

The risk of lung cancer increases in relation to the number of cigars smoked.

Tobacco **FACT** Sheet

www.tobaccoprevention.org

Cigars and your health

How do cigars differ from cigarettes?

Cigars are defined by the US Department of the Treasury as “any roll of tobacco wrapped in leaf tobacco or in any substance containing tobacco”. Cigarettes are defined as a “roll of tobacco wrapped in paper or a substance not containing tobacco”. Unlike most manufactured cigarettes, cigars do not normally include a filter.

Risk to cigar smoker’s health

The difference in risk to cigar smoker’s health, as compared with a cigarette smoker’s health, is largely due to the differences in smoking patterns of the two groups. In the classic studies of smoking, the overall risk of premature death was raised some 70% in cigarette smokers compared with non-smokers. In comparison, the risk for pipe and cigar smokers was only up to 10% higher than non-smokers. However, in such studies, pipe and cigar smokers were usually defined as those who had never smoked cigarettes: these primary smokers tend not to inhale and so are exposed to relatively low amounts of tar and other harmful constituents of the tobacco smoke compared with cigarette smokers. Nowadays, with most pipe and cigar smokers being ex smokers of cigarettes, they may also have transferred their inhalation techniques, despite the irritancy of the smoke: in this case, they will be at significantly greater risk of disease than pipe or cigar smokers who have never smoked cigarettes.

A recent study concluded that pipe and cigar smoking, whether primary or secondary, carried a major risk of smoking-related ill health. Compared with people who had never smoked, pipe/cigar smokers indicated significantly higher risk of major coronary heart disease (CHD), stroke, cardiovascular, non-cardiovascular and total mortality. The study also revealed a significant higher incidence of smoking-related cancers.

Nicotine dependency

The smoke of cigars is more alkaline than cigarette smoke and dissolves more easily in saliva. Therefore the desired dose of nicotine is achieved without the need to inhale the smoke into the lungs. Cigars are capable of providing high levels of nicotine at a rate fast enough to produce clear dependence, even if the smoke is not inhaled.

Toxicology of cigars

A class of highly carcinogenic compounds known as tobacco-specific, N-nitrosamines (TSNA) is present in cigar smoke at significantly higher levels than in cigarette smoke. Examination on a “per gram of tobacco smoked” basis reveals that tar, carbon monoxide and ammonia are produced at greater quantities by cigars than cigarettes. When equal doses are applied, the tar produced by cigars exerts a greater tumorigenic activity in mice compared with the tar from cigarettes, because cigar tar contains higher concentrations of carcinogenic polycyclic aromatic hydrocarbons.

Lung cancer

A major US study of more than 17,000 men found that cigar smokers face more than twice the risk of lung cancer when compared to non-smokers, while a European study found that they face nine times the risk. The same European study also found that pipe smokers have just under eight times the risk of lung cancer when compared to non-smokers. Mortality rates for lung cancer in those who have always smoked only cigars and pipes are significantly higher than in non-smokers but are lower than for cigarette only smokers. The risk of lung cancer increases in relation to the number of cigars or pipes of tobacco smoked each day and the degree of inhalation.

Cigar smokers who do not inhale have an increased risk of oral cancers.

Tobacco **FACT** Sheet

www.tobaccoprevention.org

Cigars and your health

Other cancers

The difference in exposure to smoke by different tissues is the most likely explanation for the difference in mortality pattern among cigar and cigarette smokers. The oral mucosa is exposed to similar amounts of smoke by those who do and those who do not inhale deeper into the respiratory tract. Cigar smokers who do not inhale receive a high smoke exposure to the mouth and tongue causing an increased risk of oral cancers. Also, tobacco constituents dissolved in their saliva are swallowed down their esophagus producing the observed increase in esophageal cancers. The esophagus also receives mucus cleared from the lungs by the ciliary mechanism or by coughing which is also swallowed. Tobacco and alcohol act synergistically in the case of oral and pharyngeal cancers, multiplying the risk of contracting the disease. Cancer of the larynx is also developed by pipe and cigar smokers at rates comparable to those of cigarette smokers (i.e. several times that of non-smokers). A US study found that cigar smokers face more than twice the risk of cancers of the mouth, throat and esophagus in comparison to non-smokers.

Respiratory disorders

Pipe and cigar smokers experience higher mortality from bronchitis and emphysema as compared with non-smokers although not as high as that of current cigarette smokers. A US study found that cigar smokers face a 45% greater risk of developing bronchitis and emphysema compared to non-smokers.

Heart disease

In one study, cigar smokers who had taken up cigars after stopping cigarettes and smoked at least five cigars a day had a risk of non fatal myocardial infarction about four times as high as that among ex cigarette smokers who did not smoke cigars. Among those who had never smoked cigarettes, there was very little increased risk. A US study found that cigar smokers face a 27% greater risk of coronary heart disease when compared to non-smokers. Smoking cigars appears to exert an acute effect on the heart.

Passive smoking

Non-smokers are at risk of contracting lung cancer from exposure to other people's smoke, whether that smoke is from pipes, cigars or cigarettes. The risk of lung cancer in non-smokers exposed to passive smoking is increased by between 20% and 30%. Sidestream smoke from cigars contributes more to environmental pollution than sidestream smoke from cigarettes when equal amounts of tobacco are burned.

Five tips for quitting

Studies have shown that these five steps will help you quit and quit for good. You have the best chances of quitting if you use these five steps to develop and maintain your own quit plan.

1. *Get ready.*
2. *Get support.*
3. *Learn new skills and behaviors.*
4. *Get medication and use it correctly.*
5. *Be prepared for difficult situations.*

Talk to your health care provider, they can help. If you do not have insurance or just need to talk call the Washington Tobacco Quitline.

Tobacco Quit Line

1-800-QUIT-NOW

toll-free

1-800-784-8669

QUITLINE.COM

We also recommend:
www.secondhandsmokesyou.com
www.cdc.gov/tobacco