Greece: Acute effects of electronic & tobacco cigarettes on complete blood count
- HEB - Curry: US: Current & Former Smoker Status Nondisclosure to Health Care Providers
- Ind J Chest Dis Allied Sci - Mahmud: Pakistan: Undiagnosed COPD in current or former tobacco smokers with IHD
- Inform Health Soc Care - Vambheim: Norway: Internet cessation support group language use & sense of community
- Int J Gen Med - Okumura: Japan: High outpatient clinic female smoking rate in Mondor's disease
- J Clin Virol - Balique: France: TMV: Tobacco mosaic virus in cigarettes & saliva of smokers
- J Infect - Bonacci: S. Mexico: Smoking impact on pulmonary tuberculosis rates & clinical prognosis
- JPHMP - Ericson: US: Developing Leaders in Priority Populations to Address Tobacco Disparities
- JSAT - Eby: US: NY: Predictors of clinician reactions & outcomes of tobacco-free regulation
- NBER - Preston: US: Projecting the Effect of Changes in Smoking & Obesity on Future Life Expectancy

- Prev Med - Loomis: US: NY: Tobacco retailer density, smoking attitudes, PoS advertising & youth purchasing
- Prev Sci - de Looze: NL: Parenting & Adolescent Risk Behavior: Smoking & Drinking Rules, Cannabis Use & Early Sex
- Science - Trivedi: Chronic Disease Vaccines Need Shot in the Arm: Nabi: NicVax: Nullifying nicotine
- Ther Drug Monit - Koren: NRT: Nicotine-replacement therapy in pregnancy: end of the road?
- Tob Control - Padrón: Spain: Second-hand smoke exposure and psychological distress in adolescents
- Tob Control - Wakefield: Australia: Melbourne: Brand placement on price boards after tobacco display bans: POS audit

Abstracts:

Population-level effects of automated smoking cessation help programs: a randomised controlled trial

Addiction

[Accepted Article. These manuscripts have been accepted, but have not been edited or formatted. They will be published at a future date.](#)

Accepted manuscript online: **20 SEP 2012**

Ron Borland, James Balmford and Peter Benda

Abstract

Aims

To test the population impact of offering automated smoking cessation interventions via the Internet and/or by mobile phone.

Design

Pragmatic randomised controlled trial with 5 conditions: offer of (1) minimal intervention control; (2) QuitCoach personalised tailored Internet-delivered advice program; (3) onQ, an interactive automated text messaging program; (4) an integration of both QuitCoach and onQ; and (5) a choice of either alone or the combined program.

Setting

Australia via a mix of Internet and telephone contacts.

Participants

3530 smokers or recent quitters recruited from those interested in quitting, and seeking self-help resources ($n=1,335$) or cold-contacted from Internet panels ($n=2,195$).

Measurements

Primary outcome was self-report of 6 months sustained abstinence at 7 months post-recruitment.

Findings

Only 42.5% of those offered one of the interventions took it up to a minimal level. The intervention groups combined had a non-significantly higher 6 month sustained abstinence rate than the control (OR= 1.48; 0.98-2.24) (missing cases treated as smokers), with no differences between the interventions. Among those who used an intervention, there was a significant overall increase in abstinence (OR=1.95; 1.04-3.67), but not clearly so when only analysing cases with reported outcomes. Success rates were greater among those recruited after seeking information as compared to those cold-contacted.

Conclusions

Smokers interested in quitting who were randomly assigned to an offer of either the QuitCoach internet-based support programme and/or the onQ text-messaging programme had non-significantly greater odds of quitting for at least 6 months than those randomised to an offer of a simple information website.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.04091.x/abstract>

Also:

Population impact of reimbursement for smoking cessation: A natural experiment in the Netherlands

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.04089.x/abstract>

Transportation into Narrative Worlds: Implications for Entertainment Media Influences on Tobacco Use

Addiction

[Accepted Article. These manuscripts have been accepted, but have not been edited or formatted. They will be published at a future date.](#)

Accepted manuscript online: **20 SEP 2012**

Melanie C. Green and Jenna L. Clark

Abstract

Aims

A growing body of research suggests that smoking portrayals in movies influence adolescent tobacco use. However, the mechanism for this influence remains unclear. The aim of this paper is to provide an overview of research on narrative transportation theory, particularly as applied to movies and smoking. We propose that this theory can provide a valuable framework for guiding research on the role of entertainment media in smoking and other addictive behaviors.

Methods

We review empirical work on transportation theory and highlight the psychological mechanisms underlying transportation effects. "Transportation into narrative worlds" refers to cognitive, emotional, and imagery engagement into a narrative (including movies and entertainment media). We link this work with research on the effects of movie smoking.

Results

Research suggests that individuals who are more highly transported into narratives show greater attitude, belief, and behavior change. Transportation effects work through reducing counterarguing, creating connections (identification and liking) with characters, and increasing perceptions of realism and emotional involvement. We propose several future directions and research challenges for applying a transportation framework to the issue of entertainment media effects on smoking and tobacco disparities. Understanding factors contributing to transportation may provide a more nuanced view of who will be affected by movie smoking, and understanding the psychological processes underlying narrative persuasion may guide intervention efforts.

Conclusions

Narrative transportation theory suggests that individuals' cognitive, emotional, and imagery immersion in a narrative is a key mechanism of attitude, belief, and behavior change. This theory provides a potentially generative and psychologically-grounded framework for increasing knowledge about the boundary conditions and processes underlying the effects of entertainment media on tobacco use.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.04088.x/abstract>

Tobacco withdrawal symptoms and urges to smoke in pregnant versus non-pregnant smokers

[Addict Behav.](#) 2012 Dec;37(12):1353-7. Epub 2012 Jul 23.

[Ussher M](#), [Etter JF](#), [Giatras N](#), [Coleman T](#).

