

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

To: [Undisclosed-Recipient:](#)

Date: 21.6.2012 13:51:36

Subject: STAN Bulletin: 8th Edition: 21-June-2012

Smoking & Tobacco Abstracts & News

**STAN Bulletin
8th Edition
21-June-2012**

Editor's note: The French-language Swiss paper *Le Matin* recently published a substantive [report](#) on the already-known activities of University of Lausanne professor of psychology, J-P Dauwalder, and his intimate connections with Philip Morris. One 1993 memo by Helmut Reif, a past Director of Science and Technology for Philip Morris Europe, is actually entitled [Project Dauwalder](#). Another document lists Dauwalder among many researchers on the company payroll: '[Sponsoring / Supporting "Independent" Scientific Research in Europe](#)'. (Apparently, even Philip Morris was casting doubts on the sincerity of its own efforts by the use of scare quotes around the word "Independent".) Curiously, whether for Swiss legal or other reasons, *Le Matin* never identifies Dauwalder and even blanks out his name from one report ([Switzerland: Long Range Plan 1993-1995](#). See document p. 10, PDF p. 22) highlighted with the article, but there is no mistaking whose work is being discussed.

In an excellent sidebar editorial (available at the same [link](#)), associate editor-in-chief Blaise Willa notes that "the renowned University of Lausanne professor is neither a criminal nor an outlaw. He's just an accomplice of one of the most massive propaganda campaigns in history, the one waged by the tobacco industry... Perverse, cynical, as low as one can go, this vast disinformation campaign had but one objective: To add customers and, above all, to not lose them." (My translation.) A worthwhile read, even if you have to go through an online translation service. The same applies for [Dynamique de la tolérance](#), a pilot project financed by Philipp (sic) Morris for which Dauwalder was a co-author. A shorter, related report, '[Dynamics of tolerant behaviour](#)', is available in English.

Unrelated, but noteworthy, the [video](#) and [transcript](#) of Tuesday Question Time from the UK House of Lords. Although one Conservative Lord garners the headlines for his risible claim that the government treats the tobacco industry "shabbily", there are a number of encouragingly harsh and mocking comments made about the industry in general, and former Health Minister and BAT chairman and director Kenneth Clarke, specifically, from members of different parties, as well as a re-statement of governmental obligations under the terms of Article 5.3 of the FCTC in the initial nine minutes of the clip that are devoted to tobacco issues.

Stan Shatenstein

In the News:

- Canada: [Larger tobacco product graphic warnings with quitline information now fully in force](#) [[Video](#)] [[En français](#)]
- Canada: [The Gazette: Editorial: On tobacco, warnings that seem to be working](#); [Graphic: Oral cancer warning](#)
- Canada: Ottawa: [Capital looks to add hookah bars to smoking ban bylaw](#)
- Indonesia: [ABC Australia Video: Child smokers prompt legal case](#); [Manpower Minister Calls for Delay on Regulations](#)
- Netherlands: [Half of cafés & bars still allow smoking, discotheques doing better](#) [[Dutch-language: PR & Report](#)]
- S. Africa: [BAT: Supreme Court stybs out cigarette ads](#); [Health rights](#); [SHS ban proposed](#); [Business Day: Editorial: Nanny State](#)
- Switzerland: PM: [Dauwalder: Tobacco lobby infiltrated University of Lausanne: Perverse cigarette makers](#)
- Vietnam: [New law bans smoking in public, tobacco sales to under-18s](#)
- UK: [House of Lords: Video: Conservative peer accuses government of treating tobacco industry 'shabbily'](#) [[Transcript](#)]
- US: [FDA: Cigar industry braces for new regulations but nothing specific yet adopted](#)

- US: [Recycling programs tackle non-biodegradable problem of cigarette butt litter](#)

Noteworthy:

"If, in rejecting tobacco industry exceptionalism, we assume that the findings summarised in this article are capable of being extended to other companies, the prognosis for voluntary forms of CSR as a means of managing the increasing costs of business activity to public health and the environment seems limited, at least where socially responsible business practices diminish company earnings. If managers typically start from an assumption that a firm is already socially responsible, and that criticism directed at the firm is unjustified or politically motivated, then they are more likely to come to regard CSR as a public relations tool or device for managing regulatory environments than as a medium for undertaking meaningful change." [Fooks G et al. The Limits of Corporate Social Responsibility: Techniques of Neutralization, Stakeholder Management and Political CSR, [J Bus Ethics](#)]

In this Edition:

- Addiction - Etter: MWS-R: A test of proposed new tobacco withdrawal symptoms
- Addict Behav - Rose: US: Adolescent nicotine dependence symptom profiles & future daily smoking risk
- ACER - Toll: US: NY: Tobacco Quitlines Need to Assess & Intervene with Callers' Hazardous Drinking
- Arch Dermatol - Leonardi-Bee: Smoking & Nonmelanoma Skin Cancer Risk: Systematic Review & Meta-analysis
- Aust NZ J Psych - Cooper: Australia: Tobacco smoking among people with a psychotic illness
- BMC Public Health - Perez: Australia: NSW: Below-the-line tobacco promotion: Adolescent & young adult exposure
- BMJ - Singh/Hilton: Varenicline: Flaws in analysis lead to misleading cessation safety conclusions
- CEJPH - Hrubá: Czech Republic: Limits on effectiveness of school-based anti-smoking programmes
- Front Biosci - Fini: Role of obesity, alcohol & smoking on bone health; Hardison: CS & chemotaxis
- Harm Reduct J - Borland: Fact Sheet Effect on harmfulness beliefs of alternative nicotine delivery & cigarettes
- J Abnorm Psych - Baker: Are Tobacco Dependence & Withdrawal Related Amongst Heavy Smokers?
- JAMA - O'Connor: Editorial: Lung Cancer Screening, Radiation, Risks, Benefits & Uncertainty
- J Bus Ethics - Fooks: UK: BAT: Limits of CSR, Neutralization Techniques, Stakeholder Management & Politics
- J Health Econ - Zhao: China: Does smoking affect schooling? Evidence from rural teenagers
- JMIR - Bowen: US: Smoking Prevention Website Short-term Effects in American Indian Youth
- JPET - Wang: PAHs: Phenanthrene Metabolism in Smokers: Diagnostic Plot Approach
- Lung Cancer - Jonnalagadda: US: CT-scan: Beliefs & attitudes about lung cancer screening among smokers
- NZ Med J - Laugesen: NZ: One billion fewer cigarettes, 100,000 fewer smokers
- N&TR - Rostron: US: Lung Cancer Mortality Risk for Menthol Cigarette Smokers
- Psych Addict Behav - Setodji: US: Friends Moderate Pro-Smoking Media Effects on College Student Intentions
- Reg Tox Pharm - Bodnar: US: RJRT: Mainstream Smoke Chemistry Analysis: 2009 Cigarette Market Samples
- Sci World J - Post: Sweden: Psychosocial determinants of tobacco use attrition in youth
- Sociol Health Illn - Rooke: UK: England: Harm reduction & the medicalisation of tobacco use
- Tob Control - Køster: Denmark: MUDs: Neighbour smoke: SHS exposure in multiunit dwellings, 2010
- Tob Control - Roberts: FSU: Knowledge of smoking health impacts & public attitudes towards TC
- Trials - Song: Self-help materials for the prevention of smoking relapse: RCT protocol

Abstracts:

A test of proposed new tobacco withdrawal symptoms

Addiction

[Accepted Article \(Accepted, unedited articles published online for future issues\)](#)

Accepted manuscript online: **15 JUN 2012**

Jean-François Etter, Michael Ussher and John R. Hughes

Abstract

Aims

Recent studies suggest that smoking cessation may cause more withdrawal symptoms than previously thought. The

widely used Minnesota Withdrawal Scale (MWS-R) was recently revised to include some of these newly described symptoms. We assessed the validity of MWS-R and other proposed self-reported measures of tobacco withdrawal symptoms.

