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Subject: STAN Bulletin: 37th Edition: 1-October-2012

Smoking & Tobacco Abstracts & News

**STAN Bulletin
37th Edition
1-October-2012**

Editor's note: Sri Lanka has joined the list of countries requiring graphic cigarette warnings. These will cover 80% of the front and back of packages. The regulations also ban the descriptors light, mild, low, extra and ultra. No English-language news coverage found yet, but the relevant decree and health warnings, the [Tobacco Products \(Labelling and Packaging\) Regulations, No. 01 of 2012](#), may be viewed at the link included here.

Stan Shatenstein

Noteworthy:

BAT [*British American Tobacco*] CEO Nicandro Durante, who runs marathons but is a cigar smoker: "I know the risks associated with cigars but the pleasure it gives me and that moment - it outstrips the risks... I think we are a very ethical industry and a very responsible industry. It's a risk product and I think regulation is good . . . we were pioneering campaigns about the dangers of tobacco [so] I don't have any problem with that." [No author. The running man of Big Tobacco, [CNBC](#)]

In the News:

- Australia: Tasmania: [Smoke-free generation plan attracts worldwide attention](#)
- Bhutan: [Smokers huff & puff. Sellers & consumers anguish over world's strictest ban](#)
- Canada: BC: Vancouver: [Smoking banned in 42-storey condo tower, offenders face penalties](#)
- France: [Smokers take a hit as tax hikes begin on manufactured & RYO cigarettes](#)
- Japan/UK: [JTI to demand OFT refund over price-fixing cartel allegations](#)
- India: [38% of smokers unaware of tobacco's cardiovascular risks \[WHF Report\]](#)
- India: Tamil Nadu: [GATS: State has fewer people using tobacco products; Least in South](#)
- Ireland: [ICS/IHF: State should seize far bigger portion of cigarette profits](#)
- UK: Scotland: [Imperial Tobacco: Supreme Court date set for cigarette display ban challenge](#)
- UK: Wales: [Concerns grow over plans to exempt film makers from smoking ban](#)
- UK: [BAT: CEO Nicandro Durante: The running man of Big Tobacco; Smokeless future](#)
- UK: [JTI: Firm launches second phase of plain packaging campaign to resist regulation](#)
- US: MI: Detroit: [Henry Ford/Beaumont: Health systems to ban employee workday smoking: Video](#)
- US: [Smoking, heavy drinking linked to earlier onset of pancreatic cancer \[Am J Gastroent: Anderson\]](#)
- US: [USA Today: Opinion: Case for tobacco taxes; ABC News: Low-income tax burden \[PLoS One: Farrelly\]](#)
- US: [Tobacco Advertising Going Up in Smoke, Most Money Spent on Retailer Promotions, Discounts](#)
- US: [Smokers Need Not Fear WHO's Cigarette Tax Recommendations: FCTC: Article 6 Draft guidelines](#)

In this Edition:

- AJE - Barr: US: Comprehensive Smoking Bans & Medicare Enrollee AMI, 387 Counties: 1999-2008
- AJHP - Tracy: US: Identity measure for experimental, intermittent & daily college student smokers
- AJPH - Leischow: North America: Mapping Tobacco Quitlines: Signaling Pathways to Improve Treatment
- AJPH - Petticrew: Type A Behavior Pattern & Coronary Heart Disease: Philip Morris's "Crown Jewel"
- AJPH - Voigt: Nonsmoker & "Nonnicotine" Hiring Policies: TC Implications of Employment Restrictions
- BMJ - Torjesen: UK: NICE: GPs must try to help patients give up ST products to reduce oral cancer
- Breastfeed Med - Du: Germany: Breastfeeding, Pregnancy Smoking Exposure & Health Status Later in Childhood

- CEB&P - Gong: Smoking & colorectal cancer: Pooled analysis: exposure & environmental interactions
- CSH Perspect Med - Goriounova: NL: Adolescent Nicotine Exposure & Prefrontal Cortex Neuronal Network Function
- EJPH - Hamari: N. Finland: Snus: Dual use of cigarettes & Swedish snuff among young adults
- Eur Resp J - Milara: COPD: Acridinium inhibits cigarette smoke-induced lung fibroblast to myofibroblast transition
- HER - Nuzzo: US: Hookah tobacco knowledge & college students' hookah smoking behavior
- Malays J Med Sci - Hizlinda: Malaysia: National TC programme perceived effects on adolescent cessation
- N&TR - Gray: FCTC: Research Required for the Effective Implementation of Articles 9 & 10
- N&TR - Johnson: US: ND: Smoke-Free Law Impact on Rural Community Hospital Heart Attack Incidence
- N&TR - Timberlake: US: Conwood: Trends in Discount Vs. Premium Snuff Use & Advertising
- N&TR - Tønnesen: Denmark: Varenicline to Stop Long-term NRT Use: Double-Blind RCT
- Prev Chron Dis - Glantz: US: Smoking in Top-Grossing Movies, 2011
- SATPP - Spyrtatos: N. Greece: Adolescent smoking: risk & preventive factors
- TCPHEE - Brailon: France: Tobacco control policy: from war to compromise & collaboration
- Tob Control - Graham: US: iQUITT: Cost-effectiveness of internet & telephone cessation: economic evaluation
- Tob Control - King: GATS: Cross-country adult SHS exposure comparison: Global Adult Tobacco Survey findings
- Tob Induc Dis - Smith: China: Shandong: Tobacco smoking among mainland doctors: study & literature review
- Urban Stud - Tan: Singapore: Smell in the City: Smoking & Olfactory Politics
- WMJ - Guzmán: US: WI: Evaluating effects of statewide smoking regulations on smoking behaviors

Abstracts:

Comprehensive Smoking Bans and Acute Myocardial Infarction Among Medicare Enrollees in 387 US Counties: 1999-2008

[Am J Epidemiol.](#) 2012 Oct 1;176(7):642-8. Epub 2012 Sep 17.

[Barr CD](#), [Diez DM](#), [Wang Y](#), [Dominici F](#), [Samet JM](#).

Abstract

Restrictions on smoking in public places have become increasingly widespread in the United States, particularly since the year 2005. National-scale studies in Europe and local-scale studies in the United States have found decreases in hospital admissions for acute myocardial infarction (AMI) following smoking bans. The authors analyzed AMI admission rates for the years 1999-2008 in 387 US counties that enacted comprehensive smoking bans across 9 US states, using a study population of approximately 6 million Medicare enrollees aged 65 years or older. Effects of smoking bans on AMI admissions were estimated by using Poisson regression with linear and nonlinear adjustment for secular trend and random effects at the county level. Under the assumption of linearity in the secular trend of declining AMI, smoking bans were associated with a statistically significant ban-associated decrease in admissions for AMI in the 12 months following the ban. However, the estimated effect was attenuated to nearly zero when the assumption of linearity in the underlying trend was relaxed. This analysis demonstrates that estimation of potential health benefits associated with comprehensive smoking bans is challenged by the need to adjust for nonlinearity in secular trend.

