

HEALTH CONSEQUENCES OF SMOKING - 50 YEARS OF PROGRESS: A REPORT OF THE SURGEON GENERAL

2014 marks the 50th Anniversary of the first *Surgeon General's Report on Smoking and Health*. 20 million people have died from smoking or exposure to tobacco smoke since the release of the first report in 1964.

The new 2014 report reviews the history of health and smoking over the last 50 years, discusses the progress and the challenges that have been made and explains new research that has linked additional illnesses and diseases with tobacco use.

To review the 2014 report Executive Summary, [click here](#).



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The New Age of the E-Cigarette

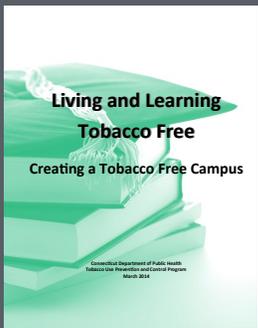
Electronic cigarettes, e-cigs, vape pens, e-pens, vaporizers, disposable hookah, hookah pen...there are many names but no matter what they are called, there is no scientific evidence that these nicotine delivery devices are safer than other forms of tobacco. These devices have gained great popularity over the last few years due to their increased marketing, claims that state they are safer than traditional tobacco products, allow more freedom to smoke where traditional smoking is banned, and help with quitting tobacco. All is not what it is made out to be and there is a lot of confusion and misunderstanding about what these products are all about.

These nicotine delivery devices are battery-operated and contain cartridges filled with nicotine, flavoring and other chemicals. Studies have shown that these "other chemicals" include cancer-causing carcinogens and toxic chemicals such as diethylene glycol, an ingredient in antifreeze. Although some of the makers of these devices state that they can be used with e-liquid or juice that does not contain nicotine, studies have shown the non-nicotine cartridges often still contain trace amounts of nicotine, continuing nicotine addiction. Many of the products have substandard quality control.

Many "vapor shops" and "vapor lounges" have been opening across Connecticut with no oversight since these products are not regulated or included in current state law. Many of these shops mix their own "juice". Although this may allow the actual contents to be known, the process and manner in which they are mixed is unregulated, Nicotine contents of the "juice" are varied to meet consumer demand.

Earlier this year, the FDA proposed a new rule that would extend the agency's tobacco authority to cover additional tobacco products that include electronic cigarettes. The FDA proposes to "deem" these products under the definition of a tobacco product and therefore they would be subject to the same regulations as other tobacco products.

These products often look like traditional cigarettes or pens and are either reusable or disposable. When someone inhales from the end of these devices, a battery operated vaporizer heats liquid solution into a vapor. This vapor contains chemicals including propylene glycol, glycerin, nicotine, metals and cancer-causing carcinogens. The health hazards associated with using the device or [\(continued on pg. 5.\)](#)



CREATING A TOBACCO FREE CAMPUS TOOLKIT



Over one third of people aged 18 to 24 attend college and one quarter attend a four-year college. Tobacco use is common among college students. Tobacco free campuses protect the health and safety of students, faculty, staff and visitors.

The Tobacco Free College Campus Initiative is a collaboration of the US Department of Health and Human Services, the American College Health Association and the University of Michigan. The Initiative encourages the voluntary adoption of tobacco free policies at

Living and Learning Tobacco Free

institutions of higher learning across the nation.

CT DPH Commissioner Dr. Jewel Mullen is encouraging all CT colleges and universities to implement tobacco free policies on their campuses. U.S.

Senator Chris Murphy has also sent a letter to CT colleges and universities urging them to join the Initiative and go tobacco free.

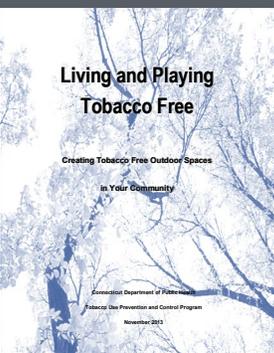
To help with this effort, the Tobacco Use Prevention and Control Program has developed a tool kit "Living and Learning Tobacco Free: Creating a Tobacco Free Campus". This tool kit provides step by step instructions, implementation tools and educational materials to help schools outline the best way for them to enact policies.

One in three college students use some form of tobacco. 1.7 million college students will die

of smoking-related illness, over 10% of current college students nationwide. One in five students has experienced some immediate health impact from exposure to tobacco smoke on campus.

College/university campuses offer unique opportunities for promotion of social norms that support healthy living and lifestyle choices. Tobacco Free Campus policies protect the health of everyone, including the tobacco user, help reduce tobacco waste on campus, eliminate the perception that any form of tobacco is safe and acceptable, and assists in changing social norms.