Design and Setting

An Internet survey of daily and former smokers with repeated measurements, followed by a randomized trial among the daily smokers.

Participants

Daily smokers (n=1126) and former smokers (n=3239).

Measurements

Participants answered the original MWS (9 items), the 8 additional symptoms in the MWS-R and 23 other questions on tobacco withdrawal symptoms. Daily smokers were randomly assigned to either continue to smoke for 2 weeks or to stop smoking, and they answered follow-up surveys 1, 3 and 7 days after their target quit date.

Findings

Among the 31 proposed new symptoms tested by comparing recent quitters with continuing smokers, the only withdrawal-like symptom observed was worsening of mood swings. Post-cessation change in mood swings remained statistically significant after adjustment for baseline depression, irritability, impatience, restlessness, stress, or anxious/nervous. Also, abstinence improved sense of smell, sense of taste, and sore throat. Post-cessation change in symptoms intensities did not predict relapse.

Conclusions

Moods swings are a symptom of tobacco withdrawal that can be validly measured and are unpleasant. In contrast, smoking cessation also has positive, immediate effects, including improved sense of smell and taste and reduced sore throat.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03981.x/abstract>

Also:

Effectiveness of web-based tailored smoking cessation advice reports (iQuit): a randomised trial

<http://onlinelibrary.wiley.com/doi/10.1111/j.1360-0443.2012.03972.x/abstract>

Adolescent nicotine dependence symptom profiles and risk for future daily smoking

[Addict Behav.](#) 2012 May 22. [Epub ahead of print]

[Rose JS](#), [Lee CT](#), [Dierker LC](#), [Selya AS](#), [Mermelstein RJ](#).

Abstract

Recent research on adolescent smokers suggests that there are important differences in the types of nicotine dependence (ND) symptoms that emerge and different patterns of ND symptoms. The purpose of this study was to use data from the longitudinal Social and Emotional Contexts of Adolescent Smoking Patterns Study to identify latent subgroups of adolescent experimental and nondaily smokers varying in number and types of endorsed ND symptoms. Profiles were identified using baseline level of smoking, individual patterns of ND symptoms and other ND risk factors. Discrete time survival analysis was used to examine profile differences in probability of becoming daily smokers 48 months later. Four distinct subgroups of smokers with different patterns of smoking behavior, ND symptoms, and alcohol and other substance use emerged. Heavier smoking adolescents with high symptom endorsement, particularly the need to

smoke in the morning, were most likely to become daily smokers 48 months later. A subgroup of social smokers had high smoking exposure and symptom endorsement (except need to smoke in the morning), and high levels of other substance use. Despite lower rates of smoking frequency and quantity compared to the heavier smoking class, 36% of these adolescents smoked daily by 48 months, with a steeper decline in survival rates compared to other lighter smoking classes. Morning smoking symptoms and symptoms prioritizing smoking (i.e., choosing to spend money on cigarettes instead of lunch or smoking when ill or where smoking is forbidden) might quickly identify adolescent non-daily smokers with more severe dependence and higher risk for daily smoking. A focus on skills for avoiding social situations involving use of alcohol and other drugs and reducing peer smoking influences may be an important focus for reducing smoking and other substance use among social smokers.

<http://www.sciencedirect.com/science/article/pii/S030646031200192X>

Tobacco Quitlines Need to Assess and Intervene with Callers' Hazardous Drinking

Alcoholism: Clinical and Experimental Research

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

Article first published online: **15 JUN 2012**

Benjamin A. Toll, K. Michael Cummings, Stephanie S. O'Malley, Shannon Carlin-Menter, Sherry A. McKee, Andrew Hyland, Ran Wu, Jessica Hopkins and Paula Celestino

Abstract

Background

Based on published data showing that daily smokers have high rates of hazardous drinking and higher rates of smoking relapse, we hypothesized that New York State Smokers' Quitline (NYSSQL) callers would exhibit elevated rates of risky drinking and risky drinking callers would report lower rates of smoking cessation.

Methods

We assessed rates of hazardous drinking among 88,479 callers to the NYSSQL using modified NIAAA guidelines. Using 2 routine NYSSQL short-term follow-up interviews ($n = 14,123$ and $n = 24,579$) and a 3-month follow-up interview ($n = 2,833$), we also compared smoking cessation rates for callers who met criteria for hazardous drinking compared to moderate drinkers and nondrinkers.

Results

At baseline, 56% of callers reported drinking, and 23% reported hazardous drinking using modified NIAAA guidelines. Hazardous drinkers did not differ on measures of smoking cessation outcomes compared to nondrinkers but did have lower smoking cessation rates compared to persons who reported moderate alcohol consumption for the enhanced services program 1-week follow-up (adjusted OR [95% CI] = 1.09 [1.01, 1.17], $p = 0.04$) and the standard 2-week follow-up (adjusted OR [95% CI] = 1.17 [1.07, 1.29], $p = 0.001$).

Conclusions

Nearly a quarter of smokers calling the NYSSQL reported a hazardous drinking pattern, which was associated with lower cessation outcomes compared to those who reported a moderate drinking profile. Given the large number of high-risk drinkers who can be identified through a quitline, tobacco quitlines may provide a venue for providing brief alcohol interventions to these high-risk drinkers. Future studies should evaluate whether a brief alcohol intervention would result in improved smoking cessation rates for hazardous drinking smokers.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1530-0277.2012.01767.x/abstract>

Related PR:

Smoking-Cessation 'Quitlines' Could Help Identify Hazardous Drinkers

<http://www.sciencedaily.com/releases/2012/06/120615204735.htm>

Smoking and the Risk of Nonmelanoma Skin Cancer

Systematic Review and Meta-analysis

Arch Dermatol. 2012;():1-8. doi:10.1001/archdermatol.2012.1374

Jo Leonardi-Bee, PhD; Thomas Ellison, BMedSci; Fiona Bath-Hextall, PhD

Abstract

Objective To perform a systematic review and meta-analysis to collate evidence of the effects of smoking on the risk of nonmelanoma skin cancer.

Data Sources We searched 4 electronic databases (from inception to October 2010) and scanned the reference lists of the publications retrieved to identify eligible comparative epidemiologic studies.

Study Selection Titles, abstracts, and full text were assessed independently by 2 authors against prespecified inclusion/exclusion criteria.

Data Extraction Data were extracted and quality was assessed independently by 2 authors using the Newcastle-Ottawa Scale.

Data Synthesis Meta-analysis was performed using random-effects models. Results are presented as odds ratios (ORs) with 95% CIs. Heterogeneity was assessed using I^2 . Twenty-five studies were included. Smoking was significantly associated with cutaneous squamous cell carcinoma (OR, 1.52; 95% CI, 1.15-2.01; $I^2 = 64%$; 6 studies). Smoking was not significantly associated with basal cell carcinoma (OR, 0.95; 95% CI, 0.82-1.09; $I^2 = 59%$; 14 studies) or nonmelanoma skin cancer (OR, 0.62; 95% CI, 0.21-1.79; $I^2 = 34%$; 2 studies).

Conclusion This study clearly demonstrates that smoking increases the risk of cutaneous squamous cell carcinoma; however, smoking does not appear to modify the risk of basal cell carcinoma.

