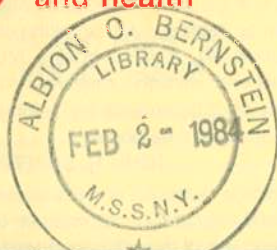




national interagency
council on smoking
and health



SMOKING AND HEALTH REPORTER

Vol. 1 No. 1, October, 1983

SENATE COMMITTEE APPROVES NEW CIGARETTE WARNING

A bill calling for strengthened health warnings on cigarette packages was approved by the Senate Labor and Human Resources Committee by a vote of 15 to 1. The entire Senate is expected to vote on the measure this fall.

The bill calls for replacement of the existing warning with a statement saying **"Warning: Cigarette Smoking Causes Cancer, Emphysema And Heart Disease; May Complicate Pregnancy And Is Addictive."** The present version of the bill contains no provision for including the warning in advertising, but Senator Bob Packwood (R-Oregon) has promised to offer an amendment requiring the warning in advertising, as well as on the cigarette pack, when the bill is considered by the full Senate.

The Tobacco Institute fought hard against the measure and issued a statement that it was "severely disappointed with the bill." The institute claims that there is no proof that cigarette smoking causes the diseases mentioned in the warning. They offered a compromise that would have agreed to a slightly stronger statement than at present, but the committee overwhelmingly rejected the offer.

The proposed warning would be the third in a series of warnings which were first ordered in 1966. The original warning said that "cigarette smoking **may** be hazardous to your health. In 1970, the warning was strengthened to state that "the Surgeon General **has determined** that cigarette smoking **is** dangerous to your health." The size of the proposed warning is expected to be about the same as the existing one.

Pressure for a tougher warning has been mounting since the release of a May 1981 report by the Federal Trade Commission (FTC) which stated that the present warning was inadequate and does not provide sufficient information for consumers to make an informed choice. The FTC has called for more specific warnings.

Among the FTC proposals was a call for a series of "rotational" warnings, with up to seven disease specific warnings which would rotate from time to time. The rotational warning provision is included in a bill before the House Subcommittee on Health and the Environ-

The hearings gained national attention when Una Loy Clark, widow of artificial heart recipient Barney Clark, appeared as a witness for the American Lung Association. Mrs. Clark testified that her husband smoked for 25 years and that "cigarette smoking has more to do with his ultimate death than any other one thing." She expressed her support for a disease specific warning.

Also testifying on behalf of the bill was Bob Keeshan, better known as "Captain Kangaroo." Keeshan testified that peer pressure "overcomes" the pre-teen's natural tendency to avoid an offensive activity such as cigarette smoking and that children need additional information on the health consequences of smoking.

Both the Senate Bill (S. 772) and the House version (H.R. 1824) are supported by the **Coalition on Smoking OR Health**. While the Coalition would prefer a rotational system, the strengthened warning approved by the Senate committee would be a "major improvement" according to Coalition spokesman Matthew Myers.

Letters and telephone calls to Senators and Congressmen may prove to be crucial to the success of these proposals.

AMERICAN LUNG ASSOCIATION FILES OBJECTION TO CAB PROPOSALS FOR SMOKING ABOARD AIRCRAFT

The American Lung Association (ALA) has filed an objection to the Civil Aeronautics Board (CAB) proposal to change rules concerning smoking aboard aircraft. The ALA suggested a total ban on smoking in small aircraft, a ban on smoking of cigars and pipes on all domestic aircraft, a ban on smoking when aircraft ventilation is not fully functioning, and provisions for special protection of sensitive individuals.

The CAB has proposed reduction of mandatory controls on certain tobacco use, allowing airlines to set their own policies. Public comments were solicited and a ruling is expected this fall.

ALA pointed out that the relatively low humidity of aircraft cabins and the current policy of reducing aircraft ventilation to conserve fuel has created serious ventilation problems for non-smokers who are forced to breathe tobacco smoke trapped in aircraft cabins. CAB regulations require 250 cubic feet of fresh air per person per minute in the pilot's cabin, but allow passenger cabins to have ventilation reduced to 7 cubic feet per person per minute. ALA recommended that smoking be banned when the ventilation rate drops below 40 to 60 cubic feet.

Original Warning:

Caution: Cigarette Smoking May Be
Hazardous to Your Health.

Present Warning:

Warning: The Surgeon General Has Determined
That Cigarette Smoking is Dangerous to Your Health.

Senate Proposal:

WARNING: Cigarette Smoking Causes, CANCER, EMPHYSEMA and HEART DISEASE; may complicate PREGNANCY; and is ADDICTIVE.