For help with creating a tobacco free campus, contact the CT Tobacco Use Prevention and Control Program at DPHTobacco@ct.gov



CREATING TOBACCO FREE OUTDOOR SPACES TOOLKIT

CONGRATULATIONS TO CT'S NEW TOBACCO TREATMENT SPECIALISTS



In March of 2014, the Tobacco Program hosted the Tobacco Treatment Specialist Core Training, a four-day training taught by the University of Massachusetts Medical School, Center for Tobacco Treatment and Research. The Training provides understanding on aspects of nicotine addiction, best practice methods on treating nicotine dependence and tools and methods to engage and retain clients. We congratulate the 38 new Treatment Specialists and wish them luck in their certification process. Stay tuned for the next Specialist Training opportunity in November 2014. Contact the Tobacco Program if you are interested in attending the next session.

Geralyn Laut, Meriden Department of Health and Human Services



Why I Do What I Do.....

When I arrived at my office building this morning someone honked their horn from a parked car as I approached the front door. Upon close examination, it was Joe L with a big beaming white smile despite the two or three missing front teeth and the fact that he was diagnosed with lung cancer one year ago. Joe was happy to see me BUT even happier to be a non-smoker.

Joe was one of my first clients when our program started, whose picture blowing into my CO breath check machine and story was featured in an article in the Record Journal. **(Lesson # 1: A feature article gets more attention and subsequent program interest than a flyer on the wall. I spoke directly with the RJ Editor announcing the grant award and offering to host a meeting with a reporter and two successful quitters willing to tell their personal stories. He sent a reporter and a photographer the next day.)**

Joe is a 59 year old African-American, with diabetes, gout, high blood pressure, high cholesterol, COPD and **now** lung cancer. When he first came to see me, he smoked 20+ skinny cigars a day. **(Lesson # 2: Cigars such as Cheyennes or Durangos cost as little as \$2.50 a pack and many smokers will**

snuff out, and re-light the same cigar or cigarette, resulting in a frequency of smoking far more than 20 times per day. So don't be misled when a client claims he or she only smokes a half a pack. Their dependence on nicotine may be greater than you think, and require a higher dose of NRT than expected.)

After several counseling sessions and 10 weeks of NRT, Joe was proud to admit he could go days without smoking, and only occasionally smoked just one a day, despite my warnings and encouragement to stop "playing with fire".

(Lesson # 3: Although Joe was lucky to never resume his pack a day habit, the addictive factor of tolerance will generally lead an individual who chooses to smoke ONLY a few, back to his or her initial consumption pattern.)

Joe moved to New Haven, but stayed in touch. He called last summer to announce that he finally QUIT for GOOD.... After our brief conversation, I got the sense that his voice was hoarser than before, and I asked if he'd been sick. He casually remarked that he had just finished a course of radiation and was embarking upon chemotherapy for a tumor found on his left lung. My heart sunk, but I told him how proud I was that he was 100% tobacco

free and that I only wished we had met 20 years earlier. We reviewed some of the strategies for stress management and I explained that non-smoking cancer patients respond much more favorably to treatment AND reminded him that I am always just a phone call away, if and when he needed a pep talk. **(Lesson # 4: Tobacco dependence is a chronic relapsing condition. Although my part time position limits my availability, I encourage folks to e-mail whenever the need arises... reminding them that calling to brag and affirm their present non-smoking status, or calling as a way to avert a slip-up, or to admit to a slip up with the intention to get right back on track will help to prevent a relapse. Other recommendations include the CT Quitline, the BecomeAnEx.org website and apps like Quit Net and Cessation Nation for support 24/7.)**

Joe left my office this morning to go to his Lung Life Therapy session down at Yale. Before departing he bragged that his blood sugar readings are better, that they took him off his blood pressure medicine **(continued on page 5)**

New Jersey – a bill to ban smoking from public beaches and parks has moved through the General Assembly and is headed to the Senate for a vote. [read more](#)

Illinois -The Chicago City Council agreed to ban the sale of menthol and flavored tobacco products within 500 feet of schools. [read more](#)

Georgia – Tobacco use, including e-cigarettes, has been banned from all public universities and college campuses starting in the Fall of 2014. [read more](#)

United States – Attorney Generals from more than 24 states sent the five largest pharmacy retailers a letter encouraging them to stop selling tobacco products in their stores with pharmacies. [read more](#)

China – Announced that they will ban smoking in public places nationwide by the end of 2014. [read more](#)

Australia – A study has shown that point-of-sale display ban decreases spontaneous purchases of tobacco products. [read more](#)

Tips From Former Smokers

TIPS ads are still airing and CDC is about to release a new set of tobacco users that tell their story of how tobacco use and secondhand smoke impacted them and those they loved.

During the last year, two of these TIPS story tellers lives came to an end:



Terrie, 53, died September 16, 2013, from the cancer she fought so bravely during the final 13 years of her life.



