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PROFESSION

Smoking bans cut overall heart disease risk

An IOM report highlights how reducing secondhand smoke can lower threats to cardiovascular health.

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Smoking bans reduce the risk of heart attacks and heart disease associated with even limited exposure to secondhand smoke, says a report from the Institute of Medicine.

The report focused on an analysis of data from 11 different epidemiological studies, which examined changes in heart-attack rates after smoking bans were implemented in U.S. communities, as well as in Canada, Italy and Scotland. Two studies specifically assessed the association between secondhand smoke exposure and heart attacks.

The Centers for Disease Control and Prevention, which sponsored the report, aimed to address debate in the scientific community about the link between the enactment of smoking bans and the decrease in heart attack rates, said Matthew McKenna, MD, MPH, director of the CDC Office on Smoking and Health.

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Stephen E. Fienberg, PhD, a member of the IOM committee that conducted the study and a professor of statistics and social science at Carnegie Mellon University in Pittsburgh, said he was among the skeptics who believed that short-term exposure to secondhand smoke could create an excess of heart attacks. But the data in the report changed his mind.

The IOM report found that in both case-control and cohort studies, even limited exposure to secondhand smoke increased the risk of heart disease by 25% to 30%. Each of the 11 analyzed studies indicated a decrease in the rate of heart attacks after smoking bans were implemented. Decreases ranged from 6% to 47%, depending on the study and the form of analysis.

Even limited exposure

The key messages for cardiologists and primary care doctors are



In 1964, U.S. Surgeon General Luther Terry, MD, called for corrective action in light of a report on the relationship of smoking and health. The first U.S. public smoking ban was proposed in 1971.

[Photo by AP / Wide World Photos]

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informing their patients about the new findings and advocating public smoking bans, Dr. McKenna said. "When counseling patients about medicine, not smoking and getting their blood pressure under control ... [doctors] need to tell them there is a risk going into a room with tobacco smoke in it. They're putting their lives at risk."

Elizabeth Ross, MD, a Washington, D.C.-based cardiologist and American Heart Assn. spokeswoman, said she hopes the report will create more public policy and legislation expanding smoking bans in public places.

Mary Anne McCaffree, MD, a member of the American Medical Association Board of Trustees, called the report "a wake-up call to smokers."

"We hope the information in this report will encourage smokers to quit -- if not for themselves, then for their families," Dr. McCaffree said.

The AMA has tools and resources to help physicians address the health implications of secondhand smoke with their patients, as well as with the parents of their pediatric patients.

There are individual studies and reviews under way that examine the relationship between various levels of tobacco smoke and heart disease, Dr. McKenna said.

"The take-home message is there's no amount of exposure to cigarette smoke that's safe," Dr. Ross said.

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ADDITIONAL INFORMATION:

Smoking policies

Restrictions on smoking and secondhand smoke have been gaining popularity in the U.S. since 1971, with federal and state governments and their agencies cracking down on lighting up. As of Jan. 4, 37 states had laws requiring 100% smoke-free workplaces, restaurants and/or bars.

1964: U.S. surgeon general issues first report on adverse health effects of smoking.

1965: Congress enacts a law requiring health warnings on cigarette package labels.

1971: Surgeon general proposes a federal smoking ban in public places.

1972: Surgeon general report identifies secondhand smoke as posing a health risk.

1973: Arizona becomes the first state to restrict smoking in several public places.

1973: Civil Aeronautics Board requires no-smoking sections on all commercial airline flights.

1974: Connecticut passes the first state law on smoking restrictions in restaurants.

1986: Surgeon general report says secondhand smoke causes lung cancer in healthy nonsmokers.

1987: Dept. of Health and Human Services establishes smoke-free environments in its buildings.

1987: Gallup Poll finds, for the first time, that most American adults favor a ban on smoking in all public places.

1988: Smoking ban takes effect on domestic airline flights of two hours or less.

1992: Joint Commission requires hospitals applying for accreditation to develop policy prohibiting smoking by patients, visitors, employees, volunteers and medical staff.

1994: Occupational Safety and Health Administration proposes a smoking ban in most workplaces.

1994: San Francisco passes a ban on smoking in restaurants and workplaces.

2000: New Jersey Supreme Court strikes down a clean-indoor-air ordinance adopted by city of Princeton on grounds that state law preempts local smoking restrictions.

2003: Dozens of airports, including airline clubs, passenger terminals and nonpublic work areas, are designated smoke-free.

2004: International Agency for Research on Cancer issues a new monograph identifying secondhand smoke as "carcinogenic to humans."

Source: "Secondhand Smoke Exposure and Cardiovascular Effects: Making Sense of the Evidence," Institute of Medicine, October (books.nap.edu/openbook.php?record_id=12649)

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