<http://archderm.jamanetwork.com/article.aspx?articleid=1184491>

Also:

Smoking, a Dangerous Habit for the Skin Comment on "Smoking and the Risk of Nonmelanoma Skin Cancer"

<http://archderm.jamanetwork.com/article.aspx?articleid=1184499>

Related news coverage:

Smoking Might Raise Your Odds for Skin Cancer - HealthDay News

<http://news.yahoo.com/smoking-might-raise-odds-skin-cancer-200606460.html>

Referenced CC&C study:

Case-control study of smoking and non-melanoma skin cancer

<http://www.springerlink.com/content/9783444k55722502/>

Tobacco smoking among people living with a psychotic illness: The second Australian survey of psychosis

[Aust N Z J Psychiatry.](#) 2012 May 29. [Epub ahead of print]

[Cooper J](#), [Mancuso SG](#), [Borland R](#), [Slade T](#), [Galletly C](#), [Castle D](#).

Abstract

Objective: The aims of this study were to (a) describe patterns of tobacco smoking among Australians living with a psychotic illness and (b) explore the association between smoking and measures of psychopathology, psychiatric history, psychosocial functioning, physical health, substance use and demographic characteristics. **Methods:** Data were from 1812 participants in the 2010 Australian Survey of High Impact Psychosis. Participants were aged 18-64 years and resided in seven mental health catchment sites across five states of Australia. Bivariate statistics were used to compare

smokers with non-smokers on the measures of interest, and to compare ICD-10 diagnostic categories on measures of smoking prevalence, nicotine addiction and quitting history. Multivariate logistic regression was used to test whether (a) demographics and psychiatric history were associated with having ever smoked and (b) whether symptoms and psychosocial functioning were independently associated with current smoking, after controlling for demographics, psychiatric history and substance use. Results: The prevalence of current tobacco smoking was 66.6% (72% of men and 59% of women); lifetime prevalence was 81%. In univariate analyses, individuals with a diagnosis of schizophrenia or schizoaffective disorder were most likely to be smoking tobacco (70%) and were more nicotine dependent. Smokers reported worse perceived physical health, lower body mass index and waist circumference, and more lifetime medical conditions. A younger age of illness onset, male gender and low education were associated with having ever smoked. Associations with current smoking included low education, male gender, no formal employment, worse negative symptoms, higher daily caffeine consumption, and alcohol dependence and substance abuse/dependence. Conclusions: The prevalence of tobacco smoking is high amongst people with a psychotic disorder, and is associated with adverse mental health symptoms as well as high rates of other substance use, poorer subjective physical health, and a higher risk of the many known health consequences of smoking.

<http://anp.sagepub.com/content/early/2012/05/29/0004867412449876.abstract>

Related Aust NZ J Psych report:

The impact of alcohol and illicit drugs on people with psychosis: The second Australian national survey of psychosis
<http://anp.sagepub.com/content/early/2012/04/02/0004867412443900>

Tobacco promotion 'below-the-line': Exposure among adolescents and young adults in NSW, Australia

BMC Public Health 2012, 12:429 doi:10.1186/1471-2458-12-429

Published: 12 June 2012

Donna A Perez, Anne C Grunseit, Chris Rissel, James Kite, Trish Cotter, Sally Dunlop and Adrian Bauman

Abstract

Background

Exposure to tobacco advertising and promotion increases the likelihood of smoking amongst young people. While there is a universal ban on traditional or 'above-the-line' advertising in Australia, the types and extent of exposure of young people to 'below-the-line' tobacco advertising and promotion is largely unknown. In this study we aim to identify levels of exposure of New South Wales (NSW) adolescents and young adults to tobacco promotion at the point-of-sale (PoS), on the internet, in entertainment media and at venues such as events or festivals and pubs, clubs, nightclubs, or bars; and to identify those most at risk of exposure.

Methods

A telephone survey of 1000 NSW adolescents and young adults aged 12 to 24 years was conducted. Self-reported exposure to tobacco promotions or advertising in the last month were measured in four areas: (1) promotions or advertising at (a) events or festivals and (b) pubs, clubs, nightclubs or bars, (2) on the internet, (3) people smoking cigarettes in (a) movies, (b) TV shows, (c) video games and (d) on the internet, and (4) displays of cigarette packs for sale at (a) large supermarkets, (b) grocery stores or small supermarkets, (c) convenience stores, and (d) service or petrol stations. Smoking status and susceptibility to smoking was also assessed.

Results

A substantial proportion of the young people surveyed reported seeing tobacco promotion sometimes or often in the last month over most of the channels studied. The highest levels of exposure were at the PoS (approx. two-thirds) and to people smoking cigarettes in movies (77%). Lower levels of exposure to tobacco promotions and imagery were reported on the internet (20%); at events or festivals (22.5%); in pubs, clubs, nightclubs or bars (31%); and in video games (23%). However, the odds of exposure through video games increased by 8% for every additional hour spent on the internet per day.

Conclusions

This study shows that adolescents and young adults in NSW are exposed to tobacco advertising or promotion at the PoS, on the internet, in entertainment media and at venues such as events or festivals and pubs, clubs, nightclubs or

bars, despite the restrictions on the marketing of tobacco in Australia.

<http://www.biomedcentral.com/1471-2458/12/429/abstract>
<http://www.biomedcentral.com/content/pdf/1471-2458-12-429.pdf>

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

Letter

Varenicline's adverse events

Flaws in analysis lead to misleading conclusions about varenicline's safety in smoking cessation

BMJ 2012; 344 doi: 10.1136/bmj.e3873 (Published 12 June 2012)

Sonal Singh, Yoon K Loke

The meta-analysis by Prochaska and Hilton has several methodological limitations in data analysis and interpretation, which lead to misleading conclusions. Despite the removal of cardiovascular events from the trials and a statistical approach that has limited power to detect a significant effect, there is an excess risk of cardiovascular events with varenicline in all five measures reported.

The risk difference model Prochaska and Hilton used is statistically underpowered at low event rates and biases the estimates towards the null. This flawed approach is not recommended by the Cochrane Handbook, which states that the Peto odds ratio method was found to be "the least biased and most powerful method" and that risk difference analytical methods "tended to show conservative confidence interval coverage and low statistical power when risks of events were low." ...

Adequately powered randomised controlled trials are needed because none of the trials evaluated cardiovascular events as a primary outcome or was powered to detect individual differences in cardiovascular outcomes between varenicline and placebo. The CATS study, a 52 week post-marketing study comparing varenicline, placebo, bupropion, and nicotine replacement therapy in around 8000 patients, should provide further information on the size of this risk.

Clinicians need to consider the overall risks of varenicline noted in the prescribing information—serious cardiovascular risk and risks of suicide and depression—and balance them against its benefits. The United States Veterans Administration does not recommend varenicline as first line treatment for smoking cessation.

<http://www.bmj.com/content/344/bmj.e3873>

Also:

Authors' reply to Singh and Loke
<http://www.bmj.com/content/344/bmj.e4033.extract>

Referenced BMJ study:

Risk of cardiovascular serious adverse events associated with varenicline use for tobacco cessation: systematic review and meta-analysis

<http://www.bmj.com/content/344/bmj.e2856>
http://www.bmj.com/highwire/filestream/582907/field_highwire_article_pdf/0.pdf

Note: Open Access. Full text PDF freely available from link immediately above. CMAJ study also Open Access, but not Commentary.