<http://aje.oxfordjournals.org/content/176/7/642.abstract>

A smoker identity measure for experimental, intermittent, and daily college student smokers

[Am J Health Promot.](#) 2012 Sep;27(1):55-62.

[Tracy JJ](#), [Lombardo TW](#), [Bentley JP](#).

Abstract

Purpose . To provide initial tests of internal consistency reliability and both structural and concurrent validity of a smoker identity (SI) scale for college student populations. **Design** . Cross-sectional design. **Setting** . Midsouth university. **Participants** . Undergraduates in a random sample of university classes completed surveys (92.3% response rate). **Method** . SI items derived from a literature review and clinical expertise, lifetime and current tobacco use, cigarette purchasing patterns, and quitting variables. **Analysis** . Current (some days or every day) cigarette users (n = 362) were divided into daily, intermittent, and experimental smoker groups. After principal components analysis was conducted on the SI items, analysis of variance (ANOVA) was used to assess SI differentiation of smoker groups, and correlational analysis or ANOVA was used to assess SI relationships with smoking and quitting variables. **Results** . Eight SI items

produced a high-internal-consistency, single-factor structure ($\alpha = .93$) and clearly differentiated the three smoker groups. Higher SI scores indicated greater smoking rate, smoking within 30 minutes of awakening, larger purchased quantities, and both greater interest and lower confidence in quitting. Conclusions . The scale demonstrated good reliability and validity. Other SI measures exist, but this is the first scale to establish utility with experimental and intermittent smokers-substantial groups among college students. The extent to which cigarette users identify as smokers may provide useful information beyond behavioral measures, especially among college students.

<http://ajhpcontents.org/doi/abs/10.4278/ajhp.110401-QUAN-146>

Mapping Tobacco Quitlines in North America: Signaling Pathways to Improve Treatment

[Am J Public Health](#). 2012 Sep 20. [Epub ahead of print]

[Leischow SJ](#), [Provan K](#), [Beagles J](#), [Bonito J](#), [Ruppel E](#), [Moor G](#), [Saul J](#).

Abstract

Objectives. This study was designed to better understand how the network of quitlines in the North American Quitline Consortium (NAQC) interact and share new knowledge on quitline practices. **Methods.** Network relationship data were collected from all 63 publicly funded quitlines in North America, including information sharing, partner trust, and reputation. **Results.** There was a strong tendency for US and Canadian quitlines to seek information from other quitlines in the same country, with few seeking information from quitlines from the other country. Quitlines with the highest reputation tended to more centrally located in the network, but the NAQC coordinating organization is highly central to the quitline network-thus demonstrating their role as a broker of quitline information. **Conclusions.** This first "snapshot" of US and Canadian quitlines demonstrated that smoking cessation quitlines in North America are not isolated, but are part of an interconnected network, with some organizations more central than others. As quitline use expands with the inclusion of national toll-free numbers on cigarette packs, how quitlines share information to improve practice will become increasingly important.

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2011.300529>

Also:

Accuracy and Importance of Projections From a Dynamic Simulation Model of Smoking Prevalence in the United States

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300771>

A Transnational Study of Migration and Smoking Behavior in the Mexican-Origin Population

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300739>

Type A Behavior Pattern and Coronary Heart Disease: Philip Morris's "Crown Jewel"

[Am J Public Health](#). 2012 Sep 20. [Epub ahead of print]

[Petticrew MP](#), [Lee K](#), [McKee M](#).

Abstract

The type A behavior pattern (TABP) was described in the 1950s by cardiologists Meyer Friedman and Ray Rosenman, who argued that TABP was an important risk factor for coronary heart disease. This theory was supported by positive findings from the Western Collaborative Group Study and the Framingham Study. We analyzed tobacco industry documents to show that the tobacco industry was a major funder of TABP research, with selected results used to counter concerns regarding tobacco and health. Our findings also help explain inconsistencies in the findings of epidemiological studies of TABP, in particular the phenomenon of initially promising results followed by negative findings. Our analysis suggests that these "decline effects" are partly explained by tobacco industry involvement in TABP research.

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300816>

Also:

The Role of Personal Attributes in the Genesis and Progression of Lung Disease and Cigarette Smoking

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300748>

Nonsmoker and "Nonnicotine" Hiring Policies: The Implications of Employment Restrictions for Tobacco Control

[Am J Public Health](#). 2012 Sep 20. [Epub ahead of print]

[Voigt K](#).

Abstract

Smoking has been restricted in workplaces for some time. A number of organizations with health promotion or tobacco control goals have taken the further step of implementing employment restrictions. These restrictions apply to smokers and, in some cases, to anyone testing positive on cotinine tests, which also capture users of nicotine-replacement therapy and those exposed to secondhand smoke. Such policies are defended as closely related to broader antismoking goals: first, only nonsmokers can be role models and advocates for tobacco control; second, nonsmoker and "nonnicotine" hiring policies help denormalize tobacco use, thus advancing a central aspect of tobacco control. However, these arguments are problematic: not only can hiring restrictions come into conflict with broader antismoking goals, but they also raise significant problems of their own.

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300745>

Also:

Measuring Indoor Air Quality of Hookah Lounges

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2012.300751>

State Cigarette Excise Tax, Secondhand Smoke Exposure, and Periodontitis in US Nonsmokers

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2011.300579>

GPs must try to help patients give up smokeless tobacco products to reduce oral cancer

BMJ 2012; 345 doi: 10.1136/bmj.e6535 (Published 27 September 2012)

Ingrid Torjesen

The National Institute for Health and Clinical Excellence (NICE) has published final guidance for tackling the use of smokeless tobacco products, particularly in South Asian communities.

Smokeless tobacco products, such as paan, gutka, shupari, and betel quid, are often seen as healthy or beneficial within these communities but are associated with serious health and dental problems, including oral cancer, heart attack and stroke, and problems in pregnancy.

Use of smokeless tobacco products is considered the main reason why South Asian women are nearly four times more likely to develop oral cancers than women from other ethnic groups in England. Older women of South Asian descent are most likely to use it, but in some parts of the UK a high percentage of young South Asians are also users.

