



FACTS

What Are You Smoking?

Smoking and Cardiovascular Disease (CVD)

OVERVIEW

Smoking is a major cause of CVD, the nation's No. 1 killer. When the chemical cocktail from smoking tobacco or breathing in secondhand smoke hits the bloodstream, it damages arteries throughout the body, the heart, and the brain. Clots in arteries are more likely to form as a result of smoking, causing a heart attack or stroke. Smoking also lowers the level of HDL or 'good' cholesterol, raises heart rate, and replaces oxygen in the blood with carbon monoxide. In short, smoking wreaks havoc on the cardiovascular system.

In spite of the overwhelming body of evidence that tobacco smoke kills, these products are among the most unregulated, exempt from basic consumer protections. Manufacturers are able to make deceptive claims and to market to children. As the *New York Times* stated in a recent editorial, "it is time to rein in this rogue industry".¹ Congress has the opportunity to do exactly that by passing the Family Smoking Prevention and Tobacco Control Act.

THE TRUTH ABOUT KILLER TOBACCO

The numbers do not lie. Light up a cigarette and your chances of developing and dying from CVD rise dramatically.

- About 35% of all smoking-related deaths in the U.S. are from CVD.² That's approximately 150,000 people annually – nearly 4 times the seating capacity of the new Washington Nationals baseball stadium.
- Smokers are 2-4 times more likely to develop coronary heart disease (CHD) than nonsmokers and 2-3 times more likely to die from it.²

- Women are at high risk. CVD is the No. 1 killer of women,² and women who smoke have a higher risk of coronary heart disease than non-smoking women.³ In fact, one study found that female smokers suffer a heart attack an average of 14.4 years earlier than female nonsmokers, whereas male smokers suffer a heart attack an average of 8.3 years earlier.⁴
- Not just smokers are at risk. An estimated 46,000 nonsmokers die each year from CHD due to exposure to secondhand smoke.²
- In 2007 19.8% of adults were current smokers. Over the past 10 years, there has been a trend toward decreased smoking rates in nearly all states. However, the current decrease in the rate of smoking is likely to be too slow to reach the Healthy People target of 12% by 2010.⁵

MERCHANTS OF DEATH & DECEPTION

The tobacco industry continues to aggressively and deceptively market its deadly products, especially to women and children. They make unfounded and misleading health claims about "light" and "reduced risk" products, although there is unequivocally no safe cigarette. In a new low, they introduced candy-flavored cigarettes to attract new, young smokers to replace those who died or quit. Of course, the tobacco industry does not want smokers to quit once they are addicted. A recent Harvard School of Public Health study found that the industry had surreptitiously boosted nicotine levels in cigarettes over the years to keep smokers hooked.⁶

- Each day, more than 3,500 children age <18 try a cigarette for the first time, and about 1,100 become new, regular daily smokers.⁷ (NSDUH 2007). As a result, millions of them will eventually die prematurely. In fact, about 80% of all smokers began as teens.⁸

- A recent study suggests that kids can initiate a lifelong dependence on nicotine by inhaling from only one cigarette. The study found that 10% of sixth-graders showed signs of tobacco dependence within two days of first inhaling from a cigarette and 50% by the time they were smoking only 7 cigarettes per month.⁹
- Cigarette advertising and promotional expenditures have more than doubled since the mid 1990s and were at \$13.1 billion in 2005.¹⁰ Much of this increase has been used to reach children and teens in places such as convenience stores and magazines. A recent study found that point-of-sale advertising influenced children to start smoking and cigarette promotions influenced young people who had already tried cigarettes to smoke more heavily.¹¹ These findings suggest that specific restrictions on cigarette marketing may reduce youth smoking.
- There is no evidence that smokers who choose low tar and nicotine cigarettes have a reduced risk of a heart attack.^{12,13}

THE FDA MUST REGULATE TOBACCO

It is astonishing: tobacco products are exempt from basic health and safety regulations that apply to other consumer products, despite the disease, death, and misery they cause. The Food & Drug Administration (FDA) regulates cereal and toothpaste, but not a pack of cigarettes. Ironically, medicines to help people stop smoking are regulated, but not the cause of the addiction. Nor does the FDA have the authority to restrict tobacco advertising or promotions, even to children, or take other common-sense measures, such as prohibiting misleading "light" and "mild" labels and requiring larger, more informative health warnings.

AHA ADVOCATES

The AHA advocates for passage of the Family Smoking Prevention and Tobacco Control Act. This legislation would grant the FDA the authority and resources to regulate both current and new tobacco products and restrict tobacco product marketing. The FDA would be able to stop harmful tobacco company practices that appeal to children, mislead consumers, and devastate the nation's health.

This legislation would help to reduce the number of people who start to use tobacco while increasing the number of people who quit, saving

countless lives and \$44.4 billion in future healthcare costs.¹⁴ The bill gives the FDA the authority to:

- Restrict tobacco advertising and promotions, especially to children.
- Stop illegal sales of tobacco products to children.
- Ban candy-flavored cigarettes, which clearly are starter products for young new smokers.
- Require changes in tobacco products such as the removal of harmful ingredients or the reduction of nicotine levels.
- Prohibit health claims about so-called "reduced risk" products that are not scientifically proven or that would discourage current tobacco users from quitting or encourage new users to start.
- Require disclosure of the contents of tobacco products and tobacco industry research about the health effects of their products.
- Require larger and more informative health warnings on tobacco products.
- Prohibit terms such as "light", "mild", and "low-tar" that have misled consumers into believing that certain cigarettes are safer than others.

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