Related CMAJ study, Data Supplement & Commentary:

Risk of serious adverse cardiovascular events associated with varenicline: a systematic review and meta-analysis

<http://www.cmaj.ca/content/early/2011/07/04/cmaj.110218>
<http://www.cmaj.ca/content/early/2011/07/04/cmaj.110218.full.pdf+html>

Online Appendices

<http://www.cmaj.ca/content/early/2011/07/04/cmaj.110218/suppl/DC1>

Varenicline for smoking cessation: Is it a heartbreaker?
<http://www.cmaj.ca/content/early/2011/07/04/cmaj.110804>

What limits the effectiveness of school-based anti-smoking programmes?

[Cent Eur J Public Health](#). 2012 Mar;20(1):18-23.

Hrubá D, Zaloudíková I.

Abstract

BACKGROUND: It is generally accepted that living in families where there are smokers, children are stressed not only by the harmful physical exposure to second-hand and third-hand tobacco smoke, but also by the negative models of the adult relatives' behaviour, as relatives who smoke can inspire children to imitate this behaviour, influencing attitudes towards, and early experiments with smoking. In this paper, some of the most important results about influence of family smoking on the effects of the anti-smoking educational programme "Non-smoking Is Normal" are described.

METHODS:

The school-based programme was created by medical and educational specialists and targets children at the first level of primary schools (aged from 6 to 11 years). The data about interesting outcomes of the programme (knowledge, attitudes, behaviour) were collected by anonymous questionnaire, administered twice in each school year: one month before the complex of 5 lectures (pre-tests) and 4-5 months after the last lecture (post-tests). The sample of participants (860-910) was divided into four groups, according to the intervention and family backgrounds: (1) programme children from smoking families "P-S"; (2) control children from smoking families "C-S"; (3) programme children from non-smoking families "P-NS"; (4) control children from non-smoking families "C-NS". The differences in the frequency of children's answers were analysed using the tests in statistic Epi Info software, version 6.04a (chi-square, Mantel Haenszel, Yates, Fisher).

RESULTS:

In the programme group, the number of children with smoking relatives was significantly higher than in the control group (80.1% vs. 73.0%, $p < 0.01$) as well as of those who reported frequent/daily exposure to secondhand smoke at homes and/or in cars (49.5% vs. 40.0%, $p < 0.01$). Smoking families significantly influenced the children's seeking of smoking friends (40% vs. 17%, $p < 0.01$). The programme has significantly increased the amount of knowledge about health risks of smoking. Both in the programme and control groups of children from non-smoking families, the frequency of critics of adults smoking was significantly higher all the time of the study ($p < 0.05$ and 0.01 resp.); however, the programme influenced children's opinions about smoking (criticism) only partially. Children's actual intentions about their smoking in the future was fully influenced by their smoking household environment: the number of "future no-smokers" has decreased in time and was significantly less frequent among children from smoking families ($p < 0.01$). The frequency of those willing to smoke significantly increased within the period between 3rd and 5th grades, both in the programme and the control groups ($p < 0.01$). An almost linear increase of active experimentations with cigarette smoking in follow-up monitoring was seen, trends of smoking children were steeper in groups from smoking families. The number of experiments with smoking was significantly lower in programme children of non-smoking parents only at the end of the study ($p < 0.05$).

CONCLUSIONS:

Despite of the effort to initiate parental participation on the primary prevention of smoking, we have confirmed that smoking in families decreased the efficacy of anti-smoking intervention targeted on young children at school age.

http://www.szu.cz/svi/cejph/show_en.php?kat=archiv/2012-1-04

Also:

Parental education and family status--association with children's cigarette smoking
http://www.szu.cz/svi/cejph/show_en.php?kat=archiv/2012-1-08

Role of obesity , alcohol and smoking on bone health

[Front Biosci \(Elite Ed\)](#). 2012 Jun 1;4:2686-706.

[Finì M](#), [Salamanna F](#), [Veronesi F](#), [Torricelli P](#), [Nicolini A](#), [Benedicenti S](#), [Carpi A](#), [Giavaresi G](#).

Abstract

The burden of osteoporosis is increasing in all societies. In comparison with other organs or apparatuses fewer studies have focused on incorrect lifestyles and bone. This article reviews clinical and experimental studies on the effects of obesity, alcohol abuse and smoking on bone. Overweight and obesity protect bone, thus reducing the fracture risk and the development of osteoporosis in older adults. However, extreme obesity (body mass index more than 40 kilogram/meter squared) seems to be a risk factor for osteoporosis. Moderate alcohol consumption may have a protective effect, whereas excessive consumption is an important risk factor. Cytokines are the main mediators of the detrimental effects of obesity and alcohol. Smoking contributes to bone loss and fracture probably by interfering with estrogens, calcium and vitamin D. Health information campaigns against these harmful lifestyles should be strengthened by using available scientific information to increase awareness about their consequences on the bone.

<http://www.bioscience.org/2012/V4e/af/575/fulltext.htm>

Also:

Cigarette smoke enhances chemotaxis via acetylation of proline-glycine-proline

<http://www.bioscience.org/2012/v4e/af/552/list.htm>

Effects of a Fact Sheet on beliefs about the harmfulness of alternative nicotine delivery systems compared with cigarettes

Harm Reduction Journal 2012, 9:19 (11 June 2012)

Borland R, Li L, Cummings MK, O'Connor R, Mortimer K, Wikmans T, Ramstrom L, King B, McNeil A

Abstract

Background

This study explored the value of providing information in a Fact Sheet to correct misperceptions about the relative harmfulness of nicotine replacement products (NRT) and smokeless tobacco (ST), when compared to cigarette smoking.

Methods

Four convenience samples from different countries (Australia, UK, Sweden and USA) were surveyed concerning their beliefs about the relative harmfulness of smokeless tobacco and NRT. Study participants were given the Fact Sheet that explained that nicotine, as used by consumers, is not particularly harmful and explained why. They were resurveyed one week later regarding their beliefs about the relative harmfulness of smokeless tobacco and NRT and future intentions to use the products.

Results

In all four samples knowledge increased by similar amounts and beliefs regarding the lower harmfulness of smokeless tobacco increased. However, misconceptions remained common and responses to belief measures were not always consistent. Likelihood of use of ST increased in all four samples after exposure to the Fact Sheet, but interest in NRT use only increased in the US sample.

Conclusions

A Fact Sheet such as this one can help address misconceptions about NRT and smokeless tobacco, at least in the short term. However, as is true of most educational interventions, exposure to a single educational session is not sufficient to overcome misperceptions that smokers have about the relative harmfulness of oral versus combustible forms of nicotine delivery.

<http://www.harmreductionjournal.com/content/9/1/19/abstract>

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

Are Tobacco Dependence and Withdrawal Related Amongst Heavy Smokers? Relevance to Conceptualizations of Dependence

J Abnorm Psychol. 2012 May 28. [Epub ahead of print]

[Baker TB](#), [Piper ME](#), [Schlam TR](#), [Cook JW](#), [Smith SS](#), [Loh WY](#), [Bolt D](#).