The NICE public health guidance published on 26 September recommends that a range of services are commissioned to help South Asian people stop using smokeless tobacco in areas where its use is prevalent, and that these services should be integrated with other tobacco control, prevention, and cessation activities as part of a comprehensive local tobacco control strategy...

<http://www.bmj.com/content/345/bmj.e6535>

Referenced NICE Guidance:

www.nice.org.uk/PH39

Association of Breastfeeding and Exposure to Maternal Smoking During Pregnancy with Children's General Health Status Later in Childhood

[Breastfeed Med](#). 2012 Sep 24. [Epub ahead of print]

[Du Y](#), [Ellert U](#), [Lampert T](#), [Mensink GB](#), [Schlaud M](#).

Abstract

Background: Maternal smoking during pregnancy is associated with a variety of risks on fetal health, whereas breastfeeding may protect infants from infections in the early postpartum period. Little has been reported regarding their associations with children's general health later in childhood. Subjects and Methods: Parent-rated children's general health status was investigated among 14,836 children and adolescents 3-17 years old who participated in the German Health Interview and Examination Survey for Children and Adolescents (KiGGS) in 2003-2006. Data on breastfeeding and maternal smoking during pregnancy were collected by parent-administered questionnaires. SPSS complex samples logistic regression was used to estimate odds ratios (ORs) and 95% confidence intervals (95% CIs). Results: Exclusive breastfeeding and non-exposure to maternal smoking during pregnancy were associated with better health status overall among all children in the KiGGS (both $p < 0.001$). After adjusting for potential confounding factors including other prior and current exposures, exclusive breastfeeding over 6 months remained significant overall among all children (OR 1.21, 95% CI 1.05-1.38) and in the age groups 7-10 years (OR 1.27, 95% CI 1.01-1.60) and 11-17 years (OR 1.23, 95% CI 1.01-1.50), while non-exposure to maternal smoking during pregnancy remained significant in the age group 11-17 years only (OR 1.49, 95% CI 1.06-2.10). Conclusions: Exclusive breastfeeding and non-exposure to maternal smoking during pregnancy may be associated with better children's general health status later in childhood, particularly when children reach adolescence. Further studies are required to elucidate these possible and biologically plausible associations. Health professionals should take opportunities to promote breastfeeding and cessation of smoking among (expectant) mothers for a healthy future of their children.

<http://online.liebertpub.com/doi/abs/10.1089/bfm.2011.0138>

A pooled analysis of smoking and colorectal cancer: timing of exposure and interactions with environmental factors

[Cancer Epidemiol Biomarkers Prev.](#) 2012 Sep 20. [Epub ahead of print]

[Gong J](#), [Hutter CM](#), [Baron JA](#), [Berndt SI](#), [Caan BJ](#), [Campbell PT](#), [Casey G](#), [Chan AT](#), [Cotterchio M](#), [Fuchs CS](#), [Gallinger S](#), [Giovannucci E](#), [Harrison TA](#), [Hayes RB](#), [Hsu L](#), [Jiao S](#), [Lin Y](#), [Lindor NM](#), [Newcomb PA](#), [Pflugeisen BM](#), [Phipps AI](#), [Rohan TE](#), [Schoen RE](#), [Seminara D](#), [Slattery ML](#), [Stelling DL](#), [Thomas F](#), [Warnick GS](#), [White E](#), [Potter JD](#), [Peters U](#).

Abstract

BACKGROUND:

Considerable evidence suggests that cigarette smoking is associated with a higher risk of colorectal cancer. What is unclear, however, is the impact of quitting smoking on risk attenuation and whether other risk factors for colorectal cancer modify this association.

METHODS:

We performed a pooled analysis of 8 studies, including 6,796 colorectal cancer cases and 7,770 controls to evaluate the association between cigarette smoking history and colorectal cancer risk, and to investigate potential effect modification by other risk factors.

RESULTS:

Current smokers (OR=1.26, 95% CI=1.11-1.43) and former smokers (OR=1.18, 95% CI=1.09-1.27), relative to never smokers, showed higher risks of colorectal cancer. Former smokers remained at higher colorectal cancer risk, relative to never smokers, for up to about 25 years after quitting. The impact of time since quitting varied by cancer subsite: the excess risk due to smoking decreased immediately after quitting for proximal colon and rectal cancer, but not until about 20 years post-quitting for distal colon cancer. Further, we observed borderline statistically significant additive interactions between smoking status and BMI (relative excess risk due to interaction [RERI]=0.15, 95% CI:-0.01-0.31, $P=0.06$) and significant additive interaction between smoking status and fruit consumption (RERI=0.16, 95% CI: 0.01-0.30, $P=0.04$).

CONCLUSIONS:

Colorectal cancer risk remained increased for about 25 years after quitting smoking, and the pattern of decline in risk varied by cancer subsite. BMI and fruit intake modified the risk associated with smoking. Impact: These results contribute to a better understanding of the mechanisms through which smoking impacts colorectal cancer etiology.

<http://cebp.aacrjournals.org/content/early/2012/09/20/1055-9965.EPI-12-0692.abstract>

Short- and Long-Term Consequences of Nicotine Exposure during Adolescence for Prefrontal Cortex Neuronal Network Function

[Cold Spring Harb Perspect Med.](#) 2012 Sep 13. pii: cshperspect.a012120v1. doi: 10.1101/cshperspect.a012120. [Epub ahead of print]

[Goriounova NA](#), [Mansvelder HD](#).

Abstract

More than 70% of adolescents report to have smoked a cigarette at least once. At the adolescent stage the brain has not completed its maturation. The prefrontal cortex (PFC), the brain area responsible for executive functions and attention performance, is one of the last brain areas to mature and is still developing during adolescence. Smoking during adolescence increases the risk of developing psychiatric disorders and cognitive impairment in later life. In addition, adolescent smokers suffer from attention deficits, which aggravate with the years of smoking. Recent studies in rodents reveal the molecular changes induced by adolescent nicotine exposure that alter the functioning of synapses in the PFC and that underlie the lasting effects on cognitive function. Here we provide an overview of these recent findings.

<http://perspectivesinmedicine.cshlp.org/content/early/2012/09/13/cshperspect.a012120.abstract>

<http://perspectivesinmedicine.cshlp.org/content/early/2012/09/13/cshperspect.a012120.long>

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

Dual use of cigarettes and Swedish snuff (snus) among young adults in Northern Finland

[Eur J Public Health.](#) 2012 Sep 22. [Epub ahead of print]

[Hamari AK](#), [Tojamo TI](#), [Kinnula VL](#), [Nieminen PA](#).