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**A Voluntary Association of National
Agencies and Organizations to Combat
Smoking as a Health Hazard**

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Editorial: THE SMOKING AND HEALTH REPORTER

The National Interagency Council on Smoking and Health (NICSH) is pleased to be able to publish this newsletter which will be distributed to over 40,000 interested parties around the country. The main purposes of this newsletter are 1) to inform the readers of the latest information on various smoking and health issues and controversies, 2) to provide for the exchange of information among various anti-smoking groups, and 3) to comment on public policy and educational thrusts as they relate to tobacco and health. It is the intent of the **Smoking and Health Reporter** to reach systematically those policy makers who are charged with responsibilities for the public's health. While education is a major part of any solution to the smoking and health problem, more responsive, defensible, and responsible public policies on tobacco are also necessary.

The editorial board, with the advise and consent of the NICSH board, will determine certain feature topics to be developed for each of the four issues published per year. For example, future issues will focus on "The Surgeon General's Report: Two Decades Later," "Smoking Cessation Techniques," and "Patient Education and Compliance with the Non-Smoking Recommendation." We invite your suggestions and recommendations on other topics suitable for a newsletter format.

While a great deal of material on smoking and health has been and continues to be published, much of this information is not distributed widely on a local level or to a diverse readership. Therefore, our objective is to publish a newsletter which is both timely as well as relevant to lay citizens and professionals alike. This audience was identified through the use of mailing lists from professional groups, responses from prior newsletters, identification of various people and groups with a commitment to antismoking efforts, and from persons known to be active in local and regional inter-agency councils on smoking and health.

It is anticipated that our initial mailing will be expanded in the ensuing months as our readers suggest additional names and addresses. Please help us by sharing your issues of **Smoking and Health Reporter** with others you know who are interested in the smoking and health problem.

It is the intent of NICSH and the **Smoking and Health Reporter** editorial board to set the record straight with respect to certain assertions and claims made by the tobacco industry. As we all know, half-truths and innuendo can sometimes be as dangerous and misleading to the public as outright misstatements; therefore, our editorial policy will be to comment directly on some of the claims made by the tobacco industry. Special attention will be focused on its advertising practices and its public information campaigns.

Finally, it is our goal to serve the anti-smoking cause in promoting a non-smoking generation, and, ultimately, a non-smoking society. Toward this end, we encourage your support and we invite your comments on making this publication as useful as possible.

JOHN R. SEFFRIN, Ph.D.

*[Dr. Seffrin is Professor and Chairman of Health and Safety Education at Indiana University, and chairman of the editorial board of **Smoking and Health Reporter**]*

IS IT JUST A COINCIDENCE...

The June 6, 1983 issue of **Newsweek** featured a four and a half page article on the anti-smoking movement. Is it just a coincidence that the issue went to press without its usual quota of cigarette ads? The typical issue of **Newsweek** features about eight full pages of cigarette advertising. The June 6 issue had none.

Tobacco industry boycotts of publishers who print articles critical of smoking have influenced the editorial policies of a number of publications. A few magazines have refused to bow to the pressure. Several years ago, **Mother Jones** magazine published an article on the health hazards of cigarette smoking and was rewarded by the cancellation of about \$100,000 in advertising contracts.

The American Lung Association recently presented awards to over 40 magazines which refuse to run ads for cigarettes. These publishers do not allow tobacco industry actions to dictate their editorial policy.

One of the major arguments made by the tobacco lobby in opposing the new cigarette warnings is a claim that the public has free access to information about the health hazards of smoking. Perhaps a total ban on tobacco advertising is the only way to assure "freedom of the press."

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Editorial:**SMOKING AND HEALTH: A PUBLIC POLICY ISSUE**

For at least 50 years there has been expressed concern by American scientists about the health hazards of smoking. However, it was not until the 1950's that enough data had accumulated to arouse the concern of the general public and our policymakers. During this decade there were many significant epidemiological studies, and seven prospective mortality studies were launched and completed.

A major study was conducted with the participation of the National Cancer Institute, the National Heart Institute, the American Cancer Society, and the American Heart Association. The findings of this study in 1957 resulted in Surgeon General Burney placing the U.S. Public Health Service on record as accepting the causal relationship of smoking and lung cancer, and the contribution of smoking to other cancers, chronic lung disease and emphysema, and coronary heart disease.

Subsequent to these developments, there was a growing concern on the part of voluntary health organizations and government health services relative to the health hazards of tobacco smoking. The President was implored to establish a Presidential Commission, resolutions were introduced in the Congress to support this request, and the regulatory health agencies of the Federal Government were requesting advice and guidance relative to the tobacco industry. About this time, the Royal College of Physicians of London issued their report which concluded "that cigarette smoking is a cause of lung cancer and bronchitis, and probably contributes to the development of coronary heart disease."

All of this led to the Surgeon General establishing an Advisory Committee on Smoking and Health in 1962, and its epic report, *Smoking and Health: Report of the Advisory Committee to the Surgeon General of the Public Health Service* in January, 1964. The contents of this report, and the manner in which it was released, was a virtual bombshell which was heard around the World. The *Report* of ten eminent biomedical scientists, who had spent 14 months studying the subject, concluded that "Cigarette Smoking is a health hazard of sufficient importance in the United States to warrant appropriate remedial action."