Abstract

We compared tobacco withdrawal in pregnant and non-pregnant smokers abstaining from smoking for 24h. Female smokers completed an internet-based questionnaire, including the Minnesota Nicotine Withdrawal Scale-Revised (MNWS). They also rated additional withdrawal items and strength of urge to smoke. Consenting women were randomized to either: (i) abstain from smoking for 24h or (ii) smoke as usual. After 24h they rated their withdrawal again. We included a 'smoking as usual' group as we wished to establish that smoking abstinence increased withdrawal symptoms. Two-hundred and seventy-five women completed both the initial and the 24h questionnaire and reported abstaining (n=115, 17% pregnant) or smoking (n=160, 21% pregnant) as requested. Exclusively among abstinent smokers, we compared symptoms for the pregnant and non-pregnant groups. After 24h pregnant women had significantly lower scores than non-pregnant women for the mean MNWS (p=0.004) and for three individual MNWS symptoms (angry, p=0.010; anxious, p=0.048; impatient, p=0.011), with adjustments for baseline cigarette consumption and baseline withdrawal scores. Overall, on the first day of smoking abstinence, pregnant women are likely to report less severe tobacco withdrawal than non-pregnant women.

<http://www.sciencedirect.com/science/article/pii/S0306460312002870>

Also:

Mood and smoking behavior: The role of expectancy accessibility and gender

<http://www.sciencedirect.com/science/article/pii/S0306460312002894>

Sensation-seeking predicts initiation of daily smoking behavior among American Indian high school students

<http://www.sciencedirect.com/science/article/pii/S0306460312002638>

Current Tobacco Use Among Adults in the United States: Findings From the National Adult Tobacco Survey

Am J Public Health. Published online ahead of print September 20, 2012: e1-e8. doi:10.2105/AJPH.2012.301002

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

Abstract

Objectives. We assessed the prevalence and sociodemographic correlates of tobacco use among US adults.

Methods. We used data from the 2009–2010 National Adult Tobacco Survey, a national landline and cell phone survey of adults aged 18 years and older, to estimate current use of any tobacco; cigarettes; cigars, cigarillos, or small cigars; chewing tobacco, snuff, or dip; water pipes; snus; and pipes. We stratified estimates by gender, age, race/ethnicity, education, income, sexual orientation, and US state.

Results. National prevalence of current use was 25.2% for any tobacco; 19.5% for cigarettes; 6.6% for cigars, cigarillos, or small cigars; 3.4% for chewing tobacco, snuff, or dip; 1.5% for water pipes; 1.4% for snus; and 1.1% for pipes. Tobacco use was greatest among respondents who were male, younger, of non-Hispanic "other" race/ethnicity, less educated, less wealthy, and lesbian, gay, bisexual, or transgender. Prevalence ranged from 14.1% (Utah) to 37.4% (Kentucky).

Conclusions. Tobacco use varies by geography and sociodemographic factors, but remains prevalent among US adults. Evidence-based prevention strategies are needed to decrease tobacco use and the health and economic burden of tobacco-related diseases.

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.301002>

Deaths From Secondhand Smoke Exposure in the United States: Economic Implications

Am J Public Health. Published online ahead of print September 20, 2012: e1-e8. doi:10.2105/AJPH.2012.300805

Wendy Max, Hai-Yen Sung, and Yanling Shi

Abstract

Objectives. We estimated the number of deaths attributable to secondhand smoke (SHS), years of potential life lost (YPLL), and value of lost productivity for different US racial/ethnic groups in 2006.

Methods. We determined the number of SHS-related deaths among nonsmokers from 2 adult and 4 infant conditions using an epidemiological approach. We estimated adult SHS exposure using detectable serum cotinine. For each death, we determined the YPLL and the value of lost productivity.

Results. SHS exposure resulted in more than 42 000 deaths: more than 41 000 adults and nearly 900 infants. Blacks accounted for 13% of all deaths but 24% to 36% of infant deaths. SHS-attributable deaths resulted in a loss of nearly 600 000 YPLL and \$6.6 billion of lost productivity, or \$158 000 per death. The value of lost productivity per death was highest among Blacks (\$238 000) and Hispanics (\$193 000).

Conclusions. The economic toll of SHS exposure is substantial, with communities of color having the greatest losses. Interventions need to be designed to reduce the health and economic burden of smoking on smokers and nonsmokers alike and on particularly vulnerable groups.

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300805>

Related coverage & PR:

Secondhand Smoke Takes Big Illness, Expense Toll

<http://health.usnews.com/health-news/news/articles/2012/09/20/secondhand-smoke-takes-big-illness-expense-toll>

Secondhand Smoke Takes Large Physical and Economic Toll

<http://www.sciencedaily.com/releases/2012/09/120920164453.htm>

A Ban on Menthol Cigarettes: Impact on Public Opinion and Smokers' Intention to Quit

Am J Public Health. Published online ahead of print September 20, 2012: e1-e8. doi:10.2105/AJPH.2012.300804

[Jennifer L. Pearson](#), [David B. Abrams](#), [Raymond S. Niaura](#), [Amanda Richardson](#), [Donna M. Vallone](#)

Abstract

Objectives. We assessed support for a ban by the Food and Drug Administration on menthol in cigarettes and behavioral intentions among menthol smokers in the event of such a ban.

Methods. We surveyed 2649 never, former, and current smokers and used ordinal logistic regression to calculate weighted point estimates and predictors of support for a menthol ban among the adult population and menthol smokers only. For menthol smokers, we also calculated weighted point estimates and predictors of behavioral intentions.

Results. Overall, 28.2% of adults opposed, 20.0% supported, and 51.9% lacked a strong opinion about a menthol ban. Support was highest among Hispanics (36.4%), African Americans (29.0%), never smokers (26.8%), and respondents with less than a high school education (28.8%). Nearly 40% of menthol smokers said they would quit if menthol cigarettes were no longer available, 12.5% would switch to a nonmenthol brand, and 25.2% would both switch and try to quit.