Abstract

BACKGROUND:

The sale of smokeless tobacco has been totally banned in Finland since the country joined the European Union in 1995. Adolescents have continued to use smokeless tobacco even after the sales ban. The objective was to describe dual use of Swedish snuff (snus) and cigarettes in young adults living in Northern Finland.

METHODS:

This study on male military recruits (n = 1151, mean age 19.4 years; response rate 80%) investigated association of snus use with self-reported tobacco use, nicotine dependence and attempts to quit smoking.

RESULTS:

Overall, 15.6% (n = 179) reported daily snus use, and almost half of them were dual users who used both products, i.e. cigarettes and snus, daily. Daily smokers were often occasional snus users (66.3%), and those with dual use smoked equal number of cigarettes per day as daily smokers who were not snus users. In addition, dual snus use seemed to increase the dependence to cigarettes, although this trend did not reach statistical significance. Dual users tried to quit less likely than exclusive smokers. Very few snus users were 'switchers' (ex-smokers) [3.2% (n = 22) of all snus users].

CONCLUSIONS:

Dual use of snus and cigarettes is common among young in Finland, despite the sales ban on snus. The role of snus in

reducing cigarette smoking is unclear, but it is likely that snus use complicates the attempts to quit smoking.

<http://eurpub.oxfordjournals.org/content/early/2012/09/21/eurpub.cks131.abstract>

Acridinium inhibits cigarette smoke-induced lung fibroblast to myofibroblast transition

Eur Respir J published 27 September 2012, 10.1183/09031936.00017712

Javier Milara, A. Serrano, T. Peiró, E. Artigues, A. Gavalda, M. Miralpeix, E. J. Morcillo, and J. Cortijo

Abstract

Cigarette smoking, contributes to lung remodeling in chronic obstructive pulmonary disease (COPD). As part of remodeling, peribronchiolar fibrosis is observed in small airways of COPD patients and contributes to airway obstruction. Fibroblast to myofibroblast transition is a key step of the peribronchiolar fibrosis formation. This *in vitro* study examines the effect of cigarette smoke on bronchial fibroblast to myofibroblast transition, and whether acridinium bromide inhibits this process. Human bronchial fibroblasts were incubated with acridinium bromide (10^{-9} M– 10^{-7} M) and exposed to cigarette smoke extract. Collagen type I and alpha-smooth muscle actin expression were measured by real-time PCR and Western blotting as myofibroblast markers. Intracellular reactive oxygen species, cAMP, ERK 1/2 and choline acetyltransferase were measured as intracellular signaling mediators. Cigarette-smoke-induced collagen type I and alpha-smooth muscle actin was mediated by the production of reactive oxygen species, the depletion of intracellular cAMP and the increase of ERK1/2 phosphorylation and choline acetyltransferase. These effects could be reversed by treatment with the anticholinergic acridinium bromide, by silencing mRNA at muscarinic receptors M1, M2 or M3, or by the depletion of extracellular acetylcholine by treatment with acetylcholinesterase. Non-neuronal cholinergic system is implicated in cigarette smoke-induced bronchial fibroblast to myofibroblast transition which is inhibited by acridinium bromide.

<http://erj.ersjournals.com/cgi/content/abstract/09031936.00017712v1>

Associations between hookah tobacco smoking knowledge and hookah smoking behavior among US college students

Health Educ Res. 2012 Sep 17. [Epub ahead of print]

[Nuzzo E](#), [Shensa A](#), [Kim KH](#), [Fine MJ](#), [Barnett TE](#), [Cook R](#), [Primack BA](#).

Abstract

Hookah tobacco smoking is increasing among US college students, including those who would not otherwise use tobacco. Part of hookah's appeal is attributed to the perception that hookah is less harmful than cigarettes. The aims of this study were to assess knowledge of harmful exposures associated with hookah smoking relative to cigarette smoking and to determine associations between this knowledge and hookah smoking outcomes. Students (N = 852) at the University of Florida were randomly sampled via e-mail to obtain information on demographics, hookah smoking behavior and knowledge of five exposures (e.g. tar and nicotine). Multivariable logistic regression models assessed independent associations between knowledge and hookah smoking outcomes. Of the five factual knowledge items asked, 475 (55.8%) of the respondents answered none correctly. In multivariable models, correct responses to any knowledge items were not associated with lower odds of hookah smoking or susceptibility to hookah smoking in the future. Although college students are largely unaware of the toxicant exposures associated with hookah smoking, there is little association between knowledge and hookah smoking behavior.

<http://her.oxfordjournals.org/content/early/2012/09/15/her.cys095.abstract>

Perceived effects of the Malaysian national tobacco control programme on adolescent smoking cessation: a qualitative study

Malays J Med Sci. 2012 Apr;19(2):35-47.

[Hizlinda T](#), [Noriah MI](#), [Noor Azimah M](#), [Farah Naaz MA](#), [Anis Ezdiana AA](#), [Khairani O](#).

Abstract

BACKGROUND:

The prevalence of teenage smoking has decreased over the past decade following the implementation of the national tobacco control programme. However, the effect of the programme on smoking cessation in teenagers has not been determined.

METHODS:

Twenty-eight participants (12 teenagers, 8 teachers, and 8 doctors) were interviewed using 5 in-depth interviews and 3 group discussions. Social cognitive theory (SCT) was applied as the theoretical framework. Semi-structured interview protocols were used, and thematic analysis and analytic generalisation utilising SCT were performed.

RESULTS:

The current national tobacco control programme was found to be ineffective in promoting smoking cessation among teenagers. The participants attributed the ineffective campaign to the followings: inadequacy of message content, lack of exposure to the programme, and poor presentation and execution. In addition, the participants perceived the developed tobacco control policies to be a failure based on poor law enforcement, failure of retailers to comply with the law, social availability of cigarettes to teenagers, and easy availability of cheap, smuggled cigarettes. This study highlighted that the programme-related problems (environmental factors) were not the only factors contributing to its perceived ineffectiveness. The cunning behaviour of the teenagers (personal factor) and poor self-efficacy to overcome nicotine addiction (behavioural factor) were also found to hinder cessation.

CONCLUSION:

Tobacco control programmes should include strategies beyond educating teenagers about smoking and restricting their access to cigarettes. Strategies to manage the cunning behaviour of teenagers and strategies to improve their self-efficacy should also be implemented. These comprehensive programmes should have a foundation in SCT, as this theory demonstrates the complex interactions among the environmental, personal, and behavioural factors that influence teenage smoking.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3431733/>

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3431733/pdf/mjms-19-2-035.pdf>

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

Research Required for the Effective Implementation of the Framework Convention on Tobacco Control, Articles 9 and 10

Nicotine Tob Res 2012 published 27 September 2012

Nigel Gray and Ron Borland

Abstract

This paper is part of a series of articles intended to set out the research questions that are relevant to the successful implementation of the various provisions of the Framework Convention on Tobacco Control (FCTC). This paper focuses on issues affecting Articles 9 and 10 of the FCTC. This paper focuses on the research that is most important for most countries, rather than on what is desirable in countries with high levels of research capacity.

