

THE FACTS

In Nova Scotia, tobacco kills **1,650 people each year** or one person every six hours.

Tobacco costs the Nova Scotia health care system **\$168 million a year** in direct costs and accounts for more than six per cent of provincial health care spending.

200 Nova Scotians die every year from exposure to secondhand smoke.

Food service workers have a **50 per cent higher** rate of lung cancer than the general population.

Treating people affected by secondhand smoke exposure costs the health care system **\$20 million a year**.

Unscheduled smoke breaks cost Nova Scotia employers **\$208 million a year** in lost wages.

The Nova Scotia economy loses **\$358 million each year** in productivity due to premature death and absenteeism.

A HUGE HEALTH CONCERN

Smoking

As a health professional, you see the devastating health effects of smoking everyday. You know that smoking causes lung cancer as well as cancers of the mouth, pharynx, larynx, esophagus, pancreas, cervix, kidney and bladder. You know it's also a significant risk factor for coronary heart disease, stroke, peripheral vascular disease, and respiratory illness. Smoking accelerates vascular disease in diabetes, increases post-operative complications and delays recovery from other illnesses.

Decreased fertility, increased sexual dysfunction and premature aging are also caused by smoking. Pregnant women who smoke have a higher rate of miscarriages, stillbirth, premature birth, and babies who weigh below average at birth.

The health risks of smoking are not confined to smokers. Exposure to secondhand smoke causes heart disease, respiratory ailments and lung cancer in adults.

Secondhand smoke is the most common cause of preventable death in non-smokers. In infants and children it is associated with sudden infant death syndrome, fetal growth impairment and respiratory ailments.

Dr. Drew Bethune, thoracic surgeon at the Queen Elizabeth II Health Sciences Centre and co-chair of *Cancer Care Nova Scotia's* Thoracic Cancer Site Team, estimates that more than half of the patients in-hospital have smoking-related diseases or complications. "Health professionals have a critical role to play in the prevention and treatment of smoking-related diseases as well as, in the development of healthy public policy," said Dr. Bethune.

Cancer Care Nova Scotia is working to reduce tobacco use in Nova Scotia. It commissioned a research report called *The Cost of Tobacco in Nova Scotia* that examines the health care and economic implications of smoking.

THE PROBLEM OF SECONDHAND SMOKE

Secondhand smoke is dangerous to everyone. One solution to secondhand smoke exposure is a 100 per cent smoking ban in all public places and workplaces. Secondhand smoke issues also occur in the home, where children are at high risk. Smoking bans encourage smokers to quit. **Studies have found that 100 per cent smoking bans are not bad for business.** In fact, in California, Colorado and Massachusetts, studies have found that revenues increased following smoke-free legislation.

The new provincial legislation (*Smoke-Free Places Act*), effective January 1, 2003, is inadequate to protect Nova Scotians from secondhand smoke in all public places and workplaces and fails to send the strongest message possible about the risks of secondhand smoke exposure. "As health professionals, we have high credibility on health issues. We must use our credibility to advocate for tobacco control. We need to let patients, community leaders, and government know where we stand," said Dr. Bethune.

Strong, enforced public places legislation will protect the public from secondhand smoke and decrease the visibility of smoking behavior for our children and youth. This will help change the perception that most people smoke.

T H E Good News

The 1996-97 National Population Health Survey found that there is **strong support for 100 per cent smoke-free public places** and workplaces in Atlantic Canada.

Most smokers want to quit because of health concerns.

Brief **advice to quit smoking from a health care professional is very effective** in motivating smokers to stop smoking.

Smoking damage is not permanent if the smoker stops soon enough.

An increase in the price of cigarettes is the single most important factor in discouraging youth from experimenting with smoking. **A \$10 per carton taxation increase would reduce youth smoking by 17.5 per cent and 10 per cent in the general population.**

The Nova Scotia Department of Health is committed to a comprehensive tobacco strategy that addresses key elements: pricing and taxation; smoke-free legislation and policy; treatment and cessation; community-based programming; youth smoking prevention; media and public awareness; and monitoring and evaluation.

Much of the damage done by smoking is reversed by the body's natural tendency toward health. Even people with serious smoking-related illnesses survive longer and recover faster after quitting than those who continue to smoke. The risk of acute coronary ischemic events drops rapidly after quitting smoking. After one year of not smoking, the risk of a heart attack is halved. After ten to fifteen years, the risk is about the same as that of someone who has never smoked. Quitting smoking is the single most prognostic factor after a heart attack. The progress of chronic respiratory disease is slowed down and respiratory function may even improve after quitting smoking. The risk of cancer declines slowly over a twenty-year period.

The Medical Society of Nova Scotia recommends that physicians inquire about smoking status and provide cessation advice as part of every smoking patient's visit. Stickers to indicate whether a patient is a smoker or non-smoker are available from the Medical Society. The following minimal contact intervention guidelines can be used:

- **Ask patients about their smoking status.**
- **Advise patients about the health risks of tobacco and encourage them to quit.**
- **Assess their willingness to quit.**
- **Assist patients that are ready to quit.**
- **Arrange follow-up.**

ASK
ADVISE
ASSESS
ASSIST
ARRANGE

WHAT CAN YOU DO TO HELP SMOKERS WHO Want to Quit?