The specific findings of the Committee are known to almost everyone. Thousands of additional scientific studies since that time have confirmed all of the conclusions of the Advisory Committee and have extended and explained many of its suspicions.

With the release of the Advisory Committee's *Report* in 1964, smoking and health first became a public issue involving all levels of government and our public lives. Immediately, the Federal Trade Commission (FTC) proposed

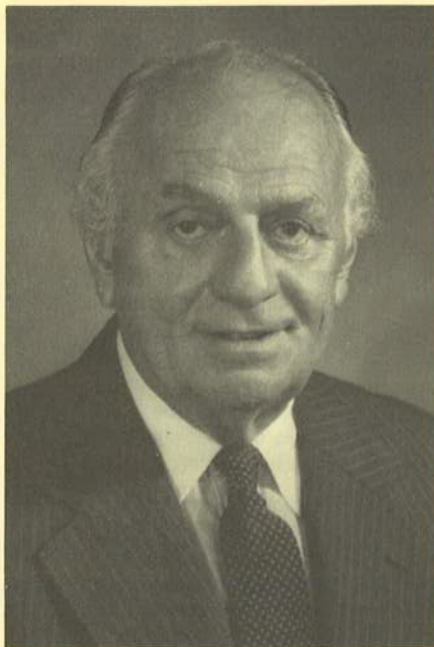


Photo: Bachrach

Luther L. Terry, M.D.

regulations to be imposed in the marketing and advertising of tobacco products, especially cigarettes.

Some of the leading members of the Congress felt that the FTC was overstepping its authority and invading the prerogatives of the Congress. Had this controversy not occurred, the issue of smoking and health might have remained dormant for some time. However, the fortunate result was that leaders in the Congress agreed that Congressional Hearings would be held on the subject of smoking and health, if the FTC would desist from imposing any new regulations in the meantime.

All of that is history now, but it is an important part of bringing the issue before the public and our governmental officials. Since the day Congressional hearings began, and particularly since the enactment of the *Federal Cigarette Labeling and Advertising Act of 1965* (PL 89-92), smoking has been recognized as a public issue and involves some of the most intricate political manipulations known to man. Since that time, laws and regulations have been proposed and fought-over by every level of our government from the White House to the smallest municipal council. It is in this context that we must be aware and be prepared to fight the battle where the forces meet.

In my opinion, some of the most important, lively, and demanding issues are:

1. Smoking in Public Places and the Rights of the Non-smoker

Certainly this has been one of the hottest issues in relation to smoking in recent years. It has been clearly established in scientific studies that the "passive smoke" which is imposed on the non-smoker can be injurious in the presence of certain diseases or allergies and that it can be unpleasant and objectionable in others.

Whether it is on the job or in a public restaurant, the ill effects of second-hand smoke can be significant. If it is in a public facility, one does have the choice of being provided a smoke-free area or taking your business elsewhere. In the recent Donna Shimp case in New Jersey, the Bell Telephone Company admitted that they did not allow smoking in the presence of their delicate machinery. They were not willing to make the same concession for an employee until so ordered by the court.

The subject of protecting the health and comfort of non-smokers will continue to be a hot issue. It has already required two statewide referenda in California, a referendum in Dade County (Miami area) Florida and numerous public votes and legislative actions throughout the country. It will continue to be important. After all, more than two-thirds of our population does not smoke, and **most** of them object to being exposed to significant amounts of smoke. We must keep this issue alive because it is one of the most tangible ways that the issue of smoking can be kept before the public, and it is an issue with wide appeal.

1B. Smoking on Public Transit Vehicles

This issue is closely related to the general problem of exposure of non-smokers to someone else's smoke. However, it does take a bit of a different twist since many of our transit vehicles are interstate and are under Federal regulations and control. In the past I have felt that the public obtained fair treatment from the various Federal regulatory agencies. The provision of separate smoking areas or the prohibition of smoking on buses and trains has been a good example. To most of us, it has been a gratifying relief.

The problem of smoking on airplanes has been a bit more complicated. One of our problems is that many of the planes which fly into or out of this country are foreign airlines and it is difficult to regulate their smoking practices. At the same time, I am absolutely amazed at the Civil Aeronautics Board (CAB) in their recent attempts to drop smoking segregation regulations on domestic airlines. To my mind, this fits into the senseless jargon of "get the government out of your life." In the first place, if we get the government out of our lives, we have anarchy. In a democracy we need some level of government protection. In many instances I agree with the objective of reducing some government interference, but the recent proposals before the CAB are beyond any logical explanation.

To the majority of our citizens, it has been a comfort to walk-up to the checkin counter and say "no smoking please" - and to get it! Admittedly, it has caused the airlines trouble on occasions, but the good will earned is worth the many thousands of hours and dollars that they have spent on public relations. Even if the

CAB changes its regulations, I will never fly on an airline which fails to protect the non-smoker. The industry and the CAB should be reminded that at least 80 to 90% of the public feels this way.

