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British Columbia

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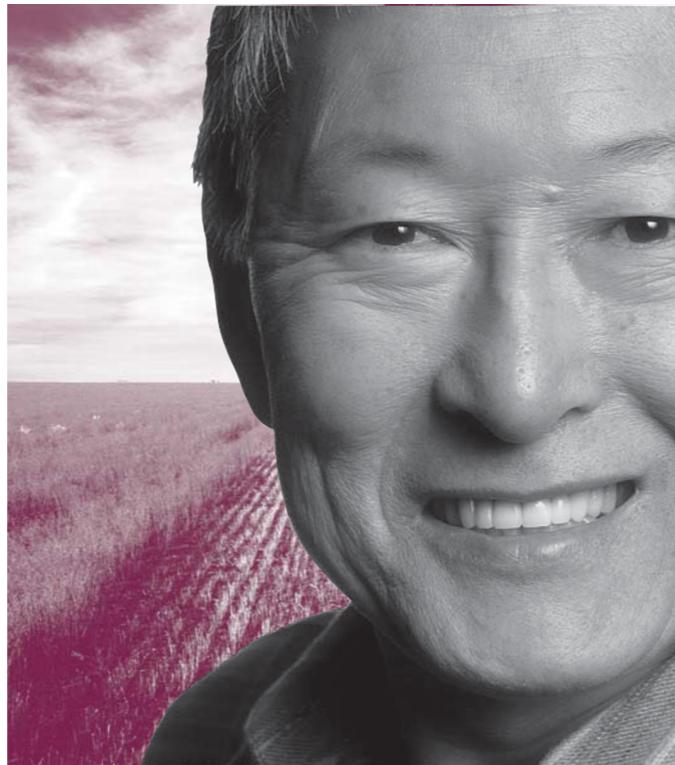
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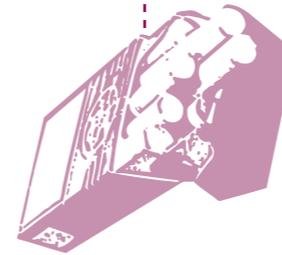
What you need to know.



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THE FACTS

- Tobacco use is the number one cause of preventable death in the world.
- It's estimated that more than 45,000 Canadians die each year from tobacco-related diseases, such as Chronic Obstructive Pulmonary Disease (COPD), heart disease, and cancer of the lung, mouth, throat, stomach, or bladder. Of this number, more than a thousand are non-smokers.
- The World Health Organization predicts that, unless people change their attitudes and behavior relating to tobacco use, tobacco-related disease will be the primary cause of death in the world in the 21st century.
- The tobacco industry continues to aggressively promote tobacco use as a matter of personal choice, spending about \$40 million a day on advertising and marketing.



WHAT HAPPENS WHEN YOU SMOKE

Several potentially harmful things happen inside the body when a person smokes. Oxygen is replaced by carbon monoxide in the blood. Heart rate increases. Blood pressure shoots up. Air and blood flow into the lungs is upset. Tar, the particulate matter found in smoke, accumulates and clogs the airways. (Clogged airways keep the cilia, the hair-like

structures in the airways, from sweeping the airways clean.) Eventually, tar deposits may permanently damage the lungs and cause serious diseases or even death.

WHY PEOPLE SMOKE

Various factors prompt people to smoke. At home, children may see their role models—parents and older siblings—smoking. At work, and on the street, one sees smokers. The mass media casually show celebrities and other influential people smoking. In addition, in their advertising campaigns tobacco manufacturers market a lifestyle where smoking appears hip and fashionable. The tobacco industry spends millions of dollars per day on marketing and promotion.

Most smokers report starting smoking quite early in life—about 90% of them when they were teenagers, citing “friends smoking” as their primary reason. While a few said they tried smoking out of youthful curiosity, others said they smoked as a way to rebel and to cope with stress caused by low self-esteem and/or a lack of self-identity. Still, some also started smoking as a form of weight control.

Statistics show that about 18% of Canadians smoke, with such factors as education, income, place of residence (urban versus rural) having a direct bearing on a person's propensity to smoke. For instance, the study found that people with post-secondary education are less likely to smoke. Income-wise, low wage earners are more likely to smoke despite the expense associated with smoking. In urban centers of BC, the smoking rate is lower, with the rate increasing as one travels north and east. Also, compared with children from non-smoking families, children who have family members who smoke are much more likely to become addicted.

NICOTINE ADDICTION

The fact is no one plans on getting addicted to tobacco. Most who start smoking never really give addiction any serious thought. But because nicotine is highly addictive, most get hooked even before they know it. Nicotine is actually a distinct form of alkaloid poison found only in tobacco. When inhaled, it goes directly into the lungs and bloodstream, reaching the brain within seven seconds.