Abstract

Measured tobacco dependence is typically only modestly related to tobacco withdrawal severity among regular smokers making a quit attempt. The weak association between dependence and withdrawal is notable because it conflicts with core theories of dependence and because both measures predict cessation outcomes, suggesting they both index a common dependence construct. This study used data from a smoking cessation comparative effectiveness trial (N = 1504) to characterize relations of tobacco dependence with craving and negative affect withdrawal symptoms using multiple dependence measures and analytic methods to detect both additive and interactive effects and to determine whether withdrawal meaningfully mediates the influence of dependence on smoking cessation. We conclude: (a) Although univariate analyses suggest dependence and withdrawal measures are only modestly interrelated, more powerful analytic techniques show they are, in fact, meaningfully related and their shared variance is associated with cessation likelihood; (b) there are clear differences between craving and negative affective withdrawal symptoms, with the former more related to smoking heaviness and the latter related to trait measures of negative affect; moreover, craving more strongly mediates dependence effects on cessation; and (c) both craving and negative affect withdrawal symptoms are strongly related to a pattern of regular smoking that is sensitive to the passage of time and powerfully affected by smoking cues. These findings support models that accord an important role for associative processes and withdrawal symptoms, especially craving, in drug dependence. The findings also support the use of withdrawal variables as criteria for the evaluation of dependence measures.

<http://psycnet.apa.org/psycinfo/2012-13969-001/>

Editorial

Lung Cancer Screening, Radiation, Risks, Benefits, and Uncertainty

JAMA

June 13, 2012—Vol 307, No. 22

George T. O'Connor, MD, MS; Hiroto Hatabu, MD, PhD

Computed tomography (CT) scanning, which was introduced for imaging the head in 1972 and became widely available for imaging the rest of the body by the early 1980s, has revolutionized the practice of medicine and surgery. This technology, for which the Nobel Prize was awarded in 1979, has been used to diagnose and guide the management of diseases affecting every part of the body, improving quality of life and saving countless lives. Two articles in this issue of *JAMA*, however, point out the complexities involved in deciding whether to extend the use of CT scanning from diagnosis to screening and in determining whether the current use of CT scanning is appropriate or excessive...

In this issue of *JAMA*, Bach and colleagues report the results of their systematic review of randomized clinical trials (RCTs) and cohort studies addressing the benefits and risks of screening for early-stage lung cancer using low-dose CT (LDCT) scans. The authors focus on lung cancer-specific and all-cause mortality outcomes in RCTs, avoiding the mistaken inferences that can result from lead-time bias, length-biased sampling, and overdiagnosis with other outcomes and designs. Their review yielded only 3 RCTs from which valid inferences can be drawn concerning the effect of LDCT screening for lung cancer among current or former smokers aged 50 years or older. Of these 3 studies, the National Cancer Institute's National Lung Screening Trial (NLST) was by far the largest and most persuasive, driving the authors' conclusion that lung cancer mortality is reduced by LDCT screening of adults meeting the NLST entry criteria: age 55 to 74 years, current or former smokers, 30 or more pack-years, and still smoking or having done so within the past 15 years...

It is encouraging that advancing CT technology has permitted the reduction of ionizing radiation exposure, and in the near future, it may be possible to further decrease radiation exposure by an order of magnitude by combining modern

scintillation materials for x-ray detectors, iterative physical model-based reconstruction algorithms, and more personalized image-acquisition protocols. Diagnostic modalities without radiation exposure, such as magnetic resonance imaging and ultrasonography, may be able to be substituted for some CT scans. For lung cancer screening, more selective patient targeting on the basis of genotype, gene expression profile, or plasma biomarkers may in the future reduce the number needed to screen and thereby reduce risk relative to benefit.

One of the authors of this Editorial recently had an office visit with a patient in her late 50s regarding obstructive lung disease. She reported difficulty quitting smoking in part due to stress related to her sibling's recent diagnosis of lung cancer, and she asked whether there was a test available to see whether she might have lung cancer herself. After a brief discussion of some of the major findings of the NLST—including the likelihood of discovering 1 or more small nodules that would need to be followed up over time, perhaps adding to her anxiety—the patient and physician together decided to pursue an LDCT scan. This seems like a reasonable decision based on available information in 2012, but it is important to recognize, as do Bach et al in the final sentence of their abstract, that “uncertainty exists.”

<http://jama.jamanetwork.com/article.aspx?articleID=1182842>

Related JAMA studies & PR:

Benefits and Harms of CT Screening for Lung Cancer A Systematic Review

<http://jama.jamanetwork.com/article.aspx?articleid=1163892>

Use of Diagnostic Imaging Studies and Associated Radiation Exposure for Patients Enrolled in Large Integrated Health Care Systems, 1996-2010

<http://jama.jamanetwork.com/article.aspx?articleid=1182858>

Substantial Increase in Rate of Advanced Diagnostic Imaging, Associated Radiation Exposure

http://www.digitalnewsrelease.com/?q=jama_3840

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

The Limits of Corporate Social Responsibility: Techniques of Neutralization, Stakeholder Management and Political CSR

[Journal of Business Ethics](#), Online First, 2 March 2012

[Gary Fooks](#), [Anna Gilmore](#), [Jeff Collin](#), [Chris Holden](#) and [Kelley Lee](#)

Abstract

Since scholarly interest in corporate social responsibility (CSR) has primarily focused on the synergies between social and economic performance, our understanding of how (and the conditions under which) companies use CSR to produce policy outcomes that work against public welfare has remained comparatively underdeveloped. In particular, little is known about how corporate decision-makers privately reconcile the conflicts between public and private interests, even though this is likely to be relevant to understanding the limitations of CSR as a means of aligning business activity with the broader public interest. This study addresses this issue using internal tobacco industry documents to explore British-American Tobacco's (BAT) thinking on CSR and its effects on the company's CSR Programme. The article presents a three-stage model of CSR development, based on Sykes and Matza's theory of techniques of neutralization, which links together: how BAT managers made sense of the company's declining political authority in the mid-1990s; how they subsequently justified the use of CSR as a tool of stakeholder management aimed at diffusing the political impact of public health advocates by breaking up political constituencies working towards evidence-based tobacco regulation; and how CSR works ideologically to shape stakeholders' perceptions of the relative merits of competing approaches to tobacco control. Our analysis has three implications for research and practice. First, it underlines the importance of approaching corporate managers' public comments on CSR critically and situating them in their economic, political and historical contexts. Second, it illustrates the importance of focusing on the political aims and effects of CSR. Third, by showing how CSR practices are used to stymie evidence-based government regulation, the article underlines the importance of highlighting and developing matrices to assess the negative social impacts of CSR.

<http://www.springerlink.com/content/g54759418l022255/fulltext.html>

<http://www.springerlink.com/content/g54759418l022255/fulltext.pdf>

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

Does smoking affect schooling? Evidence from teenagers in rural China

[J Health Econ.](#) 2012 May 10;31(4):584-598. [Epub ahead of print]

[Zhao M](#), [Konishi Y](#), [Glewwe P](#).

Abstract

Youth smoking can biologically reduce learning productivity. It can also reduce youths' expected returns to education and lower their motivation to go to school, where smoking is forbidden. Using rich household survey data from rural China, this study investigates the effect of youth smoking on educational outcomes. Youth smoking is clearly an endogenous variable; to obtain consistent estimates of its impact, we use counts of registered alcohol vendors and a food price index as instrumental variables. Since the variable that measures smoking behavior is censored for non-smoking adolescents, we implement a two-step estimation strategy to account for the censored nature of this endogenous regressor. The estimates indicate that smoking one cigarette per day during adolescence can lower students' scores on mathematics tests by about 0.08 standard deviations. However, we find no significant effect of youth smoking on either Chinese test scores or total years of schooling.

<http://www.sciencedirect.com/science/article/pii/S0167629612000537>

Short-term Effects of a Smoking Prevention Website in American Indian Youth

[J Med Internet Res.](#) 2012 Jun 1;14(3):e81.

[Bowen DJ](#), [Henderson PN](#), [Harvill J](#), [Buchwald D](#).

Abstract**BACKGROUND:**

The rate of smoking commercial tobacco products among American Indian youth is double the rate for white youth. Interventions are needed to reduce this disparity.