2. Subsidies by Federal and State Governments

This is a subject which is not only current but is going to get more forceful in the immediate future. For a long time many of our citizens have objected to government subsidies for the support of the tobacco industry. It is true that most of this support has been for the farmer, but the issue is broader than that.

Recently, the pressure on the federal tobacco program forced modifications in the program so as to operate without cost to the government. Tobacco farmers are going to be screaming about the higher assessment they are charged to make up the deficit. Unfortunately, the poor farmer is taking the brunt. This year the farmers will continue to pay premiums to persons who hold tobacco acreage contracts. They will have to pay \$7.00 for every 100 pounds of tobacco sold, and the tobacco stabilization fund will now have to buy more poor-grade tobacco. This will mean higher debts and an almost impossible interest burden on the current debt. This year the interest is projected to be \$226,000 per day. I hope that *Smoking and Health Reporter* will give us a detailed economic appraisal of the situation in the near future.

3. Cigarette Advertising Policies and Changes in Health Warnings

There are before the Congress a number of proposed changes in health warnings on cigarette packs and in advertising. In general, these proposals relate to the enumeration of certain health problems associated with smoking. The voluntary health organizations and many medical associations have recommended a change in the warning to make it more **specific** and more **meaningful**. Many groups have recommended a rotating series of health warnings. All of these efforts have been intended to increase the visibility of the warning and to make it more meaningful to the public.

Even if these changes prove not to be very effective in getting the smoker's attention, it is good to have these hearings in Congress. It does serve a useful educational purpose in keeping the issue before the public. I expect that the Congress will mandate changes despite the violent opposition of the tobacco industry. The Tobacco Institute opposes all warnings, arguing that "no one has ever proved that a link exists between smoking and illnesses."

4. The Office on Smoking and Health

Secretary of Health, Education and Welfare Califano elevated the status of smoking and health programs by changing the programs to a departmental Office and providing more financial support for the program. No doubt this was one of the factors involved in Mr. Califano's dismissal as Secretary. Since that time there has been great concern for the future of the federal antismoking program.

Thus far, Califano's successors have continued support of the Office on Smoking and Health, but it will be a continuing battle to keep the program alive with adequate financial support. It is important that all of our health interests keep pressure on Congress and the Administration to continue this effort and increase its financial support.

Another important point in relation to the Federal Government's role is that Congress continues to require annual reports from the FTC and the Department of Health and Human Services. These reports in the past have been essential to keeping the topic alive at the Federal level and must be continued.

5. Taxation and the Price of Tobacco Products

Over recent years there has been a tendency for state and local governments to increase taxes on tobacco products, especially cigarettes. On January 1, 1983, the federal cigarette tax was increased to 16¢ per pack for the first change since 1951. Today, Wisconsin has the highest state cigarette tax: 25¢ a pack, making total taxes on a pack 41¢. As might be expected, the state tax in North Carolina is only 2¢ per pack.

The tobacco industry has recognized that price increases decrease cigarette sales, and have developed a new gimmick, "Generic Cigarettes," which have captured about 2.5% of the market in the past two years.

These developments illustrate two points: (1) Many people are so addicted to cigarettes that they will pay almost any price; but, at the same time, some will accept a "no name" cigarette if it is cheaper; and (2) The industry is making many changes in the form of new brands and more sophisticated advertising. An official of Phillip Morris has referred to their new brand, Players, as "a brand designed, formulated and packaged to an upscale mode of life."

It is the hope and expectation that increased taxes, and thus increased prices, will continue to decrease cigarette sales and particularly to the younger segment of our population.

The health interests should applaud and encourage any increase in taxes on tobacco products, but at the same time, every effort should be made to designate this increased income to fighting smoking.

It is obvious that smoking and health will continue to be an active interest in our public discussions and in the formulation of public policy. It is important that the health interests keep aware of developments in this arena. It will require the devotion and participation of many of our citizens to win this battle over the massive monetary strength of the tobacco industry. Today, the United States has the lowest smoking incidence of any of the more advanced nations. Let's keep up the fight and win this war against our most preventable cause of disability and death.

LUTHER L. TERRY, M.D.

[Dr. Terry, Emeritus Professor of Research Medicine at the University of Pennsylvania, and member of the editorial board of *Smoking and Health Reporter* was Surgeon General of the U.S. Public Health Service at the time of the 1964 Report.]

"AVERAGE MORTALITY" MAY UNDERSTATE THE TRUE RISK OF CIGARETTE INDUCED DEATHS

In a recent article in the *American Journal of Public Health*, a research team from the University of Michigan School of Public Health described the impact of premature deaths avoided by the anti-smoking campaign. The study also provided an answer to the often used rationalization for not quitting smoking, "I know someone who lived to be 100 and smoked every day."

