

Health Effects of Secondhand Smoke Exposure

The 1986 U.S. Surgeon General's report on involuntary smoking was the first to conclude that secondhand smoke is a cause of disease in healthy nonsmokers. The 2006 Surgeon General's report confirmed what hundreds of studies and dozens of distinguished scientific and medical organizations have concluded for twenty years – that secondhand smoke is a serious health hazard, responsible for lung cancer, heart disease and respiratory illness in nonsmokers. There is no longer any debate. The scientific evidence on the health risks associated with secondhand smoke is massive and conclusive and the only way to protect people is to eliminate their exposure.

Secondhand Smoke Causes Cancer in Nonsmokers

- Secondhand smoke is a complex mixture of over 4,000 chemical compounds, including 69 carcinogens.ⁱ
- The Environmental Protection Agency has classified secondhand smoke as a Group A carcinogen, a substance which is known to cause cancer in humans.ⁱⁱ
- It is conservatively estimated that at least 3,000 nonsmokers die each year from lung cancer caused by secondhand smoke.ⁱⁱⁱ
- Secondhand smoke increases the risk of lung cancer in nonsmokers by 20 to 30 percent.^{iv}

Secondhand Smoke Causes Heart Disease in Nonsmokers

- It is estimated that between 35,000 and 62,000 nonsmokers die each year from heart disease caused by secondhand smoke.^v
- A recent study found that secondhand smoke exposure increases the risk of heart disease among nonsmokers by as much as 60%.^{vi}
- Accumulating evidence suggests that even short-term exposure to secondhand smoke can trigger a heart attack. As a result, the U.S. Centers for Disease Control now recommends that physicians advise their patients who either have or are at risk for heart disease to avoid indoor places where they can be exposed to secondhand smoke.^{vii}
- New research shows a smoke-free workplace law can reduce the number of heart attacks in a community by 40%.^{viii}

Secondhand Smoke Causes Disease in Children

- Infants and children exposed to secondhand smoke are more likely to develop pneumonia, bronchitis, asthma, and middle ear disease.^{ix}
- As many as 300,000 cases of lower respiratory tract infections in children up to 18 months old and up to 2,700 deaths from sudden infant death syndrome each year are attributable to secondhand smoke exposure.^x
- In addition to inducing new cases of asthma, secondhand smoke also increases the number and severity of asthma attacks in children.^{xi}

Workers Are At Significant Health Risk

- Food service workers have a 50 percent greater risk than the general public of dying from lung cancer, due in part to their continuous exposure to secondhand smoke at work.^{xii}
- People who work in restaurants are exposed to one and a half to two times as much secondhand smoke as people who work in office settings where smoking is allowed. People who work in bars are exposed to four to six times as much secondhand smoke.^{xiii}
- Although over three-fourths of white-collar workers are covered by smoke-free policies, just 52 percent of blue-collar workers and less than half of food service workers benefit from these protections.^{xiv}

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- ⁱ International Agency for Research on Cancer. *IARC Monographs on the Evaluation of Carcinogenic Risks to Humans: Tobacco Smoking and Involuntary Smoking*. 2004.
- ⁱⁱ U.S. Environmental Protection Agency. *Respiratory Health Effects of Passive Smoking: Lung Cancer and Other Disorders*. 1992.
- ⁱⁱⁱ U.S. Environmental Protection Agency. 1992.
- ^{iv} International Agency for Research on Cancer. "Summary of Data Reported and Evaluation." *Tobacco Smoke and Involuntary Smoking*. World Health Organization. 2002.
- ^v National Cancer Institute. *Health Effects of Exposure to Environmental Tobacco Smoke: The Report of the California Environmental Protection Agency. Smoking and Tobacco Control Monograph No. 10*. U.S. Department of Health and Human Services, National Institutes of Health, National Cancer Institute. 1999.
- ^{vi} Whincup PH, et al. "Passive Smoking and Risk of Coronary Heart Disease and Stroke: Prospective Study With Cotinine Measurement." *British Medical Journal*. June 2004.
- ^{vii} Pechacek T, Babb S. "Commentary: How acute and reversible are the cardiovascular risks of secondhand smoke?" *British Medical Journal*. April 2004.
- ^{viii} Sargent RP, Shepard RM, Glantz SA. "Reduced incidence of admissions for myocardial infarction associated with public smoking ban: before and after study." *British Medical Journal*. April 2004; Bartecchi C, et al. *A Reduction in the Incidence of Acute Myocardial Infarction Associated with a Citywide Smoking Ordinance*. Paper presented at the 2005 American Heart Association Scientific Session.
- ^{ix} U.S. Environmental Protection Agency. 1992.
- ^x National Cancer Institute. 1999.
- ^{xi} U.S. Environmental Protection Agency. 1992.
- ^{xii} Siegel, M. Involuntary Smoking in the Restaurant Workplace: A Review of Employees Exposure and Health Effects. *JAMA*. 1993.
- ^{xiii} Siegel, M. 1993.
- ^{xiv} Shopland D, et al. "Disparities in Smoke-Free Workplace Policies Among Food Service Workers." *Journal of Occupational and Environmental Medicine*. April 2004.