

Nonsmokers' Exposure to Secondhand Smoke

The following is a synopsis of “Vital signs: Nonsmokers' exposure to secondhand smoke—United States, 1999–2008,” published in the September 10, 2010, issue of *Morbidity and Mortality Weekly Report*.



What is already known on this topic?

Secondhand exposure to tobacco smoke causes heart disease and lung cancer in nonsmoking adults. Secondhand smoke also can cause sudden infant death syndrome, acute respiratory infections, middle ear disease, exacerbated asthma, respiratory symptoms, and decreased lung function in children. No risk-free level of secondhand smoke exposure exists. Levels of secondhand smoke exposure among U.S. nonsmokers have fallen substantially during the past 20 years; however, millions of nonsmokers remain exposed to secondhand smoke in homes, workplaces, public places, and vehicles.

What is added by this article?

Using data from the National Health and Nutrition Examination Survey (NHANES) from 1999 to 2008, this report describes recent trends in secondhand smoke exposure among nonsmokers by analyzing levels of nicotine in the blood. Despite a decrease in overall exposure to secondhand smoke,

approximately 88 million American nonsmokers older than 3 years of age were exposed to secondhand smoke from 2007 to 2008. Of these, 32 million (36%) were younger than 19 years old. This finding shows that children are more likely than nonsmoking adults to live with someone who smokes inside the home and are more likely to be exposed to secondhand smoke.

What are the implications for public health practice?

Breathing secondhand smoke increases a person's risk for heart attack and other heart conditions. Even brief exposure to secondhand smoke can trigger a heart attack. Because of the increased risks of coronary heart disease morbidity and mortality among men and women exposed to secondhand smoke, protecting nonsmokers is essential.

Although this study indicates that secondhand smoke exposure in the United States has decreased during the past two decades, continued efforts are needed to further reduce exposure. This

decline is attributable to a number of factors, including decreased smoking prevalence, increases in local and state laws prohibiting smoking in indoor worksites and public places, increases in voluntary smoking restrictions in workplaces and homes, and changes in public attitudes regarding social acceptability of smoking near nonsmokers and children.

What are the suggestions for policy change?

Tobacco control policy can drive social, environmental, and systems changes, and it has a substantially greater impact than interventions targeting individuals. A policy approach engages the larger community and empowers it to establish healthy social norms. The suggested policy changes to protect nonsmokers are:

- ▶ Eliminate smoking in indoor spaces, including workplaces, public places (e.g., restaurants and bars), and private places (e.g., homes and vehicles) through smoke-free laws and policies.

- ▶ Reduce tobacco use by making tobacco products less accessible, affordable, desirable, and accepted.
- ▶ When contracting services for conferences or meetings, only use vendors and sites that have smoke-free policies in place.
- ▶ Consider the World Health Organization's **MPOWER** strategies in efforts to prevent and control tobacco use.

Monitor tobacco use and prevention policies

Protect people from tobacco smoke

Offer help to quit

Warn about the dangers of tobacco use

Enforce bans on tobacco advertising

Raise taxes on tobacco

Resources

Environmental Protection Agency
Smoke Free Homes and Cars Program
<http://www.epa.gov/smokefree>

U.S. Department of Health and Human Services
Communities Putting Prevention to Work Initiative
<http://www.hhs.gov/recovery/programs/cppw/factsheet.html>

Institute of Medicine
Secondhand Smoke Exposure and Cardiovascular Effects
http://www.cdc.gov/tobacco/basic_information/health_effects/heart_disease/iom_report

Citations

Centers for Disease Control and Prevention. Vital signs: Nonsmokers' exposure to secondhand smoke—United States, 1999–2008. *MMWR*. 2010 Sept 10;59(35):1141–6.

Wisotzky M, Albuquerque M, Pechacek T, Park B. The National Tobacco Control Program: Focusing on policy to broaden impact. *Public Health Reports*. 2004;119:303–10.

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