Conclusions. Support for a menthol ban is strongest among populations with the highest prevalence of menthol cigarette use. A menthol ban might motivate many menthol smokers to quit.

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300804>

Related coverage & PR:

Many Menthol Smokers Say They Would Quit If Menthols Were No Longer Available

<http://www.heraldonline.com/2012/09/20/4279649/many-menthol-smokers-say-they.html>

Pharmacological interventions for promoting smoking cessation during pregnancy

[Cochrane Database Syst Rev](#). 2012 Sep 12;9:CD010078.

Abstract**BACKGROUND:**

Smoking in pregnancy is a substantial public health problem. When used by non-pregnant smokers, pharmacotherapies [nicotine replacement therapy (NRT), bupropion and varenicline] are effective treatments for smoking cessation, however, their efficacy and safety in pregnancy remains unknown.

OBJECTIVES:

To determine the efficacy and safety of smoking cessation pharmacotherapies, including NRT, varenicline and bupropion (or any other medications) when used to support smoking cessation in pregnancy.

SEARCH METHODS:

We searched the Pregnancy and Childbirth Group's Trials Register (5 March 2012), checked references of retrieved studies and contacted authors in the field.

SELECTION CRITERIA:

Randomised controlled trials (RCTs) with designs that permit the independent effects of any type of NRT (e.g. patch, gum etc.) or any other pharmacotherapy on smoking cessation to be ascertained were eligible for inclusion. Trials must provide very similar (ideally identical) levels of behavioural support or cognitive behaviour therapy (CBT) to participants in active drug and comparator trial arms. The following RCT designs are considered acceptable. Placebo RCTs: any form of NRT or other pharmacotherapy, with or without behavioural support/CBT, or brief advice compared with placebo NRT and additional support of similar intensity. RCTs providing a comparison between i) behavioural support/CBT or brief advice and ii) any form of NRT or other pharmacotherapy added to behavioural support of similar (ideally identical) intensity. Parallel- or cluster-randomised design trials are eligible for inclusion. However, quasi-randomised, cross-over and within-participant designs are not eligible for inclusion due to the potential biases associated with these designs.

DATA COLLECTION AND ANALYSIS:

Two review authors independently assessed trials for inclusion and risk of bias and extracted data. Two assessors independently extracted data and cross checked individual outcomes of this process to ensure accuracy. The primary efficacy outcome was smoking cessation in later pregnancy (in all but one trial, at or around delivery); safety was assessed by seven birth outcomes that indicated neonatal well being and we also collated data on adherence.

MAIN RESULTS:

Six trials of NRT enrolling 1745 pregnant smokers were included; we found no trials of varenicline or bupropion. No statistically significant difference was seen for smoking cessation in later pregnancy after using NRT as compared to control (risk ratio (RR) 1.33, 95% confidence interval (CI) 0.93 to 1.91, six studies, 1745 women). Subgroup analysis comparing placebo-RCTs with those which did not use placebos found that efficacy estimates for cessation varied with trial design (placebo RCTs, RR 1.20, 95% CI 0.93 to 1.56, four studies, 1524 women; non-placebo RCTs, RR 7.81, 95% CI 1.51 to 40.35, two studies, 221 women; P value for random-effects subgroup interaction test = 0.03). There were no statistically significant differences in rates of miscarriage, stillbirth, premature birth, birthweight, low birthweight, admissions to neonatal intensive care or neonatal death between NRT or control groups.

AUTHORS' CONCLUSIONS:

Nicotine replacement therapy is the only pharmacotherapy for smoking cessation that has been tested in RCTs conducted in pregnancy. There is insufficient evidence to determine whether or not NRT is effective or safe when used to promote smoking cessation in pregnancy or to determine whether or not using NRT has positive or negative impacts on birth outcomes. Further research evidence of efficacy and safety is needed, ideally from placebo-controlled RCTs that investigate higher doses of NRT than were tested in the included studies.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD010078/abstract>

Also:

Silver acetate for smoking cessation

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD000191.pub2/abstract>

Interventions to Address Chronic Disease and HIV: Strategies to Promote Smoking Cessation Among HIV-infected Individuals

[Curr HIV/AIDS Rep.](#) 2012 Sep 13. [Epub ahead of print]

[Niaura R](#), [Chander G](#), [Hutton H](#), [Stanton C](#).

Abstract

Tobacco use, especially cigarette smoking, is higher than average in persons living with HIV/AIDS (PLWHA). The Public Health Service Clinical Practice Guideline for Treating Tobacco Use and Dependence states that, during every medical encounter, all smokers should be offered smoking cessation counseling, along with approved medications. The Guideline also recognizes PLWHA as a priority population, given the scarcity of research on effective cessation treatments in this group. The scant evidence suggests that conventional treatments, though worthwhile, are not as successful as might be hoped for. The reasons for this are not entirely clear, but may have to do with the complex array of medical and psychosocial factors that complicate their lives. Clinicians should consider re-treatment strategies for those patients who encounter difficulty when quitting smoking with conventional approaches, switching or augmenting treatments as needed to minimize adverse experiences, and to maximize tolerability, adherence, and cessation outcomes.

<http://www.springerlink.com/content/h08004143116117/>

Association of secondhand smoke exposure with mental health in men and women: Cross-sectional and prospective analyses using the UK Health and Lifestyle Survey

[Eur Psychiatry.](#) 2012 Sep 6. [Epub ahead of print]

[Lam E](#), [Kvaavik E](#), [Hamer M](#), [Batty GD](#).

Abstract

OBJECTIVES:

We examine cross-sectional and prospective associations between objectively measured SHS exposure and mental health using data from the Health and Lifestyle Survey (HALS), a large, UK-wide, general population-based, prospective cohort study with measurements of carbon monoxide or salivary cotinine levels.

