# Preventing Chronic Diseases: Investing Wisely in Health



# Preventing Tobacco Use

#### U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

# The Reality

- Tobacco use is the leading preventable cause of death in the United States, accounting for approximately 438,000 deaths each year.
- Smoking harms nearly every organ in the body and can cause chronic lung disease, coronary heart disease, and stroke, as well as cancer of the lungs, larynx, esophagus, mouth, bladder, cervix, pancreas, and kidneys.
- Nearly 70% of the more than 45.3 million American adults who smoke cigarettes want to quit.
- Approximately 80% of adult smokers started smoking before the age of 18. Each day in the United States, approximately 4,000 young people aged 12–17 years initiate cigarette smoking, and an estimated 1,140 young people become daily cigarette smokers.
- If current smoking patterns in the United States persist, approximately 5 million of today's children will die prematurely of tobacco-related diseases.

#### The Cost of Tobacco Use

- Coupled with this enormous health toll is the significant economic burden of tobacco use—more than \$96 billion per year in medical expenditures and another \$97 billion per year resulting from lost productivity.
- About 14% of all Medicaid expenditures are for smokingrelated illnesses.
- Approximately 18.2 billion packs of cigarettes were sold in the United States in 2007. Each pack cost the nation an estimated \$10.60 in medical care costs and lost productivity.

#### How Tobacco Control Saves Lives

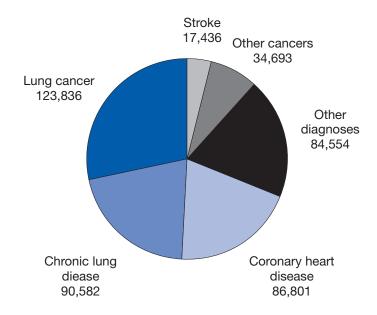
• A New England Journal of Medicine report noted that the California Tobacco Control Program was associated with 33,000 fewer deaths from heart disease from 1989 through 1997. The incidence of lung cancer decreased nearly four times more quickly in California than in the rest of the United States, which is in part a result of program-related reductions in smoking. During 1987–1997, an estimated 11,000 cases of lung cancer were prevented.

 Following the establishment of the Massachusetts Tobacco Control Program, state rates of smoking during pregnancy dropped sharply, from 25% in 1990 to 13% in 1996.
Eliminating smoking during pregnancy could result in a 10% reduction in all infant deaths and a 12% reduction in deaths from perinatal conditions.

#### How Tobacco Control Saves Money

- Stopping the use of tobacco is the most cost-effective method of preventing disease among adults. Each smoker who successfully quits reduces the anticipated medical costs associated with heart attack and stroke by an estimated \$47 in the first year and \$853 during the following 7 years.
- Compared with nonsmokers, men who smoke incur nearly \$16,000 more in lifetime medical expenses; women who smoke incur more than \$17,000.

# 438,000 Average Annual U.S. Deaths Attributable Each Year to Cigarette Smoking, 1997–2001\*



<sup>\*</sup>Actual total was 437,902. Source: CDC. Annual smoking-attributable mortality, years of potential life lost, and productivity losses—United States—1997–2001. MMWR 2005;54(25):625–8.

### State Program in Action:

New York's Tobacco Control Program Sustains Funding and Moves Closer to Recommended Levels

Over 25,000 New Yorkers die from tobacco use each year, and the state annually incurs over \$8 billion in medical costs resulting from tobacco use. In response, the New York Tobacco Control



Program (NYTCP) wants to achieve three key goals by 2010: 1 million fewer smokers, an adult prevalence rate of 14%, and a youth prevalence rate of 10%. Clearly, reaching these goals requires a tobacco-control effort focused on sustaining funding levels and infrastructure.

According to CDC's *Best Practices for Comprehensive Tobacco Control Programs*—2007, the state of New York should be funding its tobacco control program with an annual investment of \$254.3 million. New York has recorded an impressive increase in funding control programs in recent years—from \$32.5 million in 2000 to \$85.5 million in 2007. How did New York achieve such an increase?

NYTCP began requiring funded community partners to implement sustainability plans and to report on their activities such as monthly communication with local legislators and outreach to the media. Also, the Center for a Tobacco Free New York and its partners aggressively advocated for raising the tax on tobacco products which increased funding. Additionally, independent evaluation reports have been published annually for the past 4 years, and the results of the program's effectiveness are shared widely with legislators and other decision makers.

NYTCP and its partners have been successful in using simple and direct key messages:

- Tobacco use is an epidemic that impacts every community in the state.
- Tobacco control works. Prevalence in New York is lower than the national average: 18.2% for adults and 16.2% for high school students.
- The longer states invest in comprehensive tobacco control programs, the greater the impact. These programs also become more cost-effective over time.
- A huge unmet need exists, which can be better addressed with more financial resources.
- In New York, tobacco is an \$8 billion problem—with a \$250 million solution.

For more information and references supporting these facts, please visit www.cdc.gov/nccdphp.

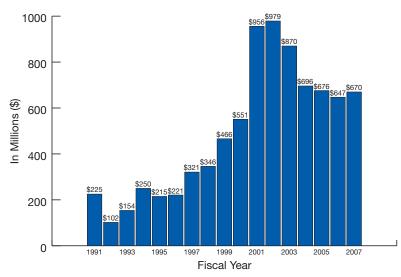
## **Effective Strategies**

- CDC continues to support comprehensive programs to prevent and control tobacco use in all 50 states, the District of Columbia, 7 U.S. territories, and 7 tribal-serving organizations. CDC funds national networks to reduce tobacco use among specific populations and provides grants to 23 states for coordinated school health programs to help prevent tobacco use.
- CDC's Best Practices for Comprehensive Tobacco Control Programs —2007 helps states plan, implement, evaluate, and sustain their own tobacco control programs which reduce smoking-attributable mortality, smoking prevalence, smoking initiation, and cigarette consumption.
- The independent Task Force on Community Preventive Services strongly recommends increasing the price of tobacco products, conducting mass media campaigns, developing cessation interventions, reducing out-of-pocket costs for treatment, and instituting smoking bans and restrictions in public places.
- The more states spend on comprehensive tobacco control programs, the greater the reductions in smoking. The longer states invest in such programs, the greater and faster the impact. If states sustained their individual recommended level of investment for 5 years, there would be more than five million fewer smokers nationwide and hundreds of thousands of premature tobacco-related deaths would be prevented.

### Hope for the Future

The total recommended annual investment for the nation to fully fund tobacco control programs is \$3.7 billion, a fraction of the \$13.4 billion the tobacco industry spends each year to market and promote their products. The \$3.7 billion investment recommended by CDC is only 2% of the cost for health care services and lost productivity resulting from tobacco use and could be funded with just 17% of the nation's tobacco excise tax and tobacco settlement revenue. If states spent the minimum amount recommended by CDC on tobacco prevention and control, the rates of youth smoking rates could decline at rates seen previously.

#### **Total Funding for State Tobacco Control Programs\***



<sup>\*</sup> Adjusted to July 2007 dollars. Source: Projects ImpacTEEN, CDC's Office on Smoking and Health, RTI International, Campaign for Tobacco-Free Kids, University of Illinois at Chicago, University of Buffalo.