Articles 9 and 10 of the FCTC address the regulation of contents and emissions of tobacco products and regulation of tobacco product disclosure. Such regulation will be essential if the long-term objective of reducing the danger of tobacco products is to be achieved. There are many components of tobacco and tobacco smoke that are excessively toxic and dangerous to the user. Many of these components are carcinogenic and addictive and can be removed or reduced substantially with current known technology. The fact that these components remain in tobacco and tobacco smoke at levels that are unnecessarily dangerous is precisely the reason why the successful implementation of Articles 9 and 10 of the FCTC is important to tobacco control. This paper discusses the scientific challenges involved in successfully implementing Articles 9 and 10 of the FCTC, which focuses on regulating carcinogens and toxins in tobacco and tobacco smoke, the abuse liability of tobacco products, and the additives and engineering features in tobacco products that make tobacco products appealing to future consumers.

The research issues we focus on are those required to support the early stages of regulation. As regulation proceeds, new and more sophisticated research questions will undoubtedly emerge.

<http://ntr.oxfordjournals.org/cgi/content/abstract/nts175v1>

N&TR Correspondence:

Is the Lack of Effect of Smoking Cessation Aids in Population Studies Explained by Recall Bias? Comment on the Article by [Borland et al. \(2012\)](#)

<http://ntr.oxfordjournals.org/cgi/content/extract/nts166v1>

Recall Bias Does Impact on Retrospective Reports of Quit Attempts: Response to Messer and Pierce

<http://ntr.oxfordjournals.org/cgi/content/extract/nts168v1>

At Odds With Science?

<http://ntr.oxfordjournals.org/cgi/content/extract/nts188v1>

Impact of a Comprehensive Smoke-Free Law Following a Partial Smoke-Free Law on Incidence of Heart Attacks at a Rural Community Hospital

Nicotine Tob Res 2012 published 27 September 2012

Eric L. Johnson and James R. Beal

Abstract

Introduction: Secondhand smoking (passive smoking) is associated with many negative health effects, primarily respiratory and cardiovascular diseases. Approximately, 46,000 deaths from cardiovascular disease are associated with secondhand smoke exposure annually in the United States, which is roughly 150 deaths in North Dakota. Studies show that passage of smoke-free laws at the community level can reduce the incidence of heart attack.

Methods: We conducted a retrospective review of electronic medical records of patients admitted for heart attacks 4 months prior (April 15, 2010 through August 14, 2010) to implementation of the smoke-free ordinance and 4 months following (August 15, 2010 through December 14, 2010) implementation of the comprehensive smoke-free ordinance in Grand Forks, ND, United States.

Results: We found an association between the heart attack rate and implementation of the comprehensive smoke-free law. The heart attack rate prior to the ban was 0.5% (83/16,702) compared with 0.3% (63/18,513) after the ban ($p = .023$). Thus, the rate of heart attacks decreased 30.6% and number of heart attack admissions decreased 24.1%, from 83 to 63, after implementation of a comprehensive smoke-free law.

Conclusions: We found an implementation of the comprehensive smoke-free law was associated with a decrease in the heart attack rate. The heart attack rate decreased 30.6%. Our finding was similar to previous community level smoke-free law implementation studies and notable for the change going from a partial smoke-free law to a comprehensive smoke-free law.

<http://ntr.oxfordjournals.org/cgi/content/abstract/nts216v1>

Also:

Efficacy of Emergency Department–Initiated Tobacco Control—Systematic Review and Meta-analysis of Randomized Controlled Trials

<http://ntr.oxfordjournals.org/cgi/content/abstract/nts212v1>

Trends in the Use and Advertising of Discount Versus Premium Snuff

Nicotine Tob Res 2012 published 27 September 2012

David S. Timberlake and Cornelia Pechmann

Abstract

Introduction: The Conwood Company, a major producer of discount moist snuff, was awarded a \$1 billion antitrust settlement in the year 2000 against its leading competitor, the U.S. Smokeless Tobacco Company. The objective of this study was to examine the trends in use and advertising of discount versus premium snuff since the Conwood settlement, a topic seldom addressed in the tobacco control literature.

Methods: 2 sources of data were analyzed in 2011: (a) male snuff users from the 2002–2009 National Surveys on Drug Use and Health (N = 13,172) and (b) total advertisements of moist snuff identified from over 350 consumer magazines dated 2005–2009 (N = 861). For the survey data, demographic and tobacco-related measures were assessed as

predictors of use of discount versus premium snuff in logistic regression models. For the advertising data, associations were examined between the snuff category and nicotine content, magazine youth readership, and year of magazine publication.

Results: The prevalence of discount and premium snuff use among males increased and decreased, respectively, from 2002 to 2009. Significant predictors of using discount versus premium snuff were being an adolescent, being an African-American, being a current or former smoker, living in a less populated region of the country, and using snuff frequently. Discount snuff advertising was associated with publication in magazines with a high youth readership.

Conclusions: Discount snuff has grown in popularity among male adolescents who have been a target of advertising. The tobacco's cheap price and high nicotine content pose a public health problem because of the potential for long-term tobacco use and dependence.

<http://ntr.oxfordjournals.org/cgi/content/abstract/nts160v1>

Varenicline to Stop Long-term Nicotine Replacement Use: A Double-Blind, Randomized, Placebo-Controlled Trial

Nicotine Tob Res 2012 published 27 September 2012

Philip Tønnesen and Kim Mikkelsen

Abstract

Introduction: This study evaluated the effect of varenicline in combination with counseling to assist long-term nicotine replacement therapy (NRT) users to quit NRT.

Methods: This was a double-blind, placebo-controlled, randomized trial of varenicline or placebo for 12 weeks, with 52-week follow-up, performed in 1 hospital-based smoking cessation specialist clinic. At the first visit, 139 ex-smokers and long-term NRT users were allocated to treatment according to a computer-generated list with random numbers. Visits were scheduled at Weeks 0, 2, 4, 6, 9, 12, and 52. At each visit, nurse-led counseling was delivered, carbon monoxide in expired air, plasma cotinine, and body weight were assessed, and subjects were asked about craving, nausea, and dreams. The primary outcome was 12-week point prevalence quit rate (PPR) of nicotine replacement therapy use.

