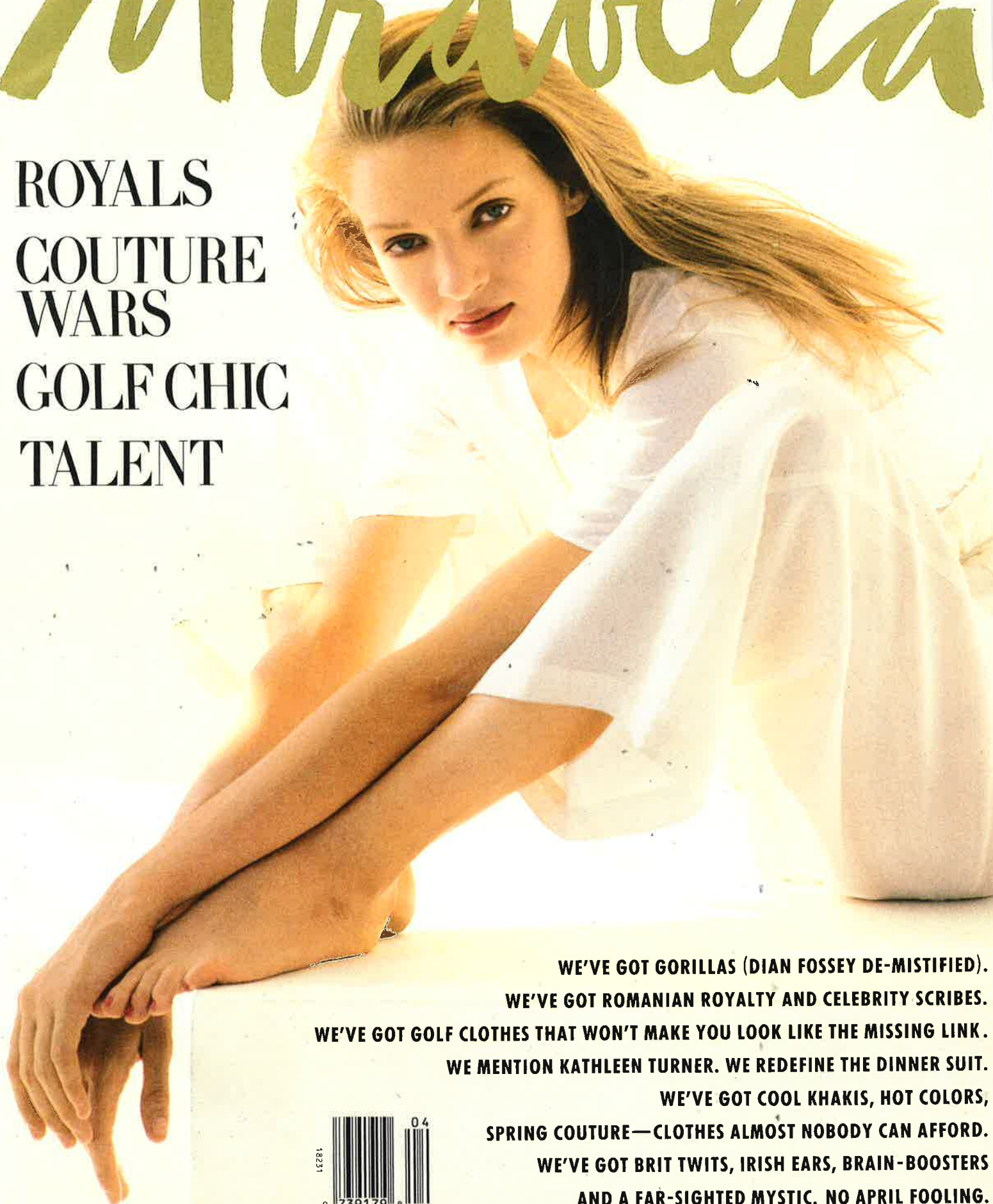


APRIL 1990
USA \$2.95
U.K. £2.50
CAN. \$3.50

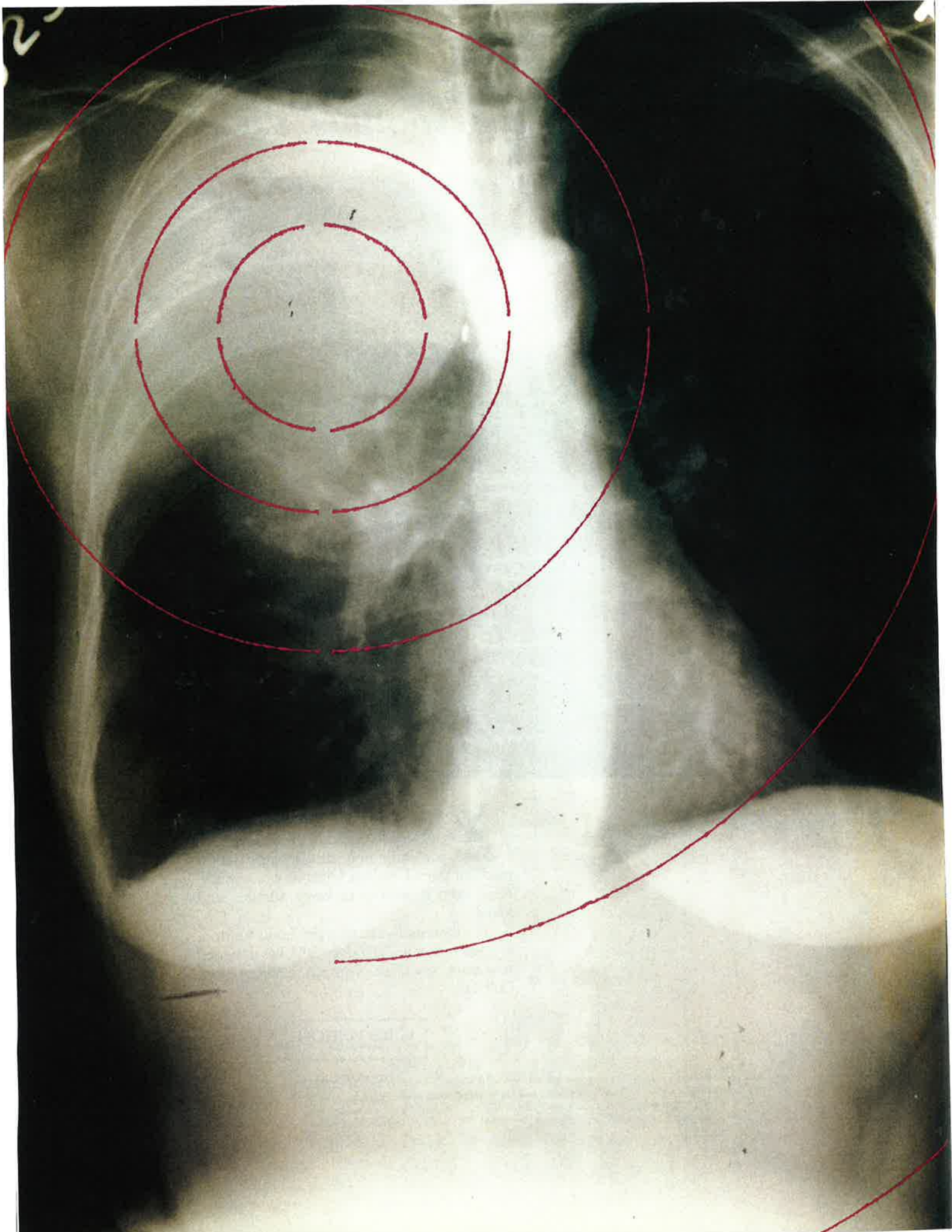
Mirabella

ROYALS
COUTURE
WARS
GOLF CHIC
TALENT



**WE'VE GOT GORILLAS (DIAN FOSSEY DE-MISTIFIED).
WE'VE GOT ROMANIAN ROYALTY AND CELEBRITY SCRIBES.
WE'VE GOT GOLF CLOTHES THAT WON'T MAKE YOU LOOK LIKE THE MISSING LINK.
WE MENTION KATHLEEN TURNER. WE REDEFINE THE DINNER SUIT.
WE'VE GOT COOL KHAKIS, HOT COLORS,
SPRING COUTURE—CLOTHES ALMOST NOBODY CAN AFFORD.
WE'VE GOT BRIT TWITS, IRISH EARS, BRAIN-BOOSTERS
AND A FAR-SIGHTED MYSTIC. NO APRIL FOOLING.**





**More women than men are starting to smoke.
Fewer women than men have been able to quit.
So more women than ever are turning up with
X-rays like this one. The tobacco industry has
been just wonderful about supporting women's
sports, women's arts, women's education.
Maybe we shouldn't be quite so grateful. Sue
Woodman peers through the smoke.**

TARGET

When R.J. Reynolds Tobacco Company announced plans late last year to test market a new cigarette brand aimed expressly at blacks, outrage was instant and extreme. Black and Hispanic community groups in Philadelphia, where the market test for Uptown cigarettes was to occur, began organizing protests. And probably for the first time on record, the secretary of health and human services strongly denounced the twin evils of smoking