We always knew that **some** people do live to a ripe old age despite their smoking. This means that if the "average" reduction in life expectancy for two pack per day smokers is over eight years, and some people's life expectancy isn't reduced, that the impact on those who **do** die is going to be greater than eight years.

Those people who die from their smoking die an average of **twenty-three years** prematurely. This means that the smokers who are "caught" by their smoking die in their fifties and sixties, instead of their seventies and eighties!

The next time a patient or client tries the "I know someone..." rationalization, you will have a better story to tell them.

[Warner, K.E., and Murt, H.A., "Premature Deaths Avoided by the Antismoking Campaign," *American Journal of Public Health* 73(6):672-677, June, 1983.]

"TOBACCO SPITTING CONTESTS": MARKETING PLOY ATTRACTS MINORS TO SMOKELESS TOBACCO PRODUCTS

The June, 1983 issue of *The Tobacco Observer*, the newsletter of the Tobacco Institute, featured a story claiming that the tobacco industry doesn't encourage minors to use cigarettes. The story claimed that they were doing an "exemplary" job in preventing experimentation with tobacco, and claimed White House endorsement of their campaign. The Tobacco Institute's article described the new federal initiative to combat drug and alcohol abuse by the nation's youth.

The article did not mention a new government report, "Why People Smoke Cigarettes," which identifies nicotine as an addicting drug. Nicotine is present in all forms of tobacco, smokeless as well as cigarettes.

While the Tobacco Institute is advertising that the tobacco companies are not encouraging minors to smoke, the word apparently hasn't reached the smokeless tobacco manufacturers, who are using "Tobacco Spitting Contests" to peddle their wares to minors in the Midwest and South this year. These contests are often part of larger outdoor recreational activities such as county fairs or seasonal festivals. In some cases, local youth groups are used to co-sponsor the events.

Often these events stay just inside the limits of the law. In Indiana, for example, laws prohibit the sale of tobacco products to certain minors, but distribution of free samples by tobacco company representatives to the same minors is not expressly prohibited.

Free sampling is an important part of the marketing strategy for smokeless tobacco products. Richard Gauvain, Senior Associate-Corporate Affairs, at U.S. Tobacco, was quoted in a 1981 report as saying "TV is very effective in communicating information about a previously unknown product, but increased sales are a result of person-to-person contact and free sampling." It is clear that such free sampling is an important part of the smokeless tobacco marketing plan, and that attracting minors to their products is also a key strategy.

At some of the contests, prizes are awarded for the "best performance" by age group—with some of the age groups going down to pre-school ages. Youth oriented premiums such as "Beech-Nut Frisbees," buttons, and T-shirts are distributed as part of the promotion. Television advertising often uses athletes, or other role models attractive to children, to peddle chewing tobacco and snuff. "Bubble-gum chaws" are sold to capitalize upon this role model phenomenon.



Photo: Phil Whitlow, The Herald-Telephone, Bloomington, Indiana

"Beech-Nut Bibs" and "I'm a Beech-Nut Nut" buttons are popular youth-oriented premiums at Tobacco Spitting Contests.

Nicotine has been identified as an addictive substance and is harmful regardless of how it is taken. There is convincing evidence that serious health consequences face those who chew tobacco or "dip" snuff. As one spectator at a local "Tobacco Spitting Contest" put it: "There ought to be a law against this!"

[Editor's Note: In the accompanying article, freelance writer Ann Wesley describes the activity at one such contest.]

TOBACCO SPITTING CONTEST "COMPLETELY WITHIN RIGHTS" SAYS LOCAL FAIR BOARD PRESIDENT

by ANN WESLEY

For the past four years, the Monroe County (Indiana) Fair Board and the Beech-Nut Tobacco Company have sponsored a "Tobacco Spitting Contest" as part of the annual 4-H County Fair. While the contest is open to "everyone over the age of 13," only a handful of contestants were not minors.

In past years, prizes were offered for the "best spit" by an under-6 year-old contestant, but this portion of the event brought such an outrage from local anti-tobacco groups that the county prosecuting attorney became involved. Since Indiana law forbids only the sale of to-

bacco products to persons under 13, the sponsors were not in technical violation of the law. Due to the protests, however, for the past two years the contests have been limited to those 14 years old and older.

On September 1, 1983, Indiana law was amended to raise the age limit for tobacco purchases to 16. This year's contest, held July 28, beat the deadline by 35 days, so 14 and 15 year olds were allowed to participate.

County officials seemed unconcerned with the implications of the contest. When the deputy prosecutor was called this year to determine whether the promoters of the contest were acting within the law, he was clearly unconcerned. He said that he didn't know if they were in violation, hadn't checked, and probably wouldn't unless someone decided to make a "big deal" out of it again. He said he had "gotten stuck" answering the same questions two years ago.

The president of the fair board, Russell Harrington, also was rather unconcerned about the children in the contest, and whether or not they were over the age of 14. He laughed at the question of whether or not they were violating the law, and said that the fair was completely within its rights to have the contest; and it was within its rights even if it encouraged young people to participate in such a contest and chew tobacco.

