General Smoking Facts

Cigarette smoking has been identified as the most important source of preventable morbidity (disease and illness) and premature mortality (death) worldwide. Smoking-related diseases claim an estimated 443,000 American lives each year, including those affected indirectly, such as babies born prematurely due to prenatal maternal smoking and victims of "secondhand" exposure to tobacco's carcinogens. Smoking cost the United States over $193 billion in 2004, including $97 billion in lost productivity and $96 billion in direct health care expenditures, or an average of $4,260 per adult smoker.1

Health Hazards of Smoking

- Cigarette smoke contains over 4,800 chemicals, 69 of which are known to cause cancer. Smoking is directly responsible for approximately 90 percent of lung cancer deaths and approximately 80-90 percent of COPD (emphysema and chronic bronchitis) deaths.2
- About 8.6 million people in the U.S. have at least one serious illness caused by smoking. That means that for every person who dies of a smoking-related disease, there are 20 more people who suffer from at least one serious illness associated with smoking.3
- Among current smokers, chronic lung disease accounts for 73 percent of smoking-related conditions. Even among smokers who have quit chronic lung disease accounts for 50 percent of smoking-related conditions.4
- The list of diseases caused by smoking includes chronic obstructive pulmonary disease (COPD, including chronic bronchitis and emphysema), coronary heart disease, stroke, abdominal aortic aneurysm, acute myeloid leukemia, cataract, pneumonia, periodontitis, and bladder, esophageal, laryngeal, lung, oral, throat, cervical, kidney, stomach, and pancreatic cancers. Smoking is also a major factor in a variety of other conditions and disorders, including slowed healing of wounds, infertility, and peptic ulcer disease.5

Smoking During Pregnancy

- Smoking in pregnancy accounts for an estimated 20 to 30 percent of low-birth weight babies, up to 14 percent of preterm deliveries, and some 10 percent of all infant deaths. Even apparently healthy, full-term babies of smokers have been found to be born with narrowed airways and reduced lung function.6
- In 2005, 10.7 percent of all women smoked during pregnancy, down almost 45 percent from 1990.7
- Neonatal health-care costs attributable to maternal smoking in the U.S. have been estimated at $366 million per year, or $704 per maternal smoker.8

Smoking Prevalence

- In 2008, an estimated 45.0 million, or 20.6% of adults (aged 18+) were current smokers. The annual prevalence of smoking declined more than 50 percent between 1965 and 2008.9
- Males tend to have significantly higher rates of smoking prevalence than females. In 2008, 23.1 percent of males currently smoked compared to 18.3 percent of females.10
- Prevalence of current smoking in 2008 was highest among American Indians/Alaska Natives (32.4%), intermediate among non-Hispanic whites (22.0%) and non-Hispanic blacks (21.3%), and lowest among Hispanics (15.8%) and Asians (9.9%).11
In 2007, 20 percent of high school students were current smokers. Over 6 percent of middle school students were current smokers in 2006.

**Tobacco Advertising**

As smoking declines among the non-Hispanic white population, tobacco companies have targeted both non-Hispanic blacks and Hispanics with intensive merchandising, which includes advertising in media targeted to those communities and sponsorship of civic groups and athletic, cultural, and entertainment events. In 2006, cigarette advertising and promotion by the five major tobacco companies totaled $12.5 billion.

Tobacco advertising also plays an important role in encouraging young people to begin a lifelong addiction to smoking before they are old enough to fully understand its long-term health risk. Ninety percent of adults who smoke started by the age of 21, and half of them became regular smokers by their 18th birthday.

**Secondhand Smoke**

Secondhand smoke involuntarily inhaled by nonsmokers from other people's cigarettes is classified by the U.S. Environmental Protection Agency as a known human (Group A) carcinogen, responsible for approximately 3,400 lung cancer deaths and 46,000 (ranging 22,700-69,600) heart disease deaths in adult nonsmokers annually in the United States.

Smoking by parents is associated with a wide range of adverse effects in their children, including exacerbation of asthma, increased frequency of colds and ear infections, and sudden infant death syndrome. Secondhand smoke causes more than an estimated 202,000 asthma episodes, 790,000 physician visits for buildup of fluid in the middle ear (otitis media, or middle ear infection), and 430 sudden infant death syndrome (SIDS) cases each year.

Workplaces nationwide are going smoke-free to provide clean indoor air and protect employees from the life-threatening effects of secondhand smoke. Nearly 70 percent of the U.S. workforce worked under a smoke-free policy in 1999, but the percentage of workers protected varies by state, ranging from a high of 83.9 percent in Utah and 81.2 percent in Maryland to 48.7 percent in Nevada.

Employers have a legal right to restrict smoking in the workplace, or implement a totally smoke-free workplace policy. Exceptions may arise in the case of collective bargaining agreements with unions.

**Quitting Smoking**

In 2008, an estimated 51.1 million adults were former smokers. Of the 45.0 million current adult smokers, 57.9 percent stopped smoking at least 1 day in the preceding year because they were trying to quit smoking completely.

Nicotine is an addictive drug, which when inhaled in cigarette smoke reaches the brain faster than drugs that enter the body intravenously. Smokers not only become physically addicted to nicotine; they also link smoking with many social activities, making smoking a difficult habit to break.

Quitting smoking often requires multiple attempts. Using counseling or medication alone increases the chance of a quit attempt being successful; the combination of both is even more effective.

Nicotine replacement products can help relieve withdrawal symptoms people experience when they quit smoking.

There are seven medications approved by the FDA to aid in quitting smoking. Nicotine patches, nicotine gum and nicotine lozenges are available over-the-counter, and a nicotine nasal spray and inhaler are currently available by prescription. Buproprion SR (Zyban) and varenicline tartrate (Chantix) are non-nicotine pills.

Individual, group and telephone counseling are effective. Telephone quitline counseling is widely available and is effective for many different groups of smokers.
• Nicotine replacement therapies are helpful in quitting when combined with a support program such as the American Lung Association's Freedom From Smoking (FFS), which addresses psychological and behavioral addictions to smoking and strategies for coping with urges to smoke.

The American Lung Association has more information available on quitting smoking and our programs to help you do so, our advocacy efforts to reduce tobacco use and exposure to secondhand smoke, and tobacco use trends on our website at www.lungusa.org, or through the Lung HelpLine at 1-800-LUNG-USA (1-800-586-4872).

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