and cigarette companies that make "profits at the expense of the health and well-being of our poor and minority citizens." Secretary Louis W. Sullivan, M.D., who is himself black, accused Reynolds of "promoting a culture of cancer." He said, "Uptown's message is more disease, more suffering, and more death for a group already bearing more than its share of smoking-related illness and mortality."

Yet blacks aren't the only group suffering disproportionately >

LEFT: BY THE TIME LUNG CANCER CAUSES SYMPTOMS, IT MAY BE TOO LATE FOR EFFECTIVE TREATMENT. HERE, AN X-RAY OF THE LUNG OF A TWO-PACK-A-DAY SMOKER SHOWING THE LARGE CANCER THAT CAUSED HER DEATH.

TARGET

from the effects of smoking-related disease: in the last decade, there has been an alarming rise in cigarette-related illnesses affecting women. Since 1970, chronic lung diseases such as emphysema and chronic bronchitis have increased 71 percent, with the prevalence of bronchitis 40.6 percent greater in women than men. And lung cancer now surpasses breast cancer as the leading cause of cancer deaths among American women. In fact, since the 1950s, there has been a staggering 400 percent increase in lung-cancer cases among women.

Antismoking campaigners note that although the tobacco industry has long been making persuasive pitches to women, and indirectly to girls, the outcry on their behalf has been muted, if not entirely absent. "It amazes me that women's groups haven't complained about having cigarette marketing directed at them," says Bruce E. Johnson, M.D., senior investigator at the National Cancer Institute.

Lung cancer is still not recognized as a women's issue, and it should be, says Helene Brown, director of community applications of research at the Jonsson Comprehensive Cancer Center at UCLA in Los Angeles.

What makes lung cancer a women's issue today is that women are smoking more heavily, inhaling more deeply and starting to smoke earlier than they did twenty years ago. Every day, more than 1600 American teenage girls light up for the first time, and more girls are smoking than boys. "The predictions are that if current trends continue, there will be more women smokers in the United States than men by 1995," says Donald Shopland, public health advisor to the National Cancer Institute's Smoking, Tobacco and Cancer Program. (According to the World Health Organization, the number of women smokers, especially those under age thirty, has been increasing worldwide. In Belgium, Holland, Denmark, France and Italy, women smokers already outnumber men who smoke.)

As long as women continue to smoke,

they will continue to get lung cancer and other smoking-linked malignancies such as cancer of the larynx, oral cavity, esophagus, bladder and cervix.