Results: At all time points, the PPR was superior for varenicline versus placebo, although the difference was only statistically significant at 12 and 36 weeks. The PPR was 64.3% (varenicline) versus 40.6% (placebo) at 12 weeks ($p = .006$), and 42.9% (varenicline) versus 36.2% (placebo) at 52 weeks (NS). The continuous abstinence rate from Week 9 to Week 12 was 48.6% (varenicline) versus 30.4% (placebo) ($p = .03$). Withdrawal symptoms were statistically significantly lower in the varenicline group than the placebo group.

Conclusion: Varenicline for 12 weeks combined with supportive visits was superior to placebo to get long-term NRT users to quit NRT. A larger study is needed to evaluate long-term efficacy.

<http://ntr.oxfordjournals.org/cgi/content/abstract/nts146v1>

Also:

Development of Novel Pharmacotherapeutics for Tobacco Dependence: Progress and Future Directions

<http://ntr.oxfordjournals.org/cgi/content/abstract/nts201v1>

Smoking in Top-Grossing US Movies, 2011

Prev Chronic Dis 2012;9:120170.

Glantz SA, Iaccopucci A, Titus K, Polansky JR.

Abstract

We reviewed the number of incidents of tobacco use (almost exclusively smoking) depicted in movies in the United States in 2011 to compare that with previously reported trends. We counted use or implied use of a tobacco product by an actor in all movies whose box office gross ranked in the top 10 for at least 1 week. Total tobacco incidents per movie rose 7% from 2010 to 2011, ending 5 years of decline; incidents rose 34% per movie rated G, PG, or PG-13 and 7% per R-rated

movie. The reversal of progress toward less onscreen smoking in youth-rated movies underscores the need to rate movies with tobacco imagery as R, establishing an industry-wide market incentive to keep youth-marketed movies tobacco-free.

Objective

Exposure to onscreen smoking causes youth smoking initiation (1). The Department of Health and Human Services' strategic plan includes the goal of reducing youth exposure to onscreen smoking (2). Although depictions of tobacco use in movies declined between 2005 and 2010, and 3 of the 6 Motion Picture Association of America (MPAA) member companies published policies designed to discourage tobacco use in their movies, movies continue to deliver billions of smoking images to adolescents (3). We report the number of incidents of tobacco use in movies released in 2011 and how 2011 relates to previously reported (3) long-term trends.

Methods

To monitor tobacco appearances in movies, Thumbs Up! Thumbs Down! (TUTD), a project of Breathe California of Sacramento-Emigrant Trails, counts occurrences of tobacco "incidents" in US top-grossing movies each year. TUTD uses trained monitors to count tobacco incidents in all movies that are among the 10 top-grossing movies in any calendar week (83% of all movies exhibited in the United States and 98% of tickets sold in 2002–2008). An incident is 1 use or implied use of a tobacco product (almost exclusively smoking) by an actor. We calculated impressions (1 person seeing 1 tobacco use incident 1 time) for each movie by multiplying tickets sold for the movie by the number of incidents. Tickets sold were calculated by dividing the domestic box office gross receipts reported for the movie (www.boxofficemojo.com) by the average US ticket price (www.natoonline.org) in the year the movie was released. We compared results in 2011 with 2010 and with long-term trends (4).

Results

In 2011, 134 movies were among the 10 top-grossing movies for at least 1 week. The total number of tobacco incidents rose 3% (from 1,819 to 1,881) from 2010 to 2011 despite there being 5 fewer movies in the 2011 sample than the 139 in 2010 (Figure 1). Overall, the number of tobacco incidents per movie increased 7% (from 13.1 to 14.0). Changes varied by MPAA rating. Incidents per G and PG movie climbed 311% (from 0.8 to 3.2) and per PG-13 movie, 9% (from 10.7 to 11.6); tobacco incidents per youth-rated movie (G, PG, and PG-13 combined) rose 34% (from 6.5 to 8.8). Incidents per R-rated movie increased 7% (26.0 to 27.8).

Discussion

The reversal in the previous multiyear downward trend in onscreen tobacco use that occurred from 2005 to 2010 (3) means that movies in 2011 contributed more to promoting youth smoking than in previous years and that the motion picture industry is no longer progressing toward the goal of reducing onscreen depictions of tobacco use (2). Thirty-six states offer movie producers hundreds of millions of dollars in subsidies covering about 25% of production costs (8). About two-thirds of subsidies for top-grossing movies go to productions with smoking; one-third support youth-rated movies with smoking. State and local health departments should work with policy makers to harmonize movie subsidy programs with the state's interest in reducing rates of tobacco use among youth by limiting eligibility for subsidies to tobacco-free productions.

The growth in onscreen tobacco use in 2011 reversed years of progress toward tobacco-free youth-rated movies, particularly among the 3 studios with policies meant to discourage onscreen tobacco imagery. This development reinforces the need to modernize the MPAA rating system to give movies with any tobacco use an R rating to create a sustained, industry-wide market incentive to keep movies that are marketed to youth tobacco-free (1). There should be exceptions when the presentation of tobacco clearly and unambiguously reflects the dangers and consequences of tobacco use or is necessary to represent the smoking of a real historical figure. Youth see some R-rated movies; therefore, removing tobacco imagery from new youth-rated movies will greatly reduce, but not eliminate, youth exposure to onscreen smoking and other tobacco use. We recommend that an antitobacco message run before any movie with tobacco imagery, in all channels (eg, theatrical exhibition, broadcast, pay-per-view, DVD, Blu-ray, Internet stream and download). We also recommend that moviemakers adopt complementary policies to certify that they received no payoffs for depicting tobacco use and to end depiction of tobacco brands.

http://www.cdc.gov/pcd/issues/2012/12_0170.htm

http://www.cdc.gov/pcd/issues/2012/pdf/12_0170.pdf

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

Related coverage & PR:

Smoking in movies is up, study finds - Los Angeles Times

<http://www.latimes.com/entertainment/envelope/cotown/la-et-ct-smoking-movies-20120926.0.4210411.story>

Smoking in Movies Increases in 2011, Reverses Five Years of Progress

<http://www.sciencedaily.com/releases/2012/09/120927123646.htm>

Uptick in cinematic smoking: More onscreen tobacco use in movies aimed at young viewers

<http://medicalxpress.com/news/2012-09-uptick-cinematic-onscreen-tobacco-movies.html>

Smoking among adolescents in Northern Greece: a large cross-sectional study about risk and preventive factors

[Subst Abuse Treat Prev Policy](#). 2012 Sep 10;7(1):38. [Epub ahead of print]

[Spyratos D](#), [Pelagidou D](#), [Chloros D](#), [Haidich AB](#), [Karetsi E](#), [Koubaniou C](#), [Konstantopoulos S](#), [Gourgoulialis K](#), [Sichletidis L](#).