Nathan, 54 died on October 17, 2013 from the lung damage caused by exposure to secondhand smoke at his workplace

We are grateful for their willingness to share their stories in an effort to help others.

Tobacco and Pharmacies Don't Mix

In February 2014, CVS Caremark made the momentous decision to no longer sell tobacco products. By October 1, 2014, all tobacco will be removed from the shelves in all of their stores (over 7,600) across the nation.

Tobacco Free Pharmacy policies are slowly becoming the norm in the nation. In 2008, San Francisco was the first municipality to ban the sale of tobacco products in pharmacies. Since then, 80 municipalities in Massachusetts have passed bans and New York and other states are considering bans.

Why Tobacco Free Pharmacies?

People go to pharmacies for health care products and medication to help them achieve or maintain good health. Pharmacists are trusted healthcare providers who provide medical advice. Selling tobacco products in pharmacies **sends mixed messages about the dangers of tobacco use.**¹

The presence of tobacco products makes it **more difficult for those attempting to quit to be successful.** Cessation products are often

“Ending the sale of cigarettes and tobacco products at CVS/ pharmacy is simply the right thing to do for the good of our customers and our company. The sale of tobacco products is inconsistent with our purpose- helping people on their path to better health. Cigarettes and tobacco products have no place in a setting where health care is delivered. This is the right thing to do.”

– Larry Merlo, CVS Caremark President and CEO

placed next to or very close to tobacco products. Seeing the tobacco products can cause craving and spur impulse buying, sabotaging the quitting effort.

Pharmacists code of ethics state they are to *“be committed to the welfare of their patients and must act with honesty and integrity in professional relationships, avoid actions that compromise dedication to the*

*best interests of their patients.”*² Selling tobacco products which are a known health hazard is at odds with this code. It is a **conflict of interest** for pharmacists to sell medications to treat conditions that are attributed to tobacco use and medications that assist with cessation while also selling tobacco products.

Eliminating the sale of tobacco products in pharmacies makes public health sense and is part of a more comprehensive approach to reducing youth initiation and promoting cessation.

For more information about Tobacco Free Pharmacies, go to www.countertobacco.org



1. Counter tobacco. Tobacco Free Pharmacies Action Guide, Chapel Hill, NC. March 2014,
2. American Pharmacists Association. Code of Ethics for Pharmacists. <http://www.pharmacist.com>

To help a persistent cough go to aisle 8.

To get a persistent cough go to aisle 14.

Cigarettes & pharmacies don't mix.

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2014 LEGISLATIVE SESSION WRAP UP

PASSED- Public Act 14-76- An Act Concerning the Governor's Recommendation regarding Electronic Nicotine Delivery Systems and Youth Smoking Prevention- Prohibits the selling, giving or delivering of electronic nicotine delivery devices to youth under the age of 18. Prohibits youth under the age of 18 from possessing or using such devices in public places. (effective October 1, 2014)

DIED -HB 5151 - An Act Concerning Hookah Lounges- Allowed municipalities to grant licenses to people to operate a hookah lounge. (died in house at the end of the session)

In addition:

There was no expansion of the Clean Indoor Air Act to include all workplaces or other spaces.

Why I Do What I Do continued...

and that his cholesterol level is lower too. He admitted earlier that they are “watching a few new spots on his other lung”... (**Lesson # 5: Focus on the positive. In this business, it's important to focus on the successes and not the failures, for as we know the success rates are far lower than we would like them.**) Although Joe will probably die as a result of his lifelong addiction to nicotine, I'd like to think I have helped to lengthen and improve the quality of his life, while also diminishing some of his other risk factors, AND I've helped to put a smile on his face. (**Lesson # 6: Studies have demonstrated that people who have quit smoking report that they experience less stress, more stable moods and more satisfaction. Overall, 96% of ex-smokers feel happier than they**

were when smoking!) I admit, it's not always easy, but a smile like Joe's and the thank you hugs and e-mails from other clients make it all worthwhile.

(**NOTE:** GERALYN has a Masters in Community Health Education, and is certified as both a Prevention Professional and as a Tobacco Treatment Specialist. She has worked in community, hospital and worksite settings helping smokers quit over a span of 30 years. She is happy to share more information about Meriden's Tobacco Cessation Program and to brainstorm ideas about challenging clients. She can be reached at (203) 630-4003 or e-mail at glaut@meridenct.gov.

The New Age of the E-Cigarette continued...

inhaling the exhaled vapor are not yet known.

The advertising of these products are not included in the current marketing restrictions for tobacco products. Increased mainstream advertising using false claims and celebrity endorsements, and the products available in many flavors that appeal to youth has led to a large increase in product use, especially in young people. Today's youth are using these

devices, often thinking that there is no nicotine in them. This misperception can lead them into a life-long addiction to nicotine.