OBJECTIVE:

To test the feasibility of a Web-based intervention to influence attitudes toward and intentions about smoking cigarettes among American Indian youth who attended a Native summer camp in the Northern Plains.

METHODS:

The study website, the SmokingZine, was originally developed and tested in Canadian youth, then adapted to be appropriate for American Indian youth. We conducted a randomized controlled trial to test the influence of exposure to the adapted SmokingZine website on smoking attitudes and behaviors among American Indian youth 12-18 years of age. Participants assigned to the intervention group were given access to the website for 1 hour per day during their camp experience and asked to sign in to the site and use it. Control group participants were not given access to the site.

RESULTS:

A total of 52% of intervention youth signed in to the website at least once. Among nonsmokers, intentions to try a cigarette in the intervention group declined from 16% to 0%, and increased from 8% to 25% in the control group ($P < .05$). Compared with the control group, youth in the intervention group were more likely to help others quit (21 percentage point change in intervention versus no change in control; $P < .05$) and had less positive attitudes about the drug effects of smoking (-0.19 change in intervention versus 0.67 in control; $P < .05$).

CONCLUSION:

These data indicate that SmokingZine needs more long-term, rigorous investigation as a way to keep American Indian youth from becoming regular smokers. Because the intervention group could use computers only 1 hour per day, increasing access might result in more visits and a greater effect of the website on smoking behaviors.

<http://www.jmir.org/2012/3/e81/>

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

Phenanthrene Metabolism in Smokers: Use of a Two-step Diagnostic Plot Approach to Identify Subjects with Extensive Metabolic Activation

JPET

Published online before print **June 6, 2012**

[Jing Wang](#), [Yan Zhong](#), [Steven G. Carmella](#), [J. Bradley Hochalter](#), [Diane Rauch](#), [Andrew Oliver](#), [Joni Jensen](#), [Dorothy K. Hatsukami](#), [Pramod Upadhyaya](#), [Stephen S. Hecht](#) and [Cheryl L. Zimmerman](#)

Abstract

Polycyclic aromatic hydrocarbons (PAHs) in cigarette smoke are among the most likely causes of lung cancer. PAHs require metabolic activation to initiate the carcinogenic process. Phenanthrene (Phe), a non-carcinogenic PAH, was used as a surrogate of benzo[α]pyrene (BaP) and related PAHs to study the metabolic activation of PAHs in smokers. A dose of 10 μ g deuterated Phe ([D₁₀]Phe) was administered to 25 healthy smokers in a crossover design, either as an oral solution or by smoking cigarettes containing [D₁₀]Phe. Phe was deuterated to avoid interference from environmental Phe. Intensive blood and urine sampling was performed to quantitate the formation of deuterated *r*-1,*t*-2,3,*c*-4-tetrahydroxy-1,2,3,4-tetrahydrophenanthrene ([D₁₀]PheT), a biomarker of the diol epoxide metabolic activation pathway. In both the oral and smoking arms approximately 6% of the dose was metabolically activated, with a large inter-subject variability in the formation of [D₁₀]PheT observed. Two diagnostic plots were developed to identify subjects with large systemic exposure and significant lung contribution to metabolic activation, respectively. The combination of the two plots led to the identification of subjects with substantial local exposure. These subjects produced, in one single pass of [D₁₀]Phe through the lung, a [D₁₀]PheT exposure equivalent to the systemic exposure of a typical subject, and may be an indicator of lung cancer susceptibility. Polymorphisms in PAH metabolizing genes of the 25 subjects were also investigated. The integration of phenotyping and genotyping results indicated that *GSTM1* null subjects produced approximately 2-fold more [D₁₀]PheT than did *GSTM1* positive subjects.

<http://jpet.aspetjournals.org/content/early/2012/06/06/jpet.112.194118.abstract>

Also:

THE ANTINOCICEPTIVE EFFECTS OF NICOTINIC PARTIAL AGONISTS VARENICLINE AND SAZETIDINE-A IN MURINE ACUTE AND TONIC PAIN MODELS

<http://jpet.aspetjournals.org/content/early/2012/06/07/jpet.112.194506.abstract>

Beliefs and attitudes about lung cancer screening among smokers

[Lung Cancer](#). 2012 Jun 6. [Epub ahead of print]

[Jonnalagadda S](#), [Bergamo C](#), [Lin JJ](#), [Lurslurchachai L](#), [Diefenbach M](#), [Smith C](#), [Nelson JE](#), [Wisnivesky JP](#).

Abstract

The National Lung Screening Trial (NLST) recently reported that annual computed tomography (CT) screening is associated with decreased lung cancer mortality in high-risk smokers. Beliefs about lung cancer and screening, particularly across race and ethnicity, and their influence on CT screening utilization are largely unexamined. Our study recruited asymptomatic, high-risk smokers, 55-74 years of age from primary care clinics in an academic urban hospital. Guided by the self-regulation theory, we evaluated cognitive and affective beliefs about lung cancer. Intention to screen for lung cancer with a CT scan was assessed by self-report. We used univariate and logistic regression analyses to compare beliefs about screening and intention to screen among minority (Blacks and Hispanics) and non-minority participants. Overall, we enrolled 108 participants, of which 40% were Black and 34% were Hispanic; the mean age was 62.3 years, and median pack-years of smoking was 26. We found that intention to screen was similar among minorities and non-minorities ($p=0.19$); however, Hispanics were less likely to report intention to screen if they had to pay for the test ($p=0.02$). Fatalistic beliefs, fear of radiation exposure, and anxiety related to CT scans were significantly associated with decreased intention to screen ($p<0.05$). Several differences were observed in minority versus non-minority participants' beliefs toward lung cancer and screening. In conclusion, we found that concerns about cost, which were particularly

prominent among Hispanics, as well as fatalism and radiation exposure fears may constitute barriers to lung cancer screening. Lung cancer screening programs should address these factors to ensure broad participation, particularly among minorities.

<http://www.sciencedirect.com/science/article/pii/S0169500212003133>

Letter

One billion fewer cigarettes, 100,000 fewer smokers

New Zealand Medical Journal, 08-June-2012, Vol 125 No 1356

Murray Laugesen

In early 2013, 100,000 smokers could successfully quit cigarettes if Parliament adopts a proposal from leading tobacco control experts and organisations to increase tobacco excise by 40% on 1 January 2013.

Strong submissions from the health sector are required to change the Draft Bill from 10% annual increases to a 40% increase on 1 January, then 20% annually thereafter.

The Excise Bill Budget has proposed 10% increases in excise during 2013–16, beginning 1 January 2013, and the Bill¹ is available online at Parliament's website for the Finance and Expenditure Committee. **Submissions close 22 June 2012.**

Aim

To explain the issues facing the Government Finance and Expenditure Committee as it hears submissions on the Customs and Excise Amendment Bill...

Conclusions

A 40% increase in tobacco excise in 2013 would reduce cigarettes sold by 1 billion during 2013, over a one-third decrease below estimated 2012 cigarette sales.

From early 2012, 100,000 smokers would be expected to successfully quit.

Heart attack hospital admissions would be expected to noticeably decrease from early 2013 onwards.

Quitting smoking halves the excess risk of early death from coronary heart disease within 1 year, and 10 to 15 years without smoking abolishes the excess all-cause mortality compared to never-smokers of the same age...

The 40% excise increase in 2013 will ensure that 100,000 smokers successfully quit smoking making for a healthier workforce, and preventing half of these persisting smokers from dying many years early from smoking.