The fair board is a property tax supported agency of the county government in Indiana. In Monroe County, the fair board receives over \$36,000 per year in tax support.

At the contest, Beech-Nut representative Dave Willibey seemed to think the contest was beneficial to both the county and his company. "Its promotional. We try to get as much advertising as we can."

As part of that promotion, Beech-Nut gave away about 12 dozen packages of chewing tobacco. According to Willibey, it was supposed to be for contestants; however, there were only about 40 contestants, the majority in the 14 to 17 year old bracket. No one supervised the supply of free tobacco, which was left sitting out on tables. Several youngsters not more than 10 years old grabbed packages and scampered into the bleachers, where about 200 spectators cheered.

While Willibey tried to convince reporters he would not let persons under 13 participate, he made no attempt to check id's of those participating, only requiring them to sign their name and address.

As another part of their promotion, Beech-Nut provided buttons which read "I'm a Beech-Nut Nut," and gave away Beech-Nut bibs and frisbees to the participants, including two young boys ages 9 and 10 who were allowed to "mop up" the mats after each contestant, so that they could take some part in the activity.

continued on page 8

The Great American Smokeout

Take a day off from smoking • Nov. 17, 1983



LARRY HAGMAN TO SERVE AS HONORARY CHAIRMAN FOR 7TH ANNUAL GREAT AMERICAN SMOKEOUT

The health consequences of cigarette smoking are no laughing matter; neither is quitting. But once each year, millions of serious quitters do have some fun as they try to make it through a day without cigarettes. The Great American Smokeout is an annual celebration sponsored by the American Cancer Society, during which the Society urges smokers to go a full 24 hours without cigarettes. This year, Smokeout Day is Thursday, November 17.

Larry Hagman of "Dallas" will serve a third year as Great American Smokeout Chairman. Hagman has become famous for his portable fan (see photo) which is used to send a message to smokers that he doesn't want to breathe their smoke-fouled air. This year, Hagman has a special message for non-smokers eager to help smoking friends through the day: "Give 'em sympathy, give 'em understanding, but don't give 'em a cigarette, 'cause good friends are hard to find, and even harder to lose." The popular *Larry Hagman Special Stop Smokin' Wrist Snappin' Red Rubber Band* will again be available.

Good times are the order of the day. Festivities designed to amuse smokers, lift spirits and keep minds off cigarettes will be in full force. Communities around the country will hold rallies and parades, songfests and athletic meets. Smokers can "run their butts off" in special races, testify at mock trials that place cigarettes on the stand, pay their respects at cigarette "burials," and write limericks poking fun at their habits.

Volunteers of the American Cancer Society will be at shopping centers, parks, and downtown areas to offer tips on quitting and moral support. Would-be quitters will receive quit tips and stickers that announce their intentions (e.g. "It ain't Easy, But I'm trying.")

Companies and schools will attempt to create environments conducive to quitting. Special crisis centers and "hotlines" will give smokers a source of support if their willpower wilts. Official "Adopt A Smoker" proceedings will arrange for non-smokers to adopt a smoker for the day, and try to lead their "adoptees" on the path to smokelessness. (Adoption papers will be available from local Units of the American Cancer Society). Cold Turkey will be a popular luncheon item served with a side order of information on quitting for smokers.

This is the seventh anniversary of the Great American Smokeout. This unusual national event continues to have an enormous impact on smokers. Last year, according to a Gallup study, **3 out of 10 cigarette smokers in the country** either cut down or cut out smoking for the day. Close to 4.5 million smokers actually quit for the whole day, and about 2.3 million of these quitters were still not smoking 1 to 11 days later.

For additional information on Great American Smokeout activities in *your* area, contact your local unit of the American Cancer Society.

GREAT AMERICAN SMOKEOUT CAN HAVE A POWERFUL IMPACT ON SMOKING IN YOUR COMMUNITY

In the seven years that the Great American Smokeout has been celebrated, it has made a tremendous impact upon the prevalence of cigarette smoking in this country. Millions of smokers who participated in Smokeout activities have quit smoking for good.

During last year's event, almost 20,000,000 smokers made some attempt to reduce their smoking for the day. While not all of them were completely successful, a Gallup study showed that close to 4.5 million smokers made it through the entire day without a cigarette. About 7% of those making the attempt never smoked again.

Even more important, there is mounting evidence that such activities can make an impact upon other smokers who **don't** try to quit at that time. It appears that success at quitting is the culmination of a chain of events, and that any publicity on smoking, any recommendation to quit, and any attempt at quitting, *whether successful or not*, increases the likelihood of success at quitting in the future.

Participants who do make it through the day gain confidence in their ability to manage their habit. Even if they do not quit for good at this time, they develop a belief that they **can** quit. This "locus of control" factor is important in any type of permanent behavior change.