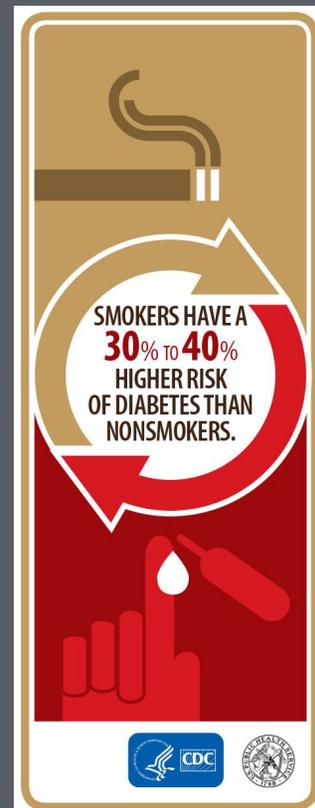
According to the CT School Health Survey Tobacco Use Component, in 2011, high school students had an e-cigarette use rate of 6.9% which almost doubled in 2013 to the rate of 13.4%.

There has been no evidence concluding that using these nicotine delivery devices is helpful in quitting tobacco.

Although the actual number of calls to the CT Poison Control Center is not large, calls about e-cigarette “juice” poisonings have increased steadily over the past three years. No one should drink the “juice”.

In addition to the FDA regulation of e-cigarettes, they are also considering additional regulations on cigars, flavors added to cigars, and e-cigarette advertising.

[For more information about FDA regulations of e-cigarettes and to provide public comment on the proposal.](#)



TOBACCO MARKETING IN INDONESIA



PT Djarum encouraging users not to quit.



The billboard depicts a young man reaching out to catch up with friends on a bus, with the slogan: "Dying is better than leaving a friend. Sampoerna is a cool friend." Sampoerna is a subsidiary of Phillip Morris.



Tobacco Times is a publication of the Connecticut Department of Public Health

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Early this year a new tobacco retailer training program was launched by the Connecticut Tobacco Merchant & Community Education Steering Committee. This program titled **Tobacco Sales: Do the Right Thing** is a free interactive online training and certification course for tobacco retail owners, managers and clerks. The web-based training course is designed to educate individuals about Connecticut State laws and the Federal Family Smoking Prevention and Tobacco Control Act that is regulated by the U.S. Food and Drug Administration.

In May 2014 the Connecticut General Assembly passed Public Act No. 14-76 (effective October 1, 2014) which requires retailers to take this

Tobacco Retailer Training Program

State-approved training and certification course if they have violated certain sections of Connecticut's tobacco enforcement laws. **Tobacco Sales: Do the Right Thing** educates retailers about the prevention of illegal sales of tobacco products to customers under 18, and provides effective techniques for selling tobacco responsibly as well as the negative impact that tobacco use has on society. The program is comprised of four modules and a key component is virtual role play conversations with intelligent avatars where users learn how to manage challenging conversations they face on the job. After each module within the training, the user is asked a few questions to reinforce the main points presented. The training ends with a 10 question quiz, and if the user answers 8 of the 10 questions correctly a "Certificate of Completion" can

be generated. The user is also asked to evaluate their learning experience.

All Connecticut tobacco retailers are encouraged to immediately take this free online training and certification course as a preventative measure to incurring costly violation fines. The training can be accessed at www.CTtobaccotraining.com.

Those that have violated the law have the opportunity to verify that they have taken the training by presenting their certificate of completion to the Department of Revenue Services or other enforcement agencies in consideration of penalty assessments.

Tobacco Sales: Do the Right Thing is sponsored by the Connecticut Department of Mental Health and Addiction Services (DMHAS) through the Tobacco Merchant and Community Education Initiative.

2012	TOBACCO in YOUTH-RATED (G/PG/PG-13) MOVIES		
INCIDENTS PER MOVIE ▲ 54% ABOVE 2011	PG-13 MOVIES WITHOUT TOBACCO 52% ▲ 2% BELOW 2011	MOVIE COMPANY RANKINGS	
		▲ ABOVE 2011	▼ BELOW 2011
		TOBACCO INCIDENTS per MOVIE	SHARE of TOBACCO IMPRESSIONS
		TOBACCO POLICY before 2012?	
		Time Warner	26.5 ▲ 38% ▲
		News Corp.	18.8 ▲ 19% ▲
		Sony	13.8 ▲ 14% ▲
		Independents	12.2 ▲ 6% ▲
		Viacom	11.5 ▼ 5% ▼
		Disney	8.5 ▼ 15% ▼
		Comcast	4.3 ▼ 3% ▼
IN-THEATER TOBACCO IMPRESSIONS DELIVERED BY YOUTH-RATED FILMS 14,800,000,000 ▲ 33% ABOVE 2011. Youth-rated films delivered 56% of all impressions.			

http://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/movies/index.htm

To submit articles, announcements and events contact

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