The high price sensitivity of smokers since the smokefree law of 2003 means that further increases in excise taxes will usually generate some revenue though less than expected. Smokers can no longer be relied on to provide large revenues.

Conversely the potential public health gains and reductions in smoking from increases in tobacco tax are now much higher than in the 20th Century.

Indeed, tobacco taxation is now much more a health issue than a revenue issue.

<http://journal.nzma.org.nz/journal/125-1356/5225/>

Additional *NZ Med J* correspondence:

No smoking here (please)

<http://journal.nzma.org.nz/journal/125-1356/5228>

Tobacco smoke pollution associated with Irish pubs in New Zealand: fine particulate (PM_{2.5}) air sampling

<http://journal.nzma.org.nz/journal/125-1356/5226>

Related coverage:

Smoking used to be seen as fresh and healthy...but not now - New Zealand Herald

http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=10813599

Lung Cancer Mortality Risk for U.S. Menthol Cigarette Smokers

Nicotine Tob Res 2012 published 20 June 2012

Brian Rostron

Abstract

Introduction: The U.S. Food and Drug Administration is currently assessing the public health impact of menthol cigarettes. Results from a recent U.S. cohort study, composed largely of Blacks and limited to 12 Southern states, found that menthol cigarette smokers had lower risks of lung cancer incidence and mortality than nonmenthol smokers.

Methods: We conducted a survival analysis of current smokers from the 1987 National Health Interview Survey Cancer Control Supplement ($n = 4,832$), followed for mortality through linkage with the National Death Index. We estimated mortality hazard ratios (*HRs*) for menthol smokers compared with nonmenthol smokers, adjusting for a full set of demographic and smoking characteristics.

Results: The overall *HR* for lung cancer mortality for menthol smokers was 0.69 (95% *CI* = 0.45–1.06). The *HR* for lung cancer mortality for menthol smokers at ages 50 and over was 0.59 (95% *CI* = 0.37–0.95). All-cause mortality net of lung cancer mortality did not differ for menthol and nonmenthol smokers.

Conclusion: We found evidence of lower lung cancer mortality risk among menthol smokers compared with nonmenthol smokers at ages 50 and over in the U.S. population. It is not known, however, if these differences are due to the impact of menthol on cigarette smoking or long-term differences in cigarette design between menthol and nonmenthol cigarettes.

<http://ntr.oxfordjournals.org/content/early/2012/06/19/ntr.nts014.abstract>

Friends Moderate the Effects of Pro-Smoking Media on College Students' Intentions to Smoke

Psychology of Addictive Behaviors, Jun 11 , 2012

Setodji, Claude M.; Martino, Steven C.; Scharf, Deborah M.; Shadel, William G.

Abstract

Exposure to prosmoking media (e.g., smoking in movies, advertising in magazines) contributes to smoking in young people. However, the extent to which the impact of exposure depends on the social context in which those exposures occur has not been investigated. This study used ecological momentary assessment to examine the moderating role of social context in the relationship between college students' exposure to prosmoking media and their smoking refusal self-efficacy and intention to smoke. College students ($n = 134$) carried handheld computers for 21 days, recording their exposure to all forms of prosmoking media during the assessment period. They also responded to three investigator-initiated control prompts (programmed to occur randomly) each day of the assessment. After each exposure to prosmoking media and after each control prompt, participants answered questions about smoking refusal self-efficacy and their intentions to smoke; they also indicated whether they were with friends, with family, with a romantic partner, or alone (i.e., their social context). When participants were with friends, prosmoking media exposures were associated with stronger smoking intentions and lower smoking refusal self-efficacy; these associations were not present when participants were alone. Being with family members or with a romantic partner did not moderate the impact of prosmoking media exposure on either dependent variable. These results suggest a new role for peers in the development of youth smoking.

<http://psycnet.apa.org/psycinfo/2012-15550-001/>

Also:

A Prospective Study of the Acquired Preparedness Model: The Effects of Impulsivity and Expectancies on Smoking Initiation in College Students

<http://psycnet.apa.org/psycinfo/2012-15551-001/>

Transdermal Nicotine During Cue Reactivity in Adult Smokers With and Without Anxiety Disorders

<http://psycnet.apa.org/psycinfo/2012-15549-001/>

Tobacco Craving and Eyeblink Startle Modulation Using 3D Immersive Environments: A Pilot Study

<http://psycnet.apa.org/psycinfo/2012-15548-001/>

Mainstream Smoke Chemistry Analysis of Samples from the 2009 U.S. Cigarette Market

[Regul Toxicol Pharmacol.](#) 2012 Jun 6. [Epub ahead of print]

[Bodnar JA](#), [Morgan WT](#), [Murphy PA](#), [Ogden MW](#).

R.J. Reynolds Tobacco Company, Bowman Gray Technical Center, Winston-Salem, North Carolina.

Abstract

A survey of selected mainstream smoke constituents from commercially marketed U.S. cigarettes was conducted in 2009. The U.S. cigarette market was segmented into thirteen (13) strata based on Cambridge Filter Method (CFM) "tar" category and cigarette design parameters. Menthol and non-menthol cigarettes were included. Sixty-one (61) cigarette brand styles were chosen to represent the market. Another thirty-four (34) brand styles of interest were included in the survey along with a Kentucky 3R4F reference cigarette. Twenty mainstream smoke constituents were evaluated using the Health Canada smoking regimen. By weighting the results of the 61 brandstyles using the number of brandstyles represented by each stratum, the mainstream smoke constituent means and medians of the U.S. cigarette market were estimated. For nicotine, catechol, hydroquinone, benzo(a)pyrene and formaldehyde the mean yields increased with increasing "tar" yields. Constituent yields for the ultra-low "tar" and low "tar" cigarettes were not significantly different for most other analytes as ventilation blocking defeated any filter air dilution design features. In contrast, normalization per mg nicotine provided an inverse ranking of cigarette yields per CFM "tar" categories. Menthol cigarette mean constituent yields were observed to be within the range of the non-menthol cigarettes of similar "tar" categories.

CONFLICT OF INTEREST STATEMENT

The authors would like to state that they have no competing interest and this research was funded by R.J. Reynolds Tobacco Co.

<http://www.sciencedirect.com/science/article/pii/S0273230012000931>

Note: Tobacco industry research.

Psychosocial determinants of attrition in a longitudinal study of tobacco use in youth

[ScientificWorldJournal.](#) 2012;2012:654030. Epub 2012 May 2.

[Post A](#), [Gilljam H](#), [Bremberg S](#), [Galanti MR](#).

Abstract

To gain knowledge on psychosocial characteristics that predict the propensity of participation in longitudinal studies, attrition was analysed in a cohort of 3020 adolescents participating in the baseline survey of a longitudinal study with repeated followup focusing on adolescents' tobacco use. During the followup surveys, the proportion of responders was constantly at or above 90%. There were 941 adolescents (31.2%) who failed to participate in at least one of the six followup surveys. Boys had a fifty percent increased risk of nonparticipation compared with girls. Adolescents in families with experience of divorce, unemployment, and change of residence had a higher risk of nonparticipation. An increasing number of stressful life events during the previous year, uptake of tobacco use, number of friends, perceived performance at school, truancy, and alcohol use during the last term also independently associated with nonparticipation. Diverse psychosocial characteristics are independently associated with nonparticipation of youths in longitudinal studies.

<http://www.tswj.com/2012/654030/>

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

Harm reduction and the medicalisation of tobacco use

[Sociol Health Illn.](#) 2012 Jun 6. doi: 10.1111/j.1467-9566.2012.01485.x. [Epub ahead of print]

[Rooke C](#).