Prescribe medication. Bupropion, nicotine replacement or nortriptyline has been shown to double quit rates.

Refer them to the Canadian Cancer Society's Smokers Helpline (1-877-513-5333).
Research shows that smokers who receive telephone counseling stop smoking at twice the rate of those who don't.

Recommend the Nova Scotia Lung Association's Quit 4 Good (1-888-566-LUNG) program.
Smokers who get professional counseling to quit have higher long-term cessation rates than those who don't.

Tell them about the Canadian Cancer Society's One Step At A Time (1-888-939-3333),
a series of self-help booklets designed to guide smokers through the stages of quitting.

Suggest using the Internet for tips on quitting. Quit4Life (www.quit4life.com)
is an online Health Canada cessation program for youth.

Smoking is an addiction that is not easy to beat. Nicotine can be more addictive than alcohol, heroin or cocaine. Many smokers try to quit repeatedly before they succeed. The chance of quitting permanently increases every time a smoker quits, even for a short period. It is important to reinforce every attempt a patient makes to quit smoking.

As health professionals you are not alone in your efforts to reduce tobacco use. Action in your Community against Tobacco (ACT) is a community-based initiative co-sponsored

by *Cancer Care Nova Scotia* and the Canadian Cancer Society - Nova Scotia Division. ACT volunteers are working to reduce the impact of tobacco use in their communities. Contact the ACT Administrator (1-800-639-0222) to find out what they are doing in your community.

The cost of tobacco is enormous. As Nova Scotians, we pay with our health, with our health care dollars, and in some cases, with our lives. Fortunately, thousands of Nova Scotians have successfully quit smoking. Thousands more will become non-smokers with your support. Together we can reduce the burden of smoking and work toward improving the health of all Nova Scotians.

The report on the Cost of Tobacco in Nova Scotia is available on Cancer Care Nova Scotia's web site at www.cancercare.ns.ca.

National Non-Smoking Week January 19-25

Weedless Wednesday January 22

As health professionals... we must use our credibility to advocate for tobacco control.

Dr. Drew Bethune, Thoracic Surgeon, Queen Elizabeth II Health Sciences Centre.

Cancer Care Nova Scotia is a program of the Department of Health. Its mandate is to evaluate, coordinate and strengthen the cancer system in Nova Scotia.

Cancer Care Nova Scotia works with and supports professionals and stakeholders in the health care system to bring about patient-centred change. Its ultimate goal is to reduce the burden of cancer on individuals, families, communities and the health care system.

In Practice is an insert for *Cancer Care Nova Scotia's* bimonthly newsletter. It is written specifically for primary care practitioners with information that we hope will make a difference in your cancer practice.

Please contact Anne Murray, Education Coordinator, *Cancer Care Nova Scotia*, by phone at 902-473-3781 or by email at anne.murray@ccns.nshealth.ca with comments or suggestions for future topics.



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TOBACCO CESSATION

Programs and Resources

Resources for Health Professionals

Medical Society of Nova Scotia: www.doctorsns.com

Physicians for Smoke Free Canada: www.smoke-free.ca

Canadian Council for Tobacco Control: www.cctc.ca

Tobacco Free Kids: www.tobaccofreekids.org

Resources for the Public

Action in your Community against Tobacco (ACT): 1-800-639-0222

Canadian Cancer Society's Smoker's Helpline: 1-877-513-5333

Canadian Lung Association: www.sk.lung.ca/content.cfm/cessation

Freedom From Smoking: www.lungusa.org/ffs/overview.html

Freedom From Smoking for You and Your Baby: 1-888-566-LUNG

Health Canada: www.hc-sc.gc.ca/hecs-sesc/tobacco/index.html

Heart and Stroke Foundation: www.heartandstroke.ca

Nova Scotia Tobacco Control Unit: www.gov.ns.ca/health/tcu

One Step at a Time: www.cancer.ca or phone the Cancer Information Service at 1-888-939-3333

Quit 4 Good: 1-888-566-LUNG, www.lung.ca/smoking

Quit4Life: www.quit4life.com

THE FACTS

5 pounds: average weight gain for people who stop smoking

\$8.57: cost of a pack of cigarettes

12.7 years: average age at which a Nova Scotian first smokes a whole cigarette

25%: percentage of adults who smoke in Nova Scotia

27%: percentage of Nova Scotia youth, aged 15-19 years, who smoke

28.6%: percentage of pregnant women in Nova Scotia who smoke

30%: breathing capacity lost by a pack-a-day smoker by age 50

\$31.00: price of 110 nicotine patches; up to ten patches per day can be used to control nicotine cravings

50: number of carcinogenic chemicals known to be in tobacco smoke

\$3,128.05: amount saved in one year by a pack-a-day smoker who quits

65,000: number of Nova Scotian children and teens alive today that will become regular smokers, based on today's rates