METHODS:

Mental health was assessed using the 30-item version of the General Health Questionnaire (GHQ). Multivariate logistic regression models adjusting for age, sex, height, body mass index, alcohol intake, social status, and longstanding illness were used to analyze the association between exposure to SHS (exhaled CO and salivary cotinine categories) and psychological distress (≥ 5 GHQ).

RESULTS:

Fully adjusted cross-sectional analysis revealed a positive relationship between exhaled carbon monoxide and psychological distress among smokers (OR 1.36; 95% CI 1.04-1.78) but not among non-smoking adults. In a similar cross-sectional analysis between cotinine level and psychological distress, non-significant associations were found among smokers and non-smokers. Prospective analyses of the cotinine-psychological distress relationship among participants without psychological distress at baseline showed no significant increased risk of psychological distress among both smokers and non-smokers. In a prospective analysis of poor mental health outcome with respect to self-report smoking and SHS status, smokers had an increased risk of psychological distress while SHS and non-smokers did not.

CONCLUSIONS:

A non-significant association between objectively measured SHS exposure and poor mental health was found in this study. Our findings show discrepancies with recent studies suggesting the need for additional future research in this growing field of study.

<http://www.sciencedirect.com/science/article/pii/S0924933812000430>

Acute effects of electronic and tobacco cigarette smoking on complete blood count

[Food and Chemical Toxicology](#)

[Volume 50, Issue 10, October 2012, Pages 3600–3603](#)

[Andreas D. Flouris](#), [Konstantina P. Poulianiiti](#), [Maria S. Chorti](#), [Athanasios Z. Jamurtas](#), [Dimitrios Kouretas](#), [Emmanuel O. Owolabi](#), [Manolis N. Tzatzarakis](#), [Aristidis M. Tsatsakis](#), [Yiannis Koutedakis](#)

Abstract

The World Health Organisation called for research assessing the safety of electronic cigarette (e-cigarette). We evaluated the acute effect of active and passive e-cigarette and tobacco cigarette smoking on complete blood count (CBC) markers in 15 smokers and 15 never-smokers, respectively. Smokers underwent a control session, an active tobacco cigarette smoking session, and an active e-cigarette smoking session. Never-smokers underwent a control session, a passive tobacco cigarette smoking session, and a passive e-cigarette smoking session. The results demonstrated that CBC indices remained unchanged during the control session and the active and passive e-cigarette smoking sessions ($P > 0.05$). Active and passive tobacco cigarette smoking increased white blood cell, lymphocyte, and granulocyte counts for at least one hour in smokers and never smokers ($P < 0.05$). It is concluded that acute active and passive smoking using the e-cigarettes tested in the current study does not influence CBC indices in smokers and never smokers, respectively. In contrast, acute active and passive tobacco cigarette smoking increase the secondary proteins of acute inflammatory load for at least one hour. More research is needed to evaluate chemical safety issues and other areas of consumer product safety of e-cigarettes, because the nicotine content in the liquids used may vary considerably.

<http://www.sciencedirect.com/science/article/pii/S0278691512005030>

Nondisclosure of Smoking Status to Health Care Providers Among Current and Former Smokers in the United States

[Health Educ Behav](#). 2012 Sep 14. [Epub ahead of print]

[Curry LE](#), [Richarson A](#), [Xiao H](#), [Niaura RS](#).

Abstract

An unintended consequence of tobacco control's success in marginalizing smoking is that smokers may conceal their smoking from those who are best positioned to help them quit: health care providers (HCPs). The purpose of this study was to identify the prevalence of, and factors related to, nondisclosure of smoking to HCPs. Data were obtained from a cross-sectional survey of adults from a nationally representative Knowledge Networks online panel in March to April 2011. Current and former smokers ($n = 2,803$) were asked questions about nondisclosure, tobacco use, cessation behavior, and perceived social unacceptability of smoking. All variables significantly related ($p < .05$) to nondisclosure in bivariate logistic regression were included in the multivariate logistic regression model, which also adjusted for gender, age, race, marital status, and education. Approximately 1 in 10 smokers (12.9%) and 5.8% of former smokers has withheld their smoking status from HCPs. Ever smokers who were 18 to 34 years, those who had used a prescription medication or behavioral therapy in their last quit attempt, and those who were uncomfortable discussing smoking with their HCP were more likely to report nondisclosure than those in their respective comparison groups. Respondents who perceived either medium or high smoker-related stigma (odds ratio [OR] = 1.70, 95% confidence interval [CI] = 1.05, 2.77 and OR = 2.60, 95% CI = 1.51, 4.48, respectively) and those who reported concealing smoking to gain benefits from health insurance were also significantly more likely to have kept smoking a secret from an HCP (OR = 5.66, 95% CI = 1.88, 17.02). Smokers should be encouraged to be forthright about their smoking in order for practitioners to offer treatment and services that increase their chances of quitting.

<http://heb.sagepub.com/content/early/2012/09/13/1090198112454284.abstract>

Comparison of frequency of undiagnosed chronic obstructive pulmonary disease in current or former tobacco smokers having ischaemic heart disease

[Indian J Chest Dis Allied Sci. 2012 Apr-Jun;54\(2\):111-6.](#)

[Mahmud T, Bokhari SN, Aasim M.](#)

Abstract

BACKGROUND AND OBJECTIVES:

This study compares the frequency of undiagnosed chronic obstructive pulmonary disease (COPD) in tobacco smokers suffering from ischaemic heart disease (IHD) and analyses the association of COPD severity with status, type and duration of smoking.

METHODS:

An analytical cross-sectional study conducted in current and former cigarette, hookah and combined cigarette and hookah smokers with IHD to detect previously undiagnosed COPD through spirometry.