Photo: American Cancer Society

Larry Hagman and his portable fan prepare to blow-out smoking during the Great American Smokeout.

The American Cancer Society has prepared a series of "kits" to assist local organizations in planning their own Smokeout activities. Kits are available for secondary schools, colleges and universities, hospitals, and employers. Most local units have packets of materials for physicians, dentists, and other health professionals.

Employers can take advantage of the cost savings that non-smoking employees will provide by planning Smokeout activities for their workers. The typical smoking employee costs the employer over \$4,000 per year, according to a report by William L. Weis of the Albers Graduate School of Business. If 7% of those attempting the Smokeout are successful, **an employer could save over \$280,000 per year by getting 1,000 employees to make the attempt.**

Workers who smoke have an absenteeism rate 30 to 40 percent higher than non-smokers and have a 50 percent greater chance of hospitalization than their non-smoking colleagues. One study of job related accidents found that the total accident rate among smokers was twice that of non-smokers, precipitated by loss of attention, preoccupation of the hand, eye irritation, and coughing.

the
**Great American
SMOKEOUT**

NEWS ITEMS OF INTEREST

'LOW NICOTINE' CIGARETTES DELIVER HIGH LEVELS OF THE DRUG: PRODUCTS DESIGNED TO FOOL FTC'S TESTS.

Several recent reports have demonstrated that the so-called "low nicotine cigarette" delivers as high a dose of nicotine as the high nicotine brands. In a recent article in the *New England Journal of Medicine* [Benowitz, N.L., et al., "Smokers of Low-Yield Cigarettes Do Not Consume Less Nicotine," *New England Journal of Medicine* 309(3):139-142, July 21, 1983] a team of researchers discovered that despite advertising claims of low nicotine yields, so called "low nicotine cigarettes" contain just as much nicotine in their tobacco and produce blood cotinine levels just as high as the high nicotine brands. Cotinine is a metabolite of nicotine and is used to measure nicotine intake.

A study published in Kozlowski, L.T., et al., ["The Misuse of 'Less Hazardous' Cigarettes and Detection: Hole Blocking of Ventilated Filters," *American Journal of Public Health* 70(11):1202-1203, November, 1980] showed that some "low nicotine" cigarettes were designed in such a way as to produce low scores on the FTC test equipment, but produced high yields when held in a human mouth.

The findings from these and other studies seems to indicate that smokers who switch from a "high" to a "low" nicotine cigarette are not reducing the risks associated with nicotine use. The cigarettes were designed to reduce nicotine yields to test machines and still provide high yields when smoked by humans.

A tobacco industry spokesperson stated that the industry never claimed that "low nicotine" cigarettes delivered less nicotine to humans.

CIGARETTE SMOKING LINKED TO DYSPLASIA AND CANCER OF THE CERVIX

Two case-control studies have linked cigarette smoking to the development of dysplasia and cancer of the cervix. A dose-response link was noted with heavier smokers and those who have smoked for at least 12 pack-years having the highest risks. The risk was greatest for women who began smoking in their early teenage years. [Trevathan, E., et al., "Cigarette Smoking and Dysplasia and Carcinoma In Situ of the Uterine Cervix," *Journal of the American Medical Association* 250(4):499-502, July 22/29, 1983 and Lyon, J.L., "Smoking and Carcinoma in Situ of the Uterine Cervix," *American Journal of Public Health* 73(5):558-562, May, 1983.]

FEDERAL REPORT BRANDS NICOTINE AS AN ADDICTIVE DRUG, CALLS CIGARETTE SMOKING "MOST WIDESPREAD EXAMPLE OF DRUG DEPENDENCE"

In its new publication, "Why People Smoke Cigarettes," issued this March, the U.S. Public Health Service publicly branded cigarette smoking as "the most widespread example of drug dependence in this country," accounting for **more deaths and illness than all other drugs and substances of abuse combined.**

The report was developed from testimony of Dr. William Pollin, Director of the National Institute on Drug Abuse, before a U.S. Senate Committee last year. It clearly identifies nicotine as the addictive substance in tobacco and states that "the addictive nature of cigarette smoking is why cigarette sales continue year after year."

The release of this report on March 7, 1983 marked the most serious characterization of cigarette smoking by the Public Health Service. The addictive properties are especially hazardous with cigarette smoking, since repeated use over time causes catastrophic health consequences.

SURGEON GENERAL'S REPORTS, 1964-1982, NOW AVAILABLE ON MICROFICHE

From 1964 to 1982, fifteen "Surgeon General's Reports" on the health consequences of smoking have been issued. The complete set of each of these reports, together with a bound index, is now available. These reports, including the seminal 1964 report, *Smoking and Health: Report of the Advisory Committee to the Surgeon General of the Public Health Service*, and the annual reports mandated by Congress since 1967, are the definitive source of information on smoking and health.