Scientists claim that while environmental factors such as asbestos and radon are known to induce lung cancer, the number of cases traced to them is small. The foremost cause of the disease is smoking. Epidemiologists say as many as 85 percent of cases can be directly attributed to cigarettes, and if cases involving former smokers and people who live with a smoker are added, the figures would be higher. According to the 1989 surgeon general's report *Reducing the Health Consequences of Smoking: 25 Years of Progress*, women who smoke are at least twelve times as likely to



get lung cancer as women who have never smoked.

The cancer risk for ex-smokers decreases every year, and after ten to fifteen years is equivalent to those who have never smoked. However, as one cancer expert explained, "An ex-smoker is never home free. The sooner she quits, the better the chances she won't hit that point of no return."

There are several reasons women have been reluctant to come to grips with the horrors of the disease. Women, like men, ignore the dangers of cigarettes. "It's not so much disregarding the health hazards but of denying the addictive potential of cigarettes. Then they discover how difficult it is to quit," says Virginia Ernster Ph.D., professor and chair of the department of epidemiology and biostatistics at the University of California School of Medicine in San Francisco. Considering that it may be twenty to thirty years before a malignancy develops to the point of

causing symptoms, a smoker has a long time to rationalize the consequences of her actions. "It takes a shadow in the lung on a chest X-ray or blood in the sputum to convince a lot of smokers to quit," says one New York City doctor who crusades tirelessly to get women to give up cigarettes. "By then, it's usually too late."

Lung cancer remains one of the deadliest forms of cancer, with only a 13 percent survival rate beyond five years. Once a tumor has appeared, prompting symptoms such as coughing, chest pains, shortness of breath or coughing up blood, the most common form of treatment is surgery. Chemotherapy alone or in combination with radiation treatment may also be required, depending on the type of cancer,

the extent of disease and the person's state of health. If the tumor is less than one inch in size, and no cancer cells have spread to the lymph nodes or elsewhere in the body, there is a 70-80 percent chance of a cure. However, the prognosis for more advanced cancer is bad: 95 percent of these cases are fatal.

Lung cancers fall into two groups: small cell and non-small cell. Between 20 and 25 percent of all lung-cancer victims have small-cell cancer, a type of malignancy that can spread quickly outside the lungs. The remaining non-small cell types of lung cancer include squamous cell carcinoma, which typically remains localized in the chest and has the best prognosis; large-cell carcinoma; and adenocarcinoma, the most commonly diagnosed lung cancer in men and women.

When the surgeon general's first Report on Smoking and Health was released in 1964, not enough data had yet accumulated to determine how smoking affected women. But there was plenty of epidemiologic evidence to address the risks for men who, at that time, had been smoking heavily for more than thirty years, and whose lung cancer rates were reaching an alarming peak. But women, who had only begun to smoke in significant numbers ten to twenty years after men (in the late 1940s and 1950s), were still not showing signs of illness.

Today male smokers have quit in droves, their numbers declining from 50 percent in 1965 to 31.2 percent in 1987.

Recently, the American Cancer Society announced that the incidence of lung cancer in men is declining for the first time. Meanwhile, the lung-cancer rates among women are soaring, reflecting the increase in their smoking habits over the years. The American Lung Association notes that women's smoking rates are now also beginning to decline slightly, dropping from 32 to 26.5 percent. But it may take twenty years before this trend, if it continues, shows up in cancer statistics.

WHY WOMEN LIGHT UP

Smoking patterns among men and women are not entirely the same. For a number of reasons, women have some special problems with smoking. Specialists say women

another reason for smoking is fear of weight gain.

The idea that cigarettes keep weight down was first promoted in the late 1920s, in an advertising campaign that told women to "Reach for a Lucky Instead of a Sweet." The advertisers behind the slogan could not have realized how prophetic their message would prove to be—but they quickly discovered just how effective it was. The Lucky slogan, despite the vehement protests it brought from the candy industry, is widely regarded as one of the big successes in advertising history. The image of female smokers as glamorous, energetic and above all, slim, has remained central to the tobacco industry's pitch to women for half a century.

en would rather risk lung cancer than gain those extra pounds. And it's that choice that cigarette companies have long been banking on, investing millions annually to get across the "never-too-thin" message.