RESULTS:

Among 124 males with IHD, majority [74 (59.7%)] were former smokers and were in the age ranged between 42 to 78 years. All had dyspnoea up to grade 4 and 64 (51.6%) also reported chronic cough and sputum production. According to type of smoking, 64 (51.6%) smoked cigarettes, 30 (24.2%) smoked hookah and 30 (24.2%) smoked both hookah and cigarettes. Forty-seven (37.9%) were found to have COPD, 24 (37.5%) among cigarette smokers, 12 (40%) among hookah smokers, while 11 (36.7%) were from cigarette and hookah smokers. Duration of smoking, its type and magnitude had no association with severity of COPD.

CONCLUSIONS:

The frequency of undiagnosed COPD is high in smokers with IHD. Hookah and combined hookah and cigarette smokers are almost as susceptible to develop COPD as are cigarette smokers.

<http://medind.nic.in/iae/t12/i2/iaet12i2p111.pdf>

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

Language use in an internet support group for smoking cessation: development of sense of community

[Inform Health Soc Care. 2012 Sep 7. \[Epub ahead of print\]](#)

[Vambheim SM, Wangberg SC, Johnsen JA, Wynn R.](#)

Abstract

The use of the internet for health purposes is increasing, as is the number of sites and online communities aimed at helping people to stop smoking. Some of the effects of online communities may be mediated through a sense of community. By using the computer-program Linguistic Inquiry and Word Count with a Norwegian dictionary, we investigated whether there was a development of sense of community in a forum related to a Norwegian smoking cessation intervention, by examining the use of self-referencing vs. collective referencing words. Data from a 4-year period, including in total 5242 web pages, were included. There was a significant increase in the use of collective words over time and a significant decrease in the use of self-referencing words. The increase in the use of collective words suggests that there appears to be a development of a sense of community in the forum over time. More research is needed to study the importance of an online sense of community.

<http://informahealthcare.com/doi/abs/10.3109/17538157.2012.710685>

High rate of smoking in female patients with Mondor's disease in an outpatient clinic in Japan

[Int J Gen Med.](#) 2012;5:735-8. Epub 2012 Sep 4.

[Okumura T](#), [Ohhira M](#), [Nozu T](#).

Abstract

PURPOSE:

Little is known about the epidemiology of Mondor's disease. The aim of this study was to analyze the clinical features of Mondor's disease in an outpatient clinic where primary care physicians are working in Japan, to better understand the epidemiological characteristics of the disease.

PATIENTS AND METHODS:

The data for consecutive outpatients who were new visitors to the Department of General Medicine in the teaching hospital (Asahikawa Medical University Hospital) at Asahikawa Medical University, Asahikawa, Hokkaido, Japan, between April 2004 and March 2012 were analyzed. Parameters such as age, sex, diagnosis, and clinical presentation were investigated.

RESULTS:

During the 8-year period covered in this study, six (0.07%) out of 8767 patients were diagnosed as having Mondor's disease. All of these patients with Mondor's disease were female, and the mean age was 41 plus or minus 12 years; the overall rate of Mondor's disease in all female patients involved in this study was 0.12%. The patients complained of pain and a cord-like structure in the anterolateral thoracoabdominal wall. The painful mass had persisted for 1-4 weeks before presenting at the Department of General Medicine and it disappeared within a couple of weeks. Current smoking was significantly higher in the patients with Mondor's disease than in the age-matched female patients without Mondor's disease who were also evaluated in this study.

CONCLUSION:

These results suggest that a high rate of smoking in middle-aged females may be a characteristic feature of Mondor's disease. These epidemiological data may be useful in detection of the disease in the primary care setting in Japan.

<http://www.dovepress.com/high-rate-of-smoking-in-female-patients-with-mondor39s-disease-in-an-o-peer-reviewed-article-IJGM>

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

Tobacco mosaic virus in cigarettes and saliva of smokers

[J Clin Virol.](#) 2012 Sep 6. [Epub ahead of print]

[Baliq E](#), [Colson P](#), [Raoult D](#).

Abstract

BACKGROUND:

Tobacco mosaic virus (TMV) has been described as viable in cigarettes or cigar tobacco. It has been cultured about 50 years ago from sputa and thoracentesis fluids of cigarette smokers with a history of pulmonary disease and from lung cancerous matter. In addition, TMV RNA has been recovered recently from human stools while tobacco DNA was recovered from smokers' bronchoalveolar lavages.

OBJECTIVES:

We assessed the prevalence, titers, and infectivity of TMV in tobacco cigarettes and in the saliva of smokers and non smokers.

STUDY DESIGN:

Tobacco cigarettes from 10 packs of different brands were purchased. Saliva was collected from 12 smokers and 15 non-smokers. Cigarettes and saliva samples were tested for the presence of TMV RNA using a home-made quantitative real-time RT-PCR assay. TMV RNA quantification was enabled by using dilutions of purified TMV. TMV viability was tested by inoculating leaves of *Nicotiana tabacum* Xanthi (NtX).

RESULTS:

All 47 smoking cigarettes of six brands were TMV RNA-positive (mean titer, $9.5\log(10)$ copies/cigarette); TMV was found viable in 53% of them. In addition, 20/44 (45%) saliva from 12 smokers compared to 0/16 saliva from 15 non-smokers tested positive for TMV RNA (mean titer, $3.8\log(10)$ copies/ml) ($p=0.001$).

CONCLUSIONS:

Our results indicate that the TMV genome may get access to the human body by direct exposure through smoking. Although plant viruses are considered not pathogenic for animals, these data prompt to study if TMV RNA is present and induces a modification of the transcriptional program in lung cells of cigarette smokers.