The re-publication of these reports on microfiche, and the publication of a cumulative index to the 15 volumes will provide a valuable reference tool to anyone interested in the health consequences of smoking. It is inconceivable that a research library would not add the index to its collections.

The microfiche set and bound index are available for \$195.00 plus \$4.50 for postage and handling. The index alone is available for \$50.00 plus \$2.30 for postage and handling.

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FIFTH WORLD CONFERENCE ON SMOKING AND HEALTH ADDRESSES INTERNATIONAL CONCERNS

The Fifth World Conference on Smoking and Health, held July 10 to 15, 1983 in Winnipeg, Canada, approved several *top priority* recommendations concerning international problems relating to smoking and health.

Among the recommendation was a statement "that the **primary objective** of international and national smoking control programs should be to establish **NON-SMOKING AND THE RIGHT TO A SMOKE-FREE ATMOSPHERE AS THE NORM**," The ministries of health of all countries will be asked to report to the 1987 World Conference on progress made toward meeting the World Health Organization (WHO) recommendations concerning advertising, health warnings, sales to minors, and health education programs.

The conference also recommended that a world-wide "NON-SMOKING DAY" be held each year, beginning in 1984. Women's health groups were encouraged to deal with the emerging problem of smoking among women.

Additional recommendations accepted at the five day conference included the suggestion that governments use appropriate taxation measures to reduce tobacco consumption. Developing countries should be provided with the necessary support to overcome the growing threat of the tobacco industry.

This year's conference is the fifth in a series of international meetings which began in response to the worldwide publicity on the hazards of smoking which evolved from the release of the 1964 Surgeon General's Report. The next World Conference is scheduled for 1987.

the
great
american
smokeout



AMERICAN HEART ASSOCIATION DEVELOPS NEW ANTISMOKING CAMPAIGN FOR ADOLESCENTS

The American Heart Association previewed a new smoking education program aimed at adolescents in a symposium held in New York City on June 1. The program, "Save a SweetHEART," is designed to counter the effects of the billion dollars of cigarette advertising produced each year by the tobacco industry.

The program features ads which appear to be similar to real cigarette ads, but the models in these ads aren't smoking. A warning in one of the ads read "Teenagers: Smoking causes bad breath and yellow teeth."

"Save a SweetHEART" was developed using the latest social research about youthful smoking. Peer pressure, social group acceptance, and aesthetic considerations are often more important to adolescents than health warnings. The new program reminds teenagers that non-smokers are the **majority** and that only about one-quarter of all teenagers are smokers.



national interagency council on
smoking and health

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TOBACCO INSTITUTE IS MISINTERPRETING THE FINDINGS OF "MRFIT"

The Tobacco Institute has attempted to interpret the final report of the Multiple Risk Factor Intervention Trial (MRFIT) as demonstrating that cigarette smoking does not cause heart disease. This interpretation is clearly inconsistent with the report as published in the September 24, 1982 issue of the *Journal of the American Medical Association*. MRFIT was a randomized primary prevention trial to compare the effectiveness of a multifactor intervention with usual sources of care in the community.

The findings of MRFIT clearly show that cigarette smoking is an important factor in the onset of heart disease. The results were confounded by the fact that significant numbers of the "control" group also quit smoking. (They were under the care of family physicians and other health care providers who encouraged them to quit).

While MRFIT cast some doubt on the advisability of certain hypertension medication regimens, it clearly and convincingly demonstrated that cigarette smoking is an important correlate of heart disease. ["Multiple Risk Factor Intervention Trial: Risk Factor Changes and Mortality Results," *Journal of the American Medical Association* 248(12):1465-1477, September 24, 1982.]

TOBACCO SPITTING

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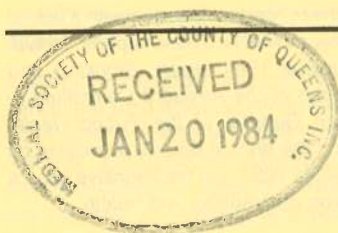
Not all of the contestants were seasoned chewers, in fact, many began chewing specifically for the contest. As Ann Naylor, winner of the girl's contest said, "Not many girls chew. The guys always tease us and try to get us to try it. This is our once a year chance to do it." Naylor said she only chews tobacco for a few weeks each year before the contest. She is 15 years old.

Andrea Vencel, 14, also doesn't normally chew, and was participating in the contest for the first time this year. She said she learned how to spit at previous contests where they let her practice every year until she was old enough to participate.

During the contest, a six year-old boy was standing next to the bench of contestants with a wad of tobacco in his mouth. He said he was mad that he could not participate this year, because his parents had given him permission. As a result, he was practicing so he would be sure to win when he is old enough. The child said that one of the contestants had given him the tobacco.

Willibey said he was pleased with the turnout. He said he wasn't sure how the contests would affect Beech-Nut sales, but "We'd like to hope these (contestants) will begin chewing Beech-Nut."

TAKE A DAY OFF FROM SMOKING
NOVEMBER 17, 1983



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