

## Tobacco Use and Secondhand Smoke Exposure

(Revised 12/20/2017)

The New Hampshire Public Health Association (NHPHA) recognizes that tobacco use via smoking, smokeless tobacco, or electronic nicotine devices (ENDs) and exposure to secondhand smoke, including marijuana is harmful to the public's health. Smoking is the largest preventable cause of death and disease in the United States.<sup>1</sup> The Centers for Disease Control and Prevention estimates that 1,900 New Hampshire residents die each year from smoking-attributable deaths, including exposure from secondhand smoke.<sup>2</sup> According to the World Health Organization, nicotine can have adverse effects on a developing fetus, contributes to cardiovascular disease, may function as a tumor promoter, and may have long-term consequences for brain development leading to learning and anxiety disorders.<sup>3</sup> Smokeless tobacco can cause cancer of the mouth, esophagus, and pancreas, increase the risk for death from heart disease and stroke.<sup>4</sup> The World Health Organization questions the safety and efficacy of electronic cigarettes in smoking cessation programs as they have not been scientifically demonstrated, and what evidence exists is somewhat contradictory.<sup>3</sup> Passive exposure to secondhand smoke is a public health concern. Combustion produces carcinogens and toxins, whether from tobacco or marijuana. Research finds marijuana smoke contains higher levels of several toxic compounds than tobacco smoke – including ammonia, hydrogen cyanide, nitric oxide and certain aromatic amines – and causes respiratory symptoms such as coughing, phlegm and wheezing.<sup>5</sup>

Tobacco use and exposure to secondhand smoke also play an enormous role in New Hampshire's economic vitality. Annual health care costs in New Hampshire directly caused by smoking is estimated at \$729 million, with productivity losses estimated at \$506.9 million, (as expressed in 2009 dollars).<sup>2</sup> And while general tobacco use has decreased over the years, the public health community is now faced with the new challenges brought with increased e-cigarette use by adolescents and young adults and increased exposure to marijuana smoke. According to the New Hampshire 2015 Youth Risk Behavior Survey, 25% of respondents said yes to having used e-cigs in the last 30 days before taking the survey. Existing longitudinal studies indicate that Electronic Nicotine Delivery Systems (ENDs) use by minors who have never smoked at least doubles their chance of starting to smoke.<sup>3</sup> And as a result of an increase in commercial legalization of recreational and/or medical use of marijuana, exposure to secondhand smoke from marijuana is on the rise.<sup>6</sup>

Tobacco use and secondhand smoke disproportionately impact youth, women of childbearing age, people with low income and/or educational attainment, and those diagnosed with mental illness and/or substance use disorders making this an important issue affecting health equity.<sup>7</sup> This suggests that addressing the social determinants of health is an important mechanism towards creating healthy people in healthy places free of toxins and carcinogens.<sup>8</sup>

## Tobacco Use and Secondhand Smoke Exposure (cont'd)

NHPHA supports policies that:

- Commit a significant portion of tobacco tax revenue or Tobacco Master Settlement Funds to a dedicated fund to be used to deliver primary prevention, tobacco treatment and strengthened policies outlined in New Hampshire State Statute, RSA 126K – 15 and consistent with the Centers for Disease Control and Prevention, Office on Smoking and Health. These policies include but are not limited to:
  - ◇ Tobacco use prevention community programs and grants;
  - ◇ Tobacco use prevention school programs and grants;
  - ◇ Tobacco use prevention statewide programs and grants;
  - ◇ Tobacco use cessation programs;
  - ◇ Tobacco use prevention and cessation counter marketing;
  - ◇ Evaluation of tobacco control initiatives; and
  - ◇ Administration and enforcement

## Resources

<http://www.no-smoke.org/pdf/Protecting-Nonsmokers-from-Secondhand-Marijuana-Smoke.pdf>

<https://www.fda.gov/TobaccoProducts/Labeling/ProductsIngredientsComponents/default.htm>

## References

<sup>1</sup>[https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/fast\\_facts/index.htm](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm)

<sup>2</sup>[https://www.cdc.gov/tobacco/stateandcommunity/best\\_practices/index.htm](https://www.cdc.gov/tobacco/stateandcommunity/best_practices/index.htm)

<sup>3</sup><http://www.who.int/fctc/cop/cop7/Documentation-Main-documents/en/>

<sup>4</sup>[https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/smokeless/health\\_effects/index.htm](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/smokeless/health_effects/index.htm)

<sup>5</sup>[http://www.publichealthlawcenter.org/sites/default/files/resources/tclc-synopsis-marijuana-tobacco-2015\\_0.pdf](http://www.publichealthlawcenter.org/sites/default/files/resources/tclc-synopsis-marijuana-tobacco-2015_0.pdf)

<sup>6</sup>American Academy of Pediatrics. “One in six children hospitalized for lung inflammation positive for marijuana exposure: Few states where marijuana use is legal restrict its use around children.” ScienceDaily. ScienceDaily, 30 April 2016. <https://www.sciencedaily.com/releases/2016/04/160430100247.htm>

<sup>7</sup>U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress. A Report of the Surgeon General. Atlanta: GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014. Printed with corrections, January 2014.

<https://www.surgeongeneral.gov/library/reports/50-years-of-progress/index.html>