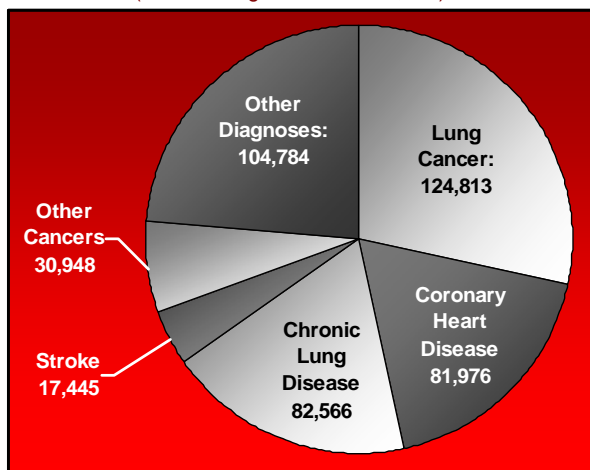


FACT SHEET

Multiple Health Risks from Tobacco Use

- Smoking is still the leading cause of preventable death in this country, causing an estimated 440,000 deaths annually¹.
- Smoking is harmful to nearly every organ in the body, causing disease and worsening existing illnesses¹.
- The list of smoking-attributed diseases as determined by the Surgeon General has gotten longer than just lung cancer, heart diseases and chronic lung disease. It now includes leukemia, cancers of the cervix, pancreas, kidneys and stomach, as well as aortic aneurysms, cataracts, pneumonia and gum disease¹.

Average Annual Number of U.S. Deaths Attributable to Cigarette Smoking, 1995–1999
(Total average number: 442,532).



Behavioral Risk Factor Surveillance System.

- 8.6 million people have at least one serious illness or disease caused by smoking⁵.
- Smoking impacts women's reproductive health; maternal smoking is detrimental to fetal and infant health¹.

Spit Tobacco: Not a Safe Alternative

Spit tobacco use is not a safe alternative to smoking; it contains 3-4 times the amount of nicotine as cigarettes. Nicotine is highly addictive and continued use of spit tobacco is related to numerous health concerns².

- Surgeon General research links spit tobacco usage to oral cancer and other health effects such as oral disease, kidney cancer, heart disease, diabetes, and reproductive problems².

Substantial Treatment Costs & Loss of Productivity

- Each year, millions of years of potential life are lost due to tobacco use⁴.
- Health care costs from smoking-attributable diseases are \$75.5 billion annually¹.
- Medicaid costs from smoking-attributable diseases are rising rapidly, recently estimated at \$23.5 billion⁷.
- Smoking-attributable Medicare costs have been estimated at \$14.2 billion⁸.

Wyoming At Risk ...

- Wyoming has a higher death rate from smoking-attributable diseases than the national average (319 deaths per 100,000 people compared to 296 deaths per 100,000 people nationwide)⁹.
- Death rates in Wyoming from chronic lung disease are nearly double the national average (114 per 100,000 in Wyoming compared to 60 per 100,000 nationwide)⁹.
- During 2004, there were 739 smoking-attributable deaths, which is an increase from 2001 (676)¹⁴.

... And Burdened by Tobacco Use

Smokers tend to take more days off than nonsmokers and incur more medical costs. Smoking and tobacco use affect every citizen because of shared medical cost burdens and lost productivity in the workforce.

- Because smokers die an average of 13 years earlier than nonsmokers, an average of 13 years of life are lost for each death in Wyoming due to smoking¹².
- Smoking-attributable lost productivity costs for Wyoming topped \$136 million for 1999⁹.

Continued on other side

excerpt from
Wyoming Tobacco Trends 2004
WYSAC Technical Report No. CHES-504
Produced for Wyoming Dept. of Health



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Wyoming's treatment costs for smoking-attributable illnesses incurred are rising.

- Smoking-attributable medical expenditures totaled at \$79.64 million in 1993⁶. By 1998, they had risen to \$106 million¹⁵.

Smoking-Attributable Medical Expenditures in Wyoming by Type of Expenditure, Calendar Year 1993 (in millions of dollars)

	Ambulatory care	Prescription drugs	Hospital services	Home health care	Nursing homes	Other	Total
1993	\$17.76	\$10.65	\$38.71	\$1.84	\$10.68	N/A	\$79.64
1998	\$33	\$10	\$29	N/A	\$26	\$8	\$106

BRFSS; Miller, Leonard S.; Zhang, Xiulan; Rice, Dorothy P.; and Max, Wendy. (1998). *State Estimates of Total Medical Expenditures Attributable to Cigarette Smoking, 1993*. Public Health Reports, 113, 447-458; Centers for Disease Control and Prevention (CDC). (27 January 2005c). *Smoking-Attributable Expenditures (SAEs), 1998*. *Smoking-Attributable Mortality, Morbidity, and Economic Costs (SAMMEC): Adult SAMMEC and Maternal and Child Health (MCH) SAMMEC software, 2004*.