"Since the mid 1920's, the tobacco industry has spent many millions promoting the image of beautiful, slender women—black, white and Hispanic—to convey that it's OK, in fact good, to smoke," says Ernster. She points out that showing energetic, fit models involved in skiing and beach volleyball in advertising are attempts to alleviate health concerns."

"The problem is, that message is not sufficiently countered by the top women in this country," Gritz complains. "Nancy Reagan's 'Just Say No' campaign didn't in-

It seems that many women would rather risk lung cancer than gain those extra pounds. And it's that choice that cigarette companies have been banking on, investing millions annually to get across the 'never-too-thin' message

seem to find it harder than the men to stop smoking—only 40 percent of women manage to quit, compared to 49 percent of men. One reason for this, experts say, is that women have different reasons for smoking than men do. For example, surveys show that women are more likely than men to use cigarettes as a way of dealing with stress and negative emotions. The expression of strong feelings such as anger and frustration or direct confrontation is still not seen, in our culture, as an attribute in women but is quite accepted in men, explains Ellen Gritz, Ph.D., professor in residence of surgery at the UCLA School of Medicine and director of the Division of Cancer Control at the Jonsson Comprehensive Cancer Center. She believes people who smoke to control negative feelings have a harder time quitting because "It's harder for them to find substitute behaviors." Shopland of the National Cancer Institute says, "It could be women are more susceptible to the social cues for smoking and don't have the same ways to manage stress that men have." He believes

POUNDS FOR PUFFS

For over one hundred years, the relationship between smoking and body weight has been closely examined. Several different studies have now shown that smoking depresses weight gain. Some experts claim that nicotine use over a prolonged period changes smokers' basic metabolic rates—they burn calories faster than if they didn't smoke. Others observe that because smoking is an orally gratifying behavior, people substitute food for cigarettes in an attempt to ease the urge to put something in their mouths. And one expert points out that food simply tastes better when taste buds are not dulled by smoke. Most quitters put on an average of six to ten pounds. Long-term surveys suggest that after a few years, some of those pounds will be lost, but that ex-smokers will still be a little heavier than when they smoked.

For many women, the fear of gaining weight is a strong disincentive to quitting. And while men also put on weight, Shopland has found that women tend to get more upset about it. It seems many wom-

en would rather risk lung cancer than gain those extra pounds. And it's that choice that cigarette companies have long been banking on, investing millions annually to get across the "never-too-thin" message. I suspect that at the top levels of our government, there's a great deal of ambivalence about supporting the tobacco industry."

That ambivalence, say some experts, is widespread. The prosperous tobacco industry makes a generous friend and a formidable foe. It supports women's sports events like the Virginia Slims tennis tournament; women's education with fellowships to the Women's Research and Education Institute; and women's arts projects. Women's organizations and magazines, which provide vital channels of information, support and role models for women, receive hundreds of thousands of dollars a year from tobacco advertising or sponsorship. In a recent survey, thirteen leading women's organizations reported funding from the tobacco industry amounting to more than \$300,000.

But in return, the companies demand unquestioning loyalty: it is widely believed

TARGET

that magazines that have printed anti-smoking information have lost substantial revenues as a consequence of cigarette companies withdrawing their ads. As a result, many publications stick to safer medical turf: breast cancer, sexually transmitted diseases, diet and nutrition are constant topics examined by women's magazines, while smoking-related illnesses are rarely discussed. "So the information targeted at women de-emphasizes the true risk and concentrates primarily on issues that aren't as great a danger," says Gritz.

Where this hits particularly hard is at less-educated women who tend to get

tising is not aimed at children...but the messages are reaching children, especially the girls, the study insists. Often, those images are received at a time when a young woman's self-image is at its shakiest, and when she may be most open to a cigarette ad's nonverbal messages: smoking can calm her, give her confidence and keep her weight down. If her parents smoke, there is very little visible behavior to counterbalance those impressions. And counterbalance is essential.

