



Lifestyle Risk Factors: Tobacco Use



Keeping Connecticut Healthy
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Why is this important?

Tobacco's health impact:

- Smoking significantly increases the risk of heart disease, stroke and chronic lung disease. Smoking also causes nearly all lung, mouth and throat cancers, and increases the risk of pancreatic, bladder, kidney and cervical cancers.
- Smoking during pregnancy contributes to elevated risk of miscarriage, premature delivery, and low birthweight. Eliminating smoking during pregnancy may lead to a 10% reduction in infant deaths.
- Smoking kills over 400,000 people each year—more than alcohol, AIDS, car crashes, illegal drugs, murders and suicides *combined*—and thousands more die from other tobacco-related causes, such as fires caused by smoking.
- For every smoker who dies, there are 20 more living with a smoking-related disease.
- The good news is that one year after quitting, the risk of heart disease is cut in half. And after 5 – 15 smoke-free years, the risk is similar to that of a person who has never smoked.

Secondhand smoke:

- Cigarette smoke contains more than 4,000 chemicals, over 40 of which are known to cause cancer; many others are known to increase the risk of birth defects.
- Secondhand smoke causes premature death and disease in children and non-smoking adults. The home is the primary source of exposure for infants & children, and is a major source of exposure for non-smoking adults.
- Concentrations of many cancer-causing and toxic chemicals are potentially higher in secondhand smoke than in the smoke inhaled by smokers.
- Children exposed to secondhand smoke are at increased risk for sudden infant death syndrome, acute respiratory infections, ear problems, and more severe asthma.
- There is no risk-free level of exposure to secondhand smoke. Neither separating smokers from non-smokers, nor ventilating buildings or cleaning the air, can eliminate the exposure.

Tobacco's costs:

- Nationwide, smoking results in \$92 billion in lost productivity each year—plus an additional \$75 billion in smoking-related health care costs—for a combined annual total of \$167 billion.
- Connecticut's annual health care costs attributable to tobacco use are \$1.6 billion.
- Connecticut residents' state & federal tax burden from smoking-related government expenditures comes to an estimated \$684 per household per year.
- Approximately 20 billion packs of cigarettes were sold in the U.S. in 2002. It's estimated that each pack sold costs the nation \$8.61 in medical care costs and lost productivity.

• Tobacco industry influence:

- Annual tobacco industry marketing expenditures nationwide = \$15.4 billion.
- Estimated portion spent for Connecticut marketing each year = \$157.2 million.

(See the [Online Resources](#) section for additional information.)

How does this affect me?

Nationwide, 1 in 5 adults (20%) were smokers in 2007, compared to 15% in Connecticut. Over the past decade, the percentage of smoke-free homes in Connecticut has increased from less than half to nearly three-quarters.



Age:

- About 80% of people who use tobacco begin before age 18, starting most commonly between 14-15 years of age.
- The younger people are when they begin to smoke, the more likely they are to be smokers as adults.
- In Connecticut in 2007:
 - 18-24 (22.7%) and 25-34 (18.8%) year olds had the highest rates of smoking;
 - Smoking rates then generally decreased with increased age, to 6.5% among adults aged 65 and older.
- Most older adults who once smoked have quit.

Sex:

- In Connecticut (2007) more men (16.5%) than women (14.4%) smoke.
- However, women are starting to smoke at increasingly younger ages. Lung cancer now kills more women every year than breast cancer.
- For men, smoking can cause sexual dysfunction; for women, it can cause reproductive disorders, spontaneous abortions, and premature menopause.
- On average, male smokers die 13.2 years earlier than male non-smokers, and female smokers die 14.5 years earlier than female non-smokers.

Race & ethnicity:

- In Connecticut in 2007, non-Hispanic blacks showed the highest prevalence of smoking (21.7%), followed by non-Hispanic whites (15.2%) and Hispanics (15.1%).
- Nationwide (2005), American Indians/Alaska Natives have the highest smoking rate (32.0%).

Other socioeconomic characteristics:

- In Connecticut (2007), smoking is more than twice as common (28.0%) among lower income individuals (< \$15,000 per year) compared to those with an annual income above \$50,000 (12.5%).
- Smoking generally increases with decreasing educational levels. In Connecticut (2007), smoking is over 3.5 times more common among adults with less than a high school education (28.4%) compared to those with a college degree (7.9%).

(See the [Facts & Figures](#) section for additional data.)

Take control!

Since 1965, smoking in the United States has declined by almost 50% among people 18 and older. **You, too, can choose not to smoke!**



10 steps you can take: If you smoke....

1. Make the decision to quit. Believe in yourself – you can do it.
2. Choose a quit plan – will you use medication, attend a class, quit “cold turkey”?
3. Get rid of all the cigarettes and ashtrays in your home, car and at work. Remind yourself of your reasons for quitting.
4. Stock up on healthy oral substitutes – sugarless gum, carrot sticks, sunflower seeds.
5. Set up a support system. Ask friends and family not to smoke around you or to leave cigarettes where you can see them (see [Helping a smoker quit](#)). Take care of yourself.
6. Manage your stress – it can lead to increased smoking, alcohol consumption and over-eating. Keep active. Regular physical activity is a great stress-buster.
7. Avoid people, places and situations where you are tempted to smoke. Breathe. Drink plenty of water.
8. Reward yourself. Save the money you would have spent on tobacco for a special treat.
9. And finally, seek support when you need it – to quit & stay quit.
10. **Remember:**
 - This is the healthiest decision you will ever make.
 - Only you can make the decision to quit smoking.
 - Help is available. (Check out *Smoking Cessation* on the [Online Resources](#) page.)

Know Your Goals!

The American Heart Association
recommends that you:

Eliminate the use of tobacco products
& minimize exposure to secondhand smoke.



[References:](#) American Cancer Society; American Heart Association;
American Lung Association; Behavioral Risk Factor Surveillance System;
Centers for Disease Control & Prevention; Connecticut Department of Public Health;
Council of State Governments; Federal Trade Commission; Kaiser Family Foundation;
MedlinePlus; National Cancer Institute; National Heart, Lung & Blood Institute;
Office of the U.S. Surgeon General.

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