<http://www.journalofclinicalvirology.com/article/S1386-6532%2812%2900316-2/abstract>

<http://www.sciencedirect.com/science/article/pii/S1386653212003162>

Related French-language coverage:

Un virus dans les cigarettes - Radio-Canada

<http://www.radio-canada.ca/nouvelles/science/2012/09/21/001-tabagisme-virus-cigarettes.shtml>

Impact of cigarette smoking on rates and clinical prognosis of pulmonary tuberculosis in Southern Mexico

J Infect. 2012 Sep 12. pii: S0163-4453(12)00256-3. doi: 10.1016/j.jinf.2012.09.005. [Epub ahead of print]

[Bonacci RA](#), [Cruz-Hervert LP](#), [García-García L](#), [Reynales-Shigematsu LM](#), [Ferreira-Reyes L](#), [Bobadilla-Del-Valle M](#), [Canizales-Quintero S](#), [Ferreira-Guerrero E](#), [Báez-Saldaña R](#), [Téllez-Vázquez N](#), [Mongua-Rodríguez N](#), [Montero-Campos R](#), [Delgado-Sánchez G](#), [Martínez-Gamboa RA](#), [Cano-Arellano B](#), [Sifuentes-Osorio J](#), [Ponce de León A](#).

Abstract

OBJECTIVES:

To examine the relationship between cigarette smoking and incidence and mortality rates of pulmonary tuberculosis (TB) and treatment outcomes.

MATERIALS:

From 1995 to 2010, we analyzed data from 1062 patients with TB and from 2001 to 2004, 2951 contacts in Southern Mexico. Patients with acid-fast bacilli or Mycobacterium tuberculosis in sputum samples underwent epidemiological, clinical and mycobacteriological evaluation and received treatment by the local DOTS program.

RESULTS:

Consumers of 1-10 (LS) or 11 or more (HS) cigarettes per day incidence (1.75 and 11.79) and mortality (HS, 17.74) smoker-non-smoker rate ratios were significantly higher for smokers. Smoker population was more likely to experience unfavorable treatment outcomes (HS, adjusted OR 2.36) and retreatment (LS and HS, adjusted hazard ratio (HR) 2.14 and 2.37). Contacts that smoked had a higher probability of developing active TB (HR 2.38) during follow up.

CONCLUSIONS:

Results indicate the need of incorporating smoking prevention and cessation, especially among men, into international TB control strategies.

<http://www.sciencedirect.com/science/article/pii/S0163445312002563>

Developing Leaders in Priority Populations to Address Tobacco Disparities: Results From a Leadership Institute

[J Public Health Manag Pract.](#) 2012 Sep 6. [Epub ahead of print]

[Ericson R](#), [Claire AS](#), [Schillo B](#), [Martinez J](#), [Matter C](#), [Lew R](#).

Abstract**CONTEXT:**

Few published evaluations documenting the results of community health leadership programs exist. Furthermore, few leadership programs specifically address cross-cultural issues or priority populations, and none have focused on the area of tobacco control.

OBJECTIVE:

The goal of the evaluation was to determine the effectiveness of the Leadership and Advocacy Institute to Advance Minnesota's Parity for Priority Populations Institute. Institute Fellows were recruited from 5 priority populations, including African/African American, American Indian, Asian American, Chicano Latino and Lesbian, Gay, Bisexual, and Transgender. The Institute's impact on the acquisition and application of particular leadership skills was assessed, along with its impact in building priority population capacity to engage in tobacco control activities.

DESIGN AND MEASURE:

Findings are based on mixed methods, including Fellows' completion of paper surveys prior, during, and post-Institute, and telephone interviews conducted post-Institute.

RESULTS:

Perceived skills increased in all areas assessed. Fellows reported applying specific skills acquired 16 months after the Institute. Furthermore, a high number of Fellows were more intensely involved in tobacco control work compared to baseline and reported involvement in cross-cultural collaborations or initiatives post-Institute.

CONCLUSION:

The Institute achieved both short-term and intermediate outcomes; skills were acquired during the Institute and sustained and applied in areas of tobacco control over 1 year later.

http://journals.lww.com/jphmp/Abstract/publishahead/Developing_Leaders_in_Priority_Populations_to.99981.aspx

Going tobacco-free: Predictors of clinician reactions and outcomes of the NY State Office of Alcoholism and Substance Abuse Services tobacco-free regulation

[J Subst Abuse Treat.](#) 2012 Sep 6. [Epub ahead of print]

[Eby L](#), [George K](#), [Brown BL](#).

Abstract

In an effort to reduce patient tobacco dependence and create healthier work environments, New York State (NYS) mandated 100% tobacco-free addiction treatment programs for state funded or certified facilities in 2008. We present the results of a longitudinal study examining how local implementation features shape clinician reactions to the regulation and

influence post-regulation clinician behavior and strain. A cohort of 147 clinicians associated with 13 treatment organizations throughout NYS completed a survey prior to the passage of the regulation and again approximately 1 year post-regulation. Findings reveal that local implementation features of clinician participation in the planning for change, the provision of change-related information, and perceived organizational support predicted perceptions of change management fairness, which in turn predicted clinical practice behaviors to support smoking cessation, as well as psychological and behavioral strain. In contrast, self-efficacy for change was neither related to local implementation nor clinician outcomes. Practical implications are discussed.

<http://www.journalofsubstanceabusetreatment.com/article/S0740-5472%2812%2900135-3/abstract>
<http://www.sciencedirect.com/science/article/pii/S0740547212001353>

Projecting the Effect of Changes in Smoking and Obesity on Future Life Expectancy in the United States

NBER Working Paper No. 18407
Issued in September 2012

[Samuel H. Preston](#), [Andrew Stokes](#), [Neil K. Mehta](#), [Bochen Cao](#)

Abstract

We project the effects of declining smoking and increasing obesity on mortality in the United States over the period 2010-2040. Data on cohort behavioral histories are integrated into these projections. Future distributions of body mass indices are projected using transition matrices applied to the initial distribution in 2010. In addition to projections of current obesity, we project distributions of obesity when cohorts were age 25. To these distributions we apply death rates by current and age-25 obesity status observed in the National Health and Nutrition Examination Survey, 1988-2006. Projections of the effects of smoking are based on observed relations between cohort smoking patterns and cohort death rates from lung cancer. We find that both changes in smoking and in obesity are expected to have large effects on mortality. For males, the reductions in smoking have larger effects than the rise in obesity throughout the projection period. By 2040, male life expectancy at age 40 is expected to have gained 0.92 years from the combined effects. Among women, however, the two sets of effects largely offset one another throughout the projection period, with a small gain of 0.26 years expected by 2040.