Abstract

In tobacco control the focus has, for some time, been on abstinence from all types of tobacco use as the only solution to the problem of smoking, and harm reduction approaches are controversial. The most recent English tobacco strategy has incorporated harm reduction approaches in the form of new 'routes' to quitting smoking that encourage those who cannot quit to use safer sources of nicotine. This move away from a focus on abstinence can be seen as the result of gradual shifts over the past 50 years in the way that the problem of smoking is understood and the solutions that are offered. These shifts have involved increasingly seeing tobacco use as a medical problem. This article uses conceptual tools from science and technology studies to examine developments over the last decade in England, primarily the increasing importance of harm reduction approaches. Drawing on 20 semi-structured qualitative interviews with key stakeholders and documentary analysis, I suggest that the shape harm reduction has taken in English tobacco control policy has been another shift towards the medicalisation of tobacco use, but that this process has occurred in ways that provide a contrast to commonly outlined 'drivers' of medicalisation.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1467-9566.2012.01485.x/abstract>

'Neighbour smoke'—exposure to secondhand smoke in multiunit dwellings in Denmark in 2010: a cross-sectional study

Tob Control Published Online First: 12 June 2012

Brian Køster, Anne-Line Brink, Inge Haunstrup Clemmensen

Abstract

Background 'Neighbour smoke' is transfer of secondhand smoke between apartments including shared areas, such as hallways, community rooms and stairwells in multiunit dwellings and is an emerging issue for public health and health equity.

Objective To describe the prevalence of exposure to neighbour smoke in Denmark.

Methods A population-based sample of 5049 respondents (2183 in multiunit dwellings) living in Denmark aged ≥ 15 years completed a questionnaire in 2010 on tobacco-related behaviour and exposure to secondhand smoke. The authors examined the relations between exposure to neighbour smoke, own smoking, smoking inside the home, type of residence and demographic factors with descriptive statistics and logistic regression analysis.

Results In this sample, 22% of those living in multiunit dwellings reported exposure to neighbour smoke. Of respondents living in apartments, 41% preferred to live in a building in which smoking is banned. Smoke-free buildings were preferred by 58% of persons exposed to neighbour smoke compared with 37% of persons not exposed. Of the smokers (daily and occasional), 14% preferred to live in a smoke-free building; 31% never smoked indoors in their own home.

Conclusions The only way to avoid absorbing tobacco smoke from neighbours is to live in a smoke-free multiunit dwelling. There is great demand for such dwellings, especially by young people, people with children and people exposed to neighbour smoke, as well as by people who smoke.

<http://tobaccocontrol.bmj.com/content/early/2012/06/11/tobaccocontrol-2011-050393.abstract>

Knowledge of the health impacts of smoking and public attitudes towards tobacco control in the former Soviet Union

Tob Control Published Online First: 15 June 2012

Bayard Roberts, Andrew Stickley, Anna B Gilmore, Kirill Danishevski, Kseniya Kizilova, Anna Bryden, David Rotman, Christian Haerpfer, Martin McKee

Abstract

Aims To describe levels of knowledge on the harmful effects of tobacco and public support for tobacco control measures in nine countries of the former Soviet Union and to examine the characteristics associated with this knowledge and support.

Methods Standardised, cross-sectional nationally representative surveys conducted in 2010/2011 with 18 000 men and women aged 18 years and older in Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Russia and

Ukraine. Respondents were asked a range of questions on their knowledge of the health effects of tobacco and their support for a variety of tobacco control measures. Descriptive analysis was conducted on levels of knowledge and support, along with multivariate logistic regression analysis of characteristics associated with overall knowledge and support scores.

Results Large gaps exist in public understanding of the negative health effects of tobacco use, particularly in Azerbaijan, Kazakhstan, Kyrgyzstan and Moldova. There are also extremely high levels of misunderstanding about the potential effects of 'light' cigarettes. However, there is popular support for tobacco control measures. Over three quarters of the respondents felt that their governments could be more effective in pursuing tobacco control. Higher levels of education, social capital (membership of an organisation) and being a former or never-smoker were associated with higher knowledge on the health effects of tobacco and/or being more supportive of tobacco control measures.

Conclusions Increasing public awareness of tobacco's health effects is essential for informed decision-making by individuals and for further increasing public support for tobacco control measures.

<http://tobaccocontrol.bmj.com/content/early/2012/06/14/tobaccocontrol-2011-050249.abstract>

Also:

Partner cigarette smoking and risk of neural tube defects among infants of non-smoking women in northern China

<http://tobaccocontrol.bmj.com/content/early/2012/06/14/tobaccocontrol-2011-050384.abstract>

The impact of Michigan's Dr Ron Davis smoke-free air law on levels of cotinine, tobacco-specific lung carcinogen and severity of self-reported respiratory symptoms among non-smoking bar employees

<http://tobaccocontrol.bmj.com/content/early/2012/06/14/tobaccocontrol-2011-050328.abstract>

Self-help materials for the prevention of smoking relapse: study protocol for a randomised controlled trial

Trials. 2012 May 30;13(1):69. [Epub ahead of print]

[Song F](#), [Holland R](#), [Barton GR](#), [Bachmann M](#), [Blyth A](#), [Maskrey V](#), [Aveyard P](#), [Sutton S](#), [Leonardi-Bee J](#), [Brandon TH](#).

Abstract

BACKGROUND:

Most people who stop smoking successfully for a few weeks will return to smoking again in the medium term. There are few effective interventions to prevent this relapse and none used routinely in clinical practice. A previous exploratory meta-analysis suggested that self-help booklets may be effective but requires confirmation. This trial aims to evaluate the effectiveness and cost-effectiveness of a set of self-help educational materials to prevent smoking relapse in the NHS Stop Smoking Service.

METHODS:

This is an open, randomised controlled trial. The target population is carbon monoxide (CO) verified quitters at 4 weeks in the NHS stop smoking clinic (total sample size N=1,400). The experimental intervention tested is a set of 8 revised Forever Free booklets, including an introduction booklet and more extensive information on all important issues for relapse prevention. The control intervention is a leaflet that has no evidence to suggest it is effective but is currently given to some patients using NHS stop smoking services. Two follow-up telephone interviews will be conducted at 3 and 12 months after quit date. The primary outcome will be prolonged abstinence from months 4-12 with no more than 5 lapses, confirmed by carbon monoxide test at 12 month assessment. The secondary outcomes will be 7-day self-report point prevalence abstinence at 3 months and 7-day biochemically confirmed point prevalence abstinence at 12 months. To assess cost-effectiveness, costs will be estimated from a health service perspective and the EQ-5D will be used to estimate the QALY (Quality Adjusted Life Year) gain associated with each intervention. The comparison of smoking abstinence rates (and any other binary outcomes) between the two trial arms will be carried out using odds ratio as the outcome statistic and other related statistical tests. Exploratory subgroup analyses, including logistic regression analyses with interaction terms, will be conducted to investigate possible effect modifying variables.

DISCUSSION:

The possible effect of self-help educational materials for the prevention of smoking relapse has important public health implications. Trial Registration: Current Controlled Trials ISRCTN36980856.

<http://www.trialsjournal.com/content/13/1/69/abstract>
<http://www.trialsjournal.com/content/pdf/1745-6215-13-69.pdf>

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

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Stan Shatenstein
Editor & Publisher, STAN Bulletin
Smoking & Tobacco Abstracts & News
5492-B Trans Island
Montreal, QC Canada H3W 3A8
shatensteins@sympatico.ca

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STAN Bulletin is supported by
voluntary reader contributions

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