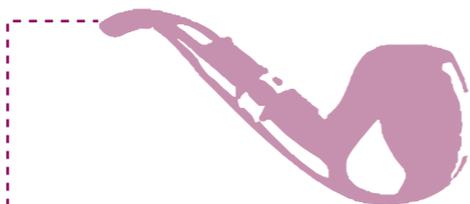
Nicotine is quite unique in that it acts both as a stimulant and sedative. Initially, it heightens the smoker's senses, making him/her feel more alert. In a short while, however, it does quite the opposite, calming the smoker down. In fact, it's a cigarette's ability to satisfy both the yearning to be awake and relaxed that has made many dependent on and addicted to it as they try to cope with life's struggles.

FORMS OF TOBACCO USE

Tobacco use can take various forms; by far, **CIGARETTE SMOKING** is the most common. Cigarettes are essentially shredded tobacco leaves and additives rolled in chemically treated paper. The average smoker lights up about 15 sticks a day and inhales about 150 times. The smoke he/she inhales contains over 4,000 chemicals, including about 50 that are known to cause cancer.

Approximately two-thirds of Canadian smokers use light or mild cigarettes. However, "lights" do not put smokers at lesser risk. Studies show that with the switch to light or mild cigarettes also comes a change in the manner smokers enjoy their smoke. Smokers who switch to "lights" tend to inhale more deeply or more often in order

to compensate for the lower tar/nicotine levels. Additionally, it has been found that smokers who smoke "lights" develop a false sense of security, making them less likely to try to butt out.



CIGAR AND PIPE SMOKING

is another form of tobacco use. Cigars are shredded tobacco leaves rolled in sheets of reconstituted tobacco. Because death rates for cigar and pipe smokers are lower than for cigarette smokers, some mistakenly believe that the pipe is less hazardous than the stick. The truth, however, is that cigar and pipe smoke contains the same harmful ingredients found in cigarette smoke—that is, tar and nicotine—but in much higher amounts. One study showed that the amount of pollution caused by one cigar was more than that caused by 42 cigarettes in half an hour. The small cigars called *cigarillos* are especially dangerous because people tend to use them like they were cigarettes, inhaling rather than just blowing the smoke. Switching from cigarettes to cigars inevitably leads to inhaling.

TOBACCO SPITTING—the practice of keeping tobacco inside the mouth for hours at a time and spitting out the juice—is another way in which tobacco is used. There are four types of spit tobacco: *Chew* or *quid* is a wad of tobacco leaf that one keeps between the cheek and gums; *plug* is chew that's been pressed into brick form; *snuff* is finely ground tobacco placed between the inside of the lower lip and gums (sold in tin cans, snuff can also be snorted); and *snus* is moist tobacco powder found in individual

pouches and placed between the upper lip and gum. Steam-cured, snus must be refrigerated and there is no need to spit.

Spit tobacco is equally hazardous. It causes nicotine addiction. Health-wise, it severely stains the teeth, damages the delicate lining of the mouth and throat, and causes cancer of the face and neck, which, if not fatal, can be disfiguring.

WHY TOBACCO IS HAZARDOUS

Tobacco contains some of the most harmful chemicals. These include *benzene*, a carcinogen used in pesticides, detergent and gasoline; *formaldehyde*, another carcinogen used in embalming; *acetone*, the active ingredient in nail polish remover; *cadmium* and *lead*, which are found in batteries; *ammonia*, a common household cleaner; *turpentine*, which is commonly used as paint thinner; *butane*, a highly flammable lighter fluid; *methoprene*, which is used to rid pets of fleas; and *propylene glycol*.

Tobacco smoke by and in itself is hazardous, containing tar, a particulate matter that bears at least 50 cancer-causing agents. The dangers of tar to the smoker increase with time and frequency of exposure. In general, smokers are 20 times more likely to develop lung cancer than non-smokers. Presently, lung cancer is the leading cause of cancer deaths in both men and women, with 87% of lung cancer cases being due to tobacco.

As well, tobacco smoking increases the risk of heart disease. By reducing the oxygen supply to



the body—and increasing carbon monoxide levels—smoking increases the heart's workload. Smokers are three times more likely to have a heart disease than non-smokers. About 35% of smokers will die of a heart disease.

Tobacco smoking also causes COPD, the fastest growing tobacco-related disease. Smoking damages the air sacs in the lungs that facilitate the exchange of oxygen for carbon dioxide. People with COPD experience breathing difficulties and often require supplemental oxygen to perform their daily activities. About 15-20% of smokers will develop COPD.

WHY CHOOSE TO BE TOBACCO-FREE

Hard as it may be to kick the addiction, recovery begins within hours of the last tobacco use. Within days, food will taste and smell better for quitters. Their risk of developing heart diseases and lung diseases like cancer and COPD will drop significantly. Eventually, the risk level for developing tobacco-related diseases returns to almost the same level as for non-smokers. Money-wise, butting out may also mean significant savings for previous smokers.

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