<http://papers.nber.org/papers/w18407>

The density of tobacco retailers and its association with attitudes toward smoking, exposure to point-of-sale tobacco advertising, cigarette purchasing, and smoking among New York youth

[Prev Med.](#) 2012 Aug 28. [Epub ahead of print]

[Loomis BR](#), [Kim AE](#), [Busey AH](#), [Farrelly MC](#), [Willett JG](#), [Juster HR](#).

Abstract

OBJECTIVE:

Estimate the association between the density of licensed tobacco retailers (LTRs) and smoking-related attitudes and behaviors among middle and high school students in New York.

METHODS:

The 2000-2008 New York Youth Tobacco Surveys were pooled (N=70,427) and linked with county-level density of LTRs and retailer compliance with laws restricting youth access to cigarettes. Logistic regressions tested for associations with attitudes toward smoking exposure to point-of-sale tobacco advertising, cigarette purchasing, and smoking prevalence.

RESULTS:

LTR density is associated with self-reported exposure to point-of-sale advertising in New York City (NYC) among all youth (OR=1.15; 95% CI: 1.02, 1.30) and nonsmokers (OR=1.14; 95% CI: 1.01, 1.30); youth believing that smoking makes them look cool, overall (OR=1.75; 95% CI: 1.22, 2.52) and among nonsmokers (OR=1.68; 95% CI: 1.11, 2.55); and a

counter-intuitive negative relationship with frequent smoking in NYC (OR=0.50; 95% CI: 0.29, 0.84). Retailer compliance was negatively associated with youth reporting that a retail store is their usual source for cigarettes (OR=0.93; 95% CI: 0.88, 0.98).

CONCLUSIONS:

Restricting tobacco licenses and enforcing youth access laws are reasonable policy approaches for influencing youth smoking outcomes.

<http://www.sciencedirect.com/science/article/pii/S0091743512003878>

Also:

Implementation and impact of anti-smoking interventions in three prisons in the absence of appropriate legislation

<http://www.sciencedirect.com/science/article/pii/S0091743512003830>

Smoking cessation and COPD mortality among Japanese men and women: The JACC study

<http://www.sciencedirect.com/science/article/pii/S0091743512004380>

Parenting Practices and Adolescent Risk Behavior: Rules on Smoking and Drinking Also Predict Cannabis Use and Early Sexual Debut

[Prev Sci](#). 2012 Sep 8. [Epub ahead of print]

[de Looze M](#), [van den Eijnden R](#), [Verdurmen J](#), [Vermeulen-Smit E](#), [Schulten I](#), [Vollebergh W](#), [Ter Bogt T](#).

Abstract

Previous research has provided considerable support for idea that increased parental support and control are strong determinants of lower prevalence levels of adolescent risk behavior. Much less is known on the association between specific parenting practices, such as concrete rules with respect to smoking and drinking and adolescent risk behavior. The present paper examined whether such concrete parental rules (1) have an effect on the targeted behaviors and (2) predict other, frequently co-occurring, risk behaviors (i.e., cannabis use and early sexual intercourse). These hypotheses were tested in a nationally representative sample of 12- to 16-year-old adolescents in the Netherlands. We found that both types of rules were associated with a lower prevalence of the targeted behaviors (i.e., smoking and drinking). In addition, independent of adolescent smoking and drinking behaviors, parental rules on smoking predicted a lower prevalence of cannabis use and early sexual intercourse, and parental rules on alcohol use also predicted a lower prevalence of early sexual intercourse. This study showed that concrete parental rule setting is more strongly related to lower levels of risk behaviors in adolescents compared to the more general parenting practices (i.e., support and control). Additionally, the effects of such rules do not only apply to the targeted behavior but extend to related behaviors as well. These findings are relevant to the public health domain and suggest that a single intervention program that addresses a limited number of concrete parenting practices, in combination with traditional support and control practices, may be effective in reducing risk behaviors in adolescence.

<http://www.springerlink.com/content/m55q5483074n687u/>

<http://www.springerlink.com/content/m55q5483074n687u/fulltext.pdf>

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

Chronic Disease Vaccines Need Shot in the Arm

Science 21 September 2012:

Vol. 337 no. 6101 pp. 1479-1481

[Bijal Trivedi](#)

Whether vaccines to prevent obesity, asthma, smoking-related illnesses, and other chronic diseases will ever work remains an open question...

Nullifying nicotine

Bachmann remains more optimistic about a potential nicotine vaccine that could help people stop smoking, even though those efforts, too, have stumbled. A nicotine vaccine is subtly different from—and potentially safer than—those targeting obesity-related molecules or Alzheimer's disease protein. The strategy, as with other so-called addiction vaccines for heroin and cocaine, is to create enough antinicotinic antibodies in the blood to diminish the amount of the compound that makes it to the brain, in theory making an individual cigarette less appealing. Nicotine isn't normally in the body, so there arguably should be less risk of side effects from inducing antibodies that block it.

In the late 1990s, scientists at Nabi developed and began testing NicVAX, a traditional conjugate vaccine that tethered nicotine, which by itself is so small that it's invisible to the immune system, to a readily detected bacterial protein. Animal studies were promising: The vaccine stimulated the production of antibodies that bound much of the nicotine in the blood before it reached the brain, suppressing the pleasurable nicotine high.