Abstract**BACKGROUND:**

The aim of the present study was to investigate epidemiological data about cigarette smoking in relation with risk and preventive factors among Greek adolescents.

METHODS:

We randomly selected 10% of the whole number of schools in Northern Greece (133 schools, 18,904 participants were included). Two anonymous questionnaires (smoker's and non-smoker's) were both distributed to all students so they selected and filled in only one. A parental signed informed consent was obtained using an informative leaflet about adolescent smoking

RESULTS:

The main findings of the study were: a) 14.2% of the adolescents (mean age \pm SD: 15.3 \pm 1.7 years) reported regular smoking (24.1% in the age group 16--18 years), b) 84.2% of the current smokers reported daily use, c) students who live in urban and semirural areas smoke more frequently than those in rural areas, d) students in technically oriented schools smoke twice as frequent compared to those in general education, e) risk factors for smoking: male gender, low educational level of parents, friends who smoke (OR: 10.01, 95%CI: 8.53-11.74, $p<0.001$), frequent visits to internet cafes (OR:1.53, 95%CI: 1.35-1.74, $p<0.001$), parents, siblings (OR:2.24, 95%CI: 1.99-2.51, $p<0.001$) and favorite artist (OR:1.18, 95%CI: 1.04-1.33, $p=0.009$) who smoke, f) protective factors against smoking: participation in sports (OR:0.59, 95%CI: 0.53-0.67, $p<0.001$), watching television (OR:0.74, 95%CI 0.66-0.84, $p<0.001$) and influence by health warning messages on cigarette packets (OR:0.42, 95%CI: 0.37, 0.48, $p<0.001$).

CONCLUSIONS:

Even though prevalence of cigarette smoking is not too high among Greek adolescents, frequency of everyday cigarette use is alarming. We identified many social and lifestyle risk and preventive factors that should be incorporated in a national smoking prevention program among Greek adolescents.

<http://www.substanceabusepolicy.com/content/7/1/38/abstract>

<http://www.substanceabusepolicy.com/content/pdf/1747-597X-7-38.pdf>

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

Tobacco control policy in France: from war to compromise and collaboration

Tobacco Control and Public Health in Eastern Europe

2012. 2(2), 59-66. doi:10.6084/m9.figshare.95873

Alain Braillon, Anne Sophie Mereau, Gérard Dubois

Abstract

BACKGROUND: Absence of an effective tobacco control policy costs lives and tobacco prevention is policy-sensitive. We describe the historical record of tobacco control in France.

METHODS: Public policies and main decisions (laws, regulations, health plans) for tobacco control were considered from 1950 to 2010. Data for cigarette sales and relative price of cigarettes were obtained from official databases. Sales are expressed in number of cigarettes. The relative price of cigarettes is the nominal price divided by the Consumer Price Index.

RESULTS: The first step Veil Law (1976) blunted the steady increase in cigarette sales observed since World War II. The second period began with the Evin Law (1991). This law banned tobacco advertising and withdrew tobacco from the Consumer Price Index allowing for marked and repeated increases in taxes. Sales decreased over the next 6 years, from 97.1 billion to 83.0 billion in 1997 but then remained steady for 5 years (83.5 billion in 2001). The first Cancer Plan (2003) imposed three tax increases in a year (39% increase in price). Cigarette sales decreased to 54.9 billion in 2004.

This period ended in 2004 when a moratorium on tobacco taxes was announced. The policies which have been implemented since President Sarkozy was elected in 2007 were flawed and protected the interests of the tobacco industry: prevalence of smoking is now increasing, mainly among the younger generation.

Since 1991, the cigarette market has nearly halved but the decline has been a stop-and-go erratic process. The two 5-year periods (1997-2002 and 2005-2010) during which consumption leveled off seem to demonstrate that government-driven health policies could have been influenced by commercial interests.

CONCLUSION: Tobacco control efforts, especially tobacco tax increases, need to be sustained and shielded from the influence of the tobacco industry.

http://andreevin.narod.ru/journal/2012/02/59.htm#_UGGQAK7Z3jK

http://andreevin.narod.ru/journal/2012/02/TCPHEE_02_02_59.pdf

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

Cost-effectiveness of internet and telephone treatment for smoking cessation: an economic evaluation of The iQUIT Study

Tob Control Published Online First: 25 September 2012

Amanda L Graham, Yaojen Chang, Ye Fang, Nathan K Cobb, David S Tinkelman, Raymond S Niaura, David B Abrams, Jeanne S Mandelblatt

Abstract

Background Internet and telephone treatments for smoking cessation can reach large numbers of smokers. There is little research on their costs and the impact of adherence on costs and effects.

Objective To conduct an economic evaluation of The iQUIT Study, a randomised trial comparing Basic Internet, Enhanced Internet and Enhanced Internet plus telephone counselling ('Phone') at 3, 6, 12 and 18 months.

Methods We used a payer perspective to evaluate the average and incremental cost per quitter of the three interventions using intention-to-treat analysis of 30-day single-point prevalence and multiple-point prevalence (MPP) abstinence rates. We also examined results based on adherence. Costs included commercial charges for each intervention. Discounting was not included given the short time horizon.

Results Basic Internet had the lowest cost per quitter at all time points. In the analysis of incremental costs per additional quitter, Enhanced Internet+Phone was the most cost-effective using both single and MPP abstinence metrics. As adherence increased, the cost per quitter dropped across all arms. Costs per quitter were lowest among participants who used the 'optimal' level of each intervention, with an average cost per quitter at 3 months of US\$7 for Basic Internet, US\$164 for Enhanced Internet and US\$346 for Enhanced Internet+Phone.

Conclusions 'Optimal' adherence to internet and combined internet and telephone interventions yields the highest number of quitters at the lowest cost. Cost-effective means of ensuring adherence to such evidence-based programmes could maximise their population-level impact on smoking prevalence.

<http://tobaccocontrol.bmj.com/content/early/2012/09/24/tobaccocontrol-2012-050465.abstract>

A cross-country comparison of secondhand smoke exposure among adults: findings from the Global Adult Tobacco Survey (GATS)

Tob Control Published Online First: 27 September 2012

Brian A King, Sara A Mirza, Stephen D Babb, for the GATS Collaborating Group

Abstract

Objective Exposure to secondhand smoke (SHS) from burning tobacco products causes disease and premature death among non-smoking adults and children. The objective of this study was to determine the nature, extent and demographic correlates of SHS exposure among adults in low- and middle-income countries with a high burden of tobacco use.