"Nonsmokers cope without cigarettes," the report concludes. "The messages could come from them." But as far as women's magazines and organizations go, there are few images conveying alternative behaviors for coping with stress.

promoting athletic events such as ski races, which attract the attention of young people?

As more is known about the hazards of cigarettes, the whole issue of smokers' freedom of choice is on ever-shakier ground. There is increasing evidence to link passive tobacco smoke (exhaled secondhand smoke and sidestream smoke from burning ends of cigarettes, cigars and pipes) with lung cancer and other respiratory diseases. The Environmental Protection Agency considers environmental smoke the most widespread and harmful indoor air pollutant after asbestos. The National Research Council puts lung cancer risk at 30 percent higher for nonsmokers who live with smokers than for those

Lung cancer is still not recognized as a woman's issue. . . .

But maybe it should be

much of their health information from women's magazines; these are the women smoking in the greatest numbers. The 1985 surgeon general's report noted that 38 percent of blue-collar women workers smoke, as opposed to 32 percent of white-collar women. The 1989 surgeon general's report noted that 30.7 percent of women with less than twelve years of education smoke, as opposed to 15.1 percent of women with sixteen or more years of education. One recent report suggests that smoking has declined five times faster among highly educated women than other groups. "The blue-collar sector is a very important one," Gritz says. "This is where the public information does not permeate as strongly, and where the intervention is much better coming from lay sources rather than health authorities and professionals." Interestingly, it has been reported that blue-collar women are the group R.J. Reynolds intends to target next. According to *Adweek*, a market test is slated for the southwest this year.

And blue-collar women aren't the only ones to pick up information from women's magazines. The authors of a recent British study predicting smoking behaviors among teenagers speculate that many girls read women's magazines, and so are exposed from early on to cigarette advertising and to the sleek images of women smokers paraded in them. Cigarette adver-

What cigarette companies have done, says Kenneth Warner, Ph.D., professor of Public Health Policy at the University of Michigan School of Public Health, and senior scientific editor of the 1989 surgeon general's Report on Smoking and Health, is to buy the silence of the organizations they support—in the name of freedom of choice. "Freedom of choice is the overriding issue," insists Gary Miller, former assistant to the president of the Tobacco Institute. Throughout the history of cigarette smoking in America, freedom of choice has been a loaded symbol for women: early in this century, women were actually outlawed from smoking in certain areas. Indeed, many women leaders (often heavy smokers themselves) may choose not to speak out against smoking, because they don't want to limit any hard-won freedoms.

Antismoking campaigners are cynical about this reasoning. "Women's organizations are really saying they don't want to make it an issue. But there's something else behind it: money. They don't want to forfeit the support of the tobacco companies," says health educator Helene Brown.

As for the tobacco companies, Ernster believes that their main motive for supporting women's sports, culture, education is what she calls "innocence by association with the things we value most as a society." Could that also be the motive for

who don't. Children are particularly prone to the danger of respiratory illness. Unborn babies are at risk of lower birth weights if their mothers smoke while pregnant.

"We don't have freedom of choice in this country when it impinges on other people's rights," says Brown. "Several states already have laws limiting smoking in public places and in many workplaces. Smoking is banned altogether on all airline flights under six hours within the continental United States. I don't think smoking in the presence of others is any longer an unequivocal freedom of choice."

Cancer experts know that real freedom to choose can come for women only when they understand the facts. But these experts admit that, despite their best efforts, the facts about lung cancer are still hidden behind a smoke screen of false, manipulative images.

"As long as young women are led to think that smoking makes them beautiful, successful, slender and all the other images touted by the tobacco industry, then lung cancer will be a women's issue," says Gritz. "The reality is that smoking leads to disease and death, and dying from lung cancer is a terrible way to die."

Sue Woodman is a freelance journalist living in New York City. She used to smoke, but gave it up about ten years ago and doesn't miss it.