The initial clinical trials examining NicVAX's safety revealed no significant concerns, and by late 2007 Nabi announced that additional Phase II trials had allowed it to zero in on the most effective vaccine dose. The company also found that among the vaccinated smokers, the antibody response correlated closely with the ability to quit and remain abstinent. Late last year, however, the happy ending did not materialize. Nabi announced that its Phase III trial of NicVAX was a failure: There wasn't a significant difference between the percentage of quitters in the NicVAX group and the placebo group...

A nicotine vaccine interests Big Pharma, Janda notes, "because there's money in it." Smoking causes about one in five deaths in the United States each year, is responsible for 90% of lung cancer in men and 80% in women, and boosts the risk of stroke and heart disease twofold to fourfold.

Pharmaceutical companies may indeed see a big market for a nicotine vaccine, but they're not sure anyone can deliver a safe, effective product. "Novartis has made some contracts with biotech companies to develop antismoking vaccines," says Rino Rappuoli, global head of vaccines research for Novartis Vaccines and Diagnostics in Siena, Italy, "but there has not been much progress. Big companies rely on biotechs to derisk the sector." As the stumbling efforts to immunize people from Alzheimer's, obesity, and smoking attest, however, developing vaccines for chronic diseases remains a risky proposition.

<http://www.sciencemag.org/content/337/6101/1479.full>

Nicotine-replacement therapy in pregnancy-the end of the road?

[Ther Drug Monit.](#) 2012 Oct;34(5):487-8.

[Koren G.](#)

Abstract

Smoking in pregnancy is associated with serious perinatal risks, leading to attempts to prevent smoking with the use of nicotine-replacement therapy (NRT). After more than a decade of studies failing to show the effectiveness of NRT for smoking cessation in pregnancy, a recent large, randomized trial has clearly shown that the failure may be caused by >90% dropout rate. Several secondary analyses of randomized trials have shown that NRT is efficacious in decreasing smoking in pregnancy and in optimizing fetal growth among women who take the product. But to be effective in smoking cessation, any drug has to be taken by the patients. Can we overcome the dismal rates of pregnant women's adherence to NRT, so we can save unborn babies from the serious risks associated with their mothers' smoking?

<http://journals.lww.com/drug-monitoring/pages/articleviewer.aspx?year=2012&issue=10000&article=00001&type=abstract>

Referenced NEJM study & related Editorial:

A Randomized Trial of Nicotine-Replacement Therapy Patches in Pregnancy

<http://www.nejm.org/doi/full/10.1056/NEJMoa1109582>

Nicotine Replacement for Smoking Cessation during Pregnancy

<http://www.nejm.org/doi/full/10.1056/NEJMe1200136>

Second-hand smoke exposure and psychological distress in adolescents. A population-based study

Tob Control Published Online First: 22 September 2012

Alicia Padrón, Iñaki Galán, Fernando Rodríguez-Artalejo

Abstract

Objectives To examine the association between duration and place of second-hand smoke (SHS) exposure and psychological distress in adolescents.

Methods A cross-sectional study conducted in 2008 and 2009 in a representative sample of 4th-year students of secondary education (mean age 15.7 years) in the region of Madrid, Spain. The 2215 students who were not smokers were selected for the analysis. Duration of SHS exposure within and outside the home was obtained by self-report. Psychological distress was defined as a score ≥ 3 points in the General Health Questionnaire (GHQ-12). The analyses were made using logistic regression adjusted for demographic variables, lifestyles and family characteristics.

Results Among non-smoking adolescents, 27.8% (95% CI 25.5 to 30.0) were exposed to SHS in the home, and 33.6% (95% CI 31.3 to 36.0) outside the home. Compared with those with no SHS exposure in the home, the multivariate OR for psychological distress was 1.23 (95% CI 0.92 to 1.64) in individuals with SHS exposure < 1 h/day, 2.07 (95% CI 1.30 to 3.28) for exposure 1–3 h/day, and 2.24 (95% CI 1.45 to 3.47) for exposure > 3 h/day (p for linear trend < 0.001). No association was observed between SHS exposure outside the home and psychological distress.

Conclusions In non-smoking adolescents, duration of exposure to SHS in the home had a positive dose-response relationship with the frequency of psychological distress. However SHS exposure outside the home did not show an association with mental health.

<http://tobaccocontrol.bmj.com/content/early/2012/09/21/tobaccocontrol-2012-050548.abstract>

Also:

Using rate advancement periods for communicating the benefits of quitting smoking to older smokers

<http://tobaccocontrol.bmj.com/content/early/2012/09/21/tobaccocontrol-2012-050572.abstract>

Brand placement on price boards after tobacco display bans: a point-of-sale audit in Melbourne, Australia**Tob Control Published Online First: 22 September 2012**

Melanie Wakefield, Meghan Zacher, Michelle Scollo, Sarah Durkin

Abstract

Objective This study aims to explore how cigarette brands are arranged on boards listing tobacco products and/or prices following the 1 January 2011 ban on point-of-sale tobacco displays in Victoria, Australia.

Methods An audit undertaken in late 2011 gathered information on the prevalence and contents of tobacco product information displays ('price boards'). We examined how often all or most of the brands listed at the top of price boards were owned by the same tobacco company, and whether premium, mainstream and value brands were listed in prominent positions more frequently in different store types and socio-economic areas (SES).

Results Of the 281 stores audited, 64% (179) had legible price boards. Of the 178 with factory-made products, 11% arranged brands alphabetically, 2% by price and 87% did so in some other way. In 65% of stores where brands were arranged in some other way, at least three of the top four positions were devoted to brands owned by the same tobacco company. Premium brands were given greater prominence than would be expected by market share. Neighbourhood SES was significantly related to the representation in the most prominent price board positions of brands from the most appropriate market segment.

Conclusions Price boards are being used to target brands to consumers. Jurisdictions should also prohibit price board display when they ban tobacco product display; prices might instead be itemised in alphabetical order on a list only viewable upon customer request.

<http://tobaccocontrol.bmj.com/content/early/2012/09/21/tobaccocontrol-2012-050616.abstract>

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