Methods Data were obtained from the Global Adult Tobacco Survey (GATS), a nationally representative household survey of individuals 15 years of age or older. Interviews were conducted during 2008–2010 in Bangladesh, Brazil, China, Egypt, India, Mexico, the Philippines, Poland, Russia, Thailand, Turkey, Ukraine, Uruguay and Vietnam. Descriptive statistics were used to determine the prevalence and correlates of SHS exposure in homes, workplaces, government buildings, restaurants, public transportation and healthcare facilities.

Results Exposure to SHS in the home ranged from 17.3% (Mexico) to 73.1% (Vietnam). Among those who work in an indoor area outside the home, SHS exposure in the workplace ranged from 16.5% (Uruguay) to 63.3% (China). Exposure to SHS ranged from 6.9% (Uruguay) to 72.7% (Egypt) in government buildings, 4.4% (Uruguay) to 88.5% (China) in restaurants, 5.4% (Uruguay) to 79.6% (Egypt) on public transportation, and 3.8% (Uruguay) to 49.2% (Egypt) in healthcare facilities.

Conclusions A large proportion of adults living in low- and middle-income countries are exposed to SHS in their homes, workplaces, and other public places. Countries can enact and enforce legislation requiring 100% smoke-free public places and workplaces, and can also conduct educational initiatives to reduce SHS exposure in homes.

<http://tobaccocontrol.bmj.com/content/early/2012/09/26/tobaccocontrol-2012-050582.abstract>

Also:

An inexpensive particle monitor for smoker behaviour modification in homes

<http://tobaccocontrol.bmj.com/content/early/2012/09/25/tobaccocontrol-2011-050401.abstract>

Tobacco smoking among doctors in mainland China: a study from Shandong province and review of the literature

Tobacco Induced Diseases 2012, 10:14 (24 September 2012)

Smith DR, Zhao I, Wang L

Abstract

Background

Tobacco control represents a key area in which doctors can make a significant positive impact on their patients' lives. Despite this fact, however, doctors in certain regions of China are known to smoke tobacco at rates similar to or even exceeding those seen within the general population.

Objective

This study sought to investigate the smoking habits of doctors at a teaching hospital in Shandong province, as well as providing a brief review of smoking research that has been conducted among doctors elsewhere in China.

Method

An anonymous questionnaire survey was distributed to doctors working at a university teaching hospital in 2008, as part of a larger study of occupational health issues in the healthcare profession.

Results

The overall smoking prevalence rate of doctors in this study was 36.3% with significant differences observed between the genders (males: 46.7% and females: 5.3%). Age and total career length were also significantly correlated with smoking habit, although no significant associations were found with department of employment.

Conclusions

Overall, our study suggests that smoking rates among doctors in Shandong province are higher than those documented in many other countries, a finding which is consistent with previous research conducted in some other Chinese provinces. Addressing this issue from an intrinsic cultural perspective will clearly need to form the cornerstone of tobacco control efforts within the Chinese medical community in future years.

<http://www.tobaccoinduceddiseases.com/content/10/1/14/abstract>

<http://www.tobaccoinduceddiseases.com/content/pdf/1617-9625-10-14.pdf>

Also:

The association between alcohol and tobacco use among elementary and high school students in Crete, Greece

<http://www.tobaccoinduceddiseases.com/content/10/1/15/abstract>

<http://www.tobaccoinduceddiseases.com/content/pdf/1617-9625-10-15.pdf>

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

Smell in the City: Smoking and Olfactory Politics

Urban Stud

Published online before print **September 18, 2012**

[Qian Hui Tan](#)

Abstract

This paper explores smoking in the city as a sensorially transgressive practice that leads to the generation of sensuous 'effluent'. An assessment of the relevant literature on tobacco control and urban geography reveals that it is very much sensorially sterile. Accordingly, it is hoped to redress this gap by being attentive to how a smoking related olfactory politics manifests itself in Singapore. By teasing out the embodied sensations that sensuous urban encounters between smokers and non-smokers can elicit, the paper argues that stigmatising sensory impressions of moral defilement are often ('legitimately') ascribed onto bodies emitting and reeking of cigarette smoke. Alongside this, the paper demonstrates how these unflattering sensory impressions can have implications for the segregation of smokers in public spaces. As a consequence of such socio-spatial stratifications of odorous bodies, some strategies of impression management are outlined that smokers adopt so as to fashion a more palatable moral and olfactory presentation of the self. Finally, the paper concludes with some thoughts on nurturing new sensory responses as a means of coping with urban diversity.

<http://usj.sagepub.com/content/early/2012/09/18/0042098012453855.abstract>

Related coverage:

Even the Smell of Cigarettes Changes How We Use Public Spaces - The Atlantic Cities

<http://www.theatlanticcities.com/arts-and-lifestyle/2012/09/smokers-and-battle-public-space/3423/>

Referenced video:

Bill Hicks - Smoking

http://www.youtube.com/watch?v=9_9NtA80qHg&feature=player_embedded

Evaluating effects of statewide smoking regulations on smoking behaviors among participants in the Survey of the Health of Wisconsin

WMJ. 2012 Aug;111(4):166-71; quiz 172.

[Guzmán A](#), [Walsh MC](#), [Smith SS](#), [Malecki KC](#), [Nieto FJ](#).

Abstract

BACKGROUND:

Studies have shown that laws banning smoking in public places reduce exposure to secondhand smoke, but the impact of such laws on exposure to smoke outside the home and on household smoking policies has not been well documented. The goal of this study was to evaluate the effects of 2009 Wisconsin Act 12, a statewide smoke-free law enacted in July 2010, among participants in the Survey of the Health of Wisconsin (SHOW).

METHODS:

Smoking history and demographic information was gathered from 1341 survey participants from 2008 to 2010. Smoking behaviors of independent samples of participants surveyed before and after the legislation was enacted were compared.

RESULTS:

The smoking ban was associated with a reduction of participants reporting exposure to smoke outside the home (from 55% to 32%; $P < 0.0001$) and at home (13% to 7%; $P = 0.002$). The new legislation was associated with an increased percentage of participants with no-smoking policies in their households (from 74% to 80%; $P = .04$). The results were stronger among participants who were older, wealthier, and more educated.

CONCLUSION:

Smoke-free legislation appears to reduce secondhand smoke exposure and to increase no-smoking policies in households. Further research should be conducted to see if these effects are maintained.

<http://viewer.zmags.com/publication/3b0190ed#/3b0190ed/20>

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

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