- 41.4% of Wyoming smokers receive Medicaid coverage; Wyoming Medicaid costs from smoking-attributable diseases have risen 60.5% in five years, topping \$29 million in 1998⁷.

Benefits of Quitting Tobacco

- Cessation of tobacco use has marked benefits in lowering risk for disease and death, but the addictive nature of nicotine creates a public health challenge.
- If there was a 25% smoking reduction in this country, then approximately 25% of Medicaid costs from smoking-attributable diseases—and possibly all medical costs from smoking-attributable diseases—could be reduced, making for a total Medicaid savings of \$3.07 billion in the long term⁷.
- For the State of Wyoming, a 25% reduction of smoking could bring a savings of \$3.2 million in health care costs from smoking-attributable diseases⁷.

Health Benefits Over Time When Smokers Quit.

20 minutes	Blood pressure drops to a level close to that before the last cigarette. The temperature of hands and feet increases to normal.
8 hours	The carbon monoxide level in bloodstream drops to normal.
24 hours	The chance of a heart attack decreases.
2 weeks to 3 months	Circulation improves and lung function increases up to 30%.
1 to 9 months	Coughing, sinus congestion, fatigue, and shortness of breath decrease; cilia regain normal function in the lungs, increasing the ability to handle mucus, clean the lungs, and reduce infection.
1 year	The excess risk of coronary heart disease is half that of a smoker's.
5 years	The stroke risk is reduced to that of a nonsmoker 5-15 years after quitting.
10 years	The lung cancer death rate is about half that of a continuing smoker's. The risk of cancer of the mouth, throat, esophagus, bladder, kidney, and pancreas decrease.
15 years	The risk of coronary heart disease is that of a nonsmoker's.

American Cancer Society. (April 2004). *What Are The Risk Factors for Oral Cavity and Oropharyngeal Cancer?* Retrieved from <http://www.cancer.org>.

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¹ U.S. Dept. of Health and Human Services (HHS). (2004a). *The 2004 Surgeon General's Report: The health consequences of smoking, what it means to you*. Centers for Disease Control. ² HHS. (1986). *The Health Consequences of Using Smokeless Tobacco: A Report of the Advisory Committee to the Surgeon General*. Bethesda, MD: Public Health Service. NIH Pub. No. 86-2874. ³ HHS. (2000). *Treating Tobacco Use and Dependence: A Clinical Practice Guideline*. Agency for Healthcare Research and Quality. Rockville, MD. ⁴ Centers for Disease Control and Prevention (CDC). (27 August 1993). *Cigarette Smoking-Attributable Mortality and Years of Potential Life Lost -- United States, 1990*. MMWR 42(33), 645-649. ⁵ CDC. (February 2004b). *The Burden of Chronic Diseases and Their Risk Factors: National and State Perspectives 2004*. ⁶ Miller, Leonard S.; Zhang, Xiulan; Rice, Dorothy P.; and Max, Wendy. (1998). *State Estimates of Total Medical Expenditures Attributable to Cigarette Smoking, 1993*. *Public Health Reports*, 113, 447-458. ⁷ Lindblom, Eric. (15 April 2004). *Increasing state smoking-caused Medicaid costs and future Medicaid savings from a 25% reduction to state smoking rates*. Campaign for Tobacco-Free Kids. ⁸ Zhang, Xiulan; Miller, Leonard; Max, Wendy and Rice, Dorothy P. (1999). *Cost of Smoking to the Medicare Program, 1993*. *Health Care Financing Review*, 20(4), 1-19. ⁹ CDC. (2002a). *Tobacco Control State Highlights 2002: Impact and Opportunity*. Atlanta, GA: Department of Health and Human Services, National Centers for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health. ¹⁰ Youth Risk Behavior Surveillance System. ¹¹ Behavioral Risk Factor Surveillance System. ¹² CDC. (26 January 2005). *Adult Tobacco Use in Wyoming*. Office on Smoking and Health, National Centers for Chronic Disease Prevention and Health Promotion. ¹³ U.S. Public Health Service (USPHS). (June 2000). *Treating Tobacco Use and Dependence*. Fact Sheet. ¹⁴ CDC. (1 February 2005b). *Sustaining State Programs for Tobacco Control: Data Highlights 2004*. ¹⁵ Centers for Disease Control and Prevention (CDC). (27 January 2005c). *Smoking-Attributable Expenditures (SAEs), 1998*. *Smoking-Attributable Mortality, Morbidity, and Economic Costs (SAMMEC): Adult SAMMEC and Maternal and Child Health (MCH) SAMMEC software, 2004*.