

The Burden of Tobacco Use in Nevada, Emerging Tobacco Products and Community Resources

Renaissance Las Vegas

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2:30-3:30pm

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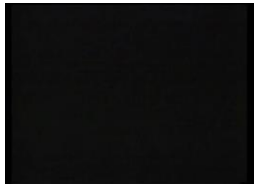
Southern Nevada Health District



Topics to be Covered

- The toll of tobacco in the U.S.
- Emerging tobacco products
 - ❖ Cigars, Little Cigars, Cigarillos
 - ❖ Snus
 - ❖ Dissolvable Tobacco Products (Orbs, Strips, Sticks, Lozenges)
 - ❖ Chewing Tobacco, Snuff
 - ❖ Hookah
 - ❖ **Electronic Cigarettes/ E-cigarettes**
- How you can help
- Brief Tobacco Use Intervention
- Local resources

TV AD “I smoke when I’m Coloring”



Current Climate

- Adult smoking prevalence in Nevada has decreased to 11.4% (2016) and in Clark Co. 12.6% (2016).
- **Some** diverse community smoking rates have declined.
- High school cigarette smoking prevalence in Clark County has declined from 33% (1999) to 5.4% (2017). In NV from 31.5% (1999) to 6.4% (2017).
- 85% of NV adults (2016) surveyed believe people should be protected from secondhand smoke.
- State law passed in 2006 to offer more protection from exposure to secondhand smoke (Nevada Clean Indoor Air Act – NCIAA).

The Toll of Tobacco

- Smoking is the leading cause of preventable death and kills 480,000 people each year in the U.S. than alcohol, AIDS, motor vehicle crashes, illegal drugs, murders, and suicides **combined**.*
- 278,544 deaths annually among men (including deaths from secondhand smoke)
- 201,773 deaths annually among women (including deaths from secondhand smoke)
- Exposure to secondhand smoke causes an estimated 41,000 deaths each year among adults in the US
 - 7,333 annual deaths from lung cancer.
 - 33,951 annual deaths from heart disease.**

*Campaign for Tobacco-free Kids

**U.S. Centers for Disease Control and Prevention

Number of smokers age 35 and older who die each year from smoking-related Cancer (CDC)

Annual Cigarette Smoking-Related Mortality in the United States, 2005-2009

Disease	Male	Female	Total
Cancer			
Lung cancer	74,300	53,400	127,700
Other cancers ^a	26,000	10,000	36,000
Subtotal: Cancer	100,300	63,400	163,700

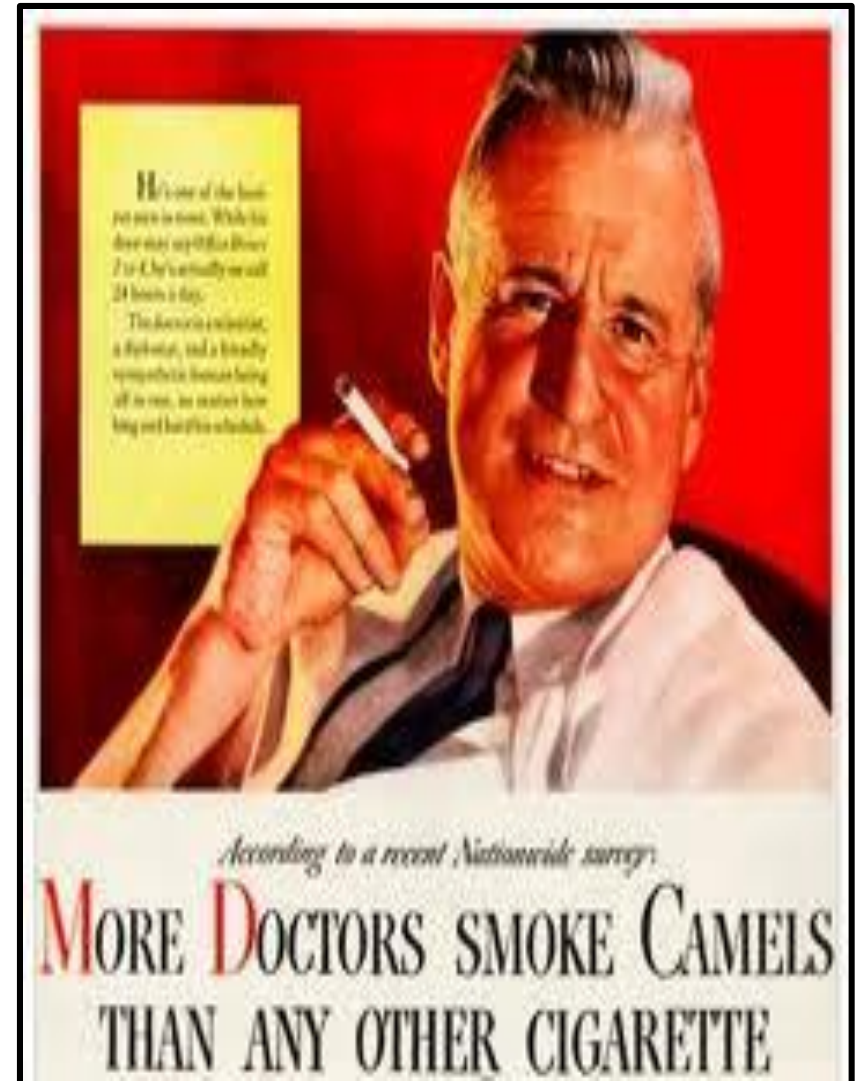
Secondhand Smoke

Lung cancer	4,374	2,959	7,333
Coronary heart disease	19,152	14,799	33,951
Total: Secondhand smoke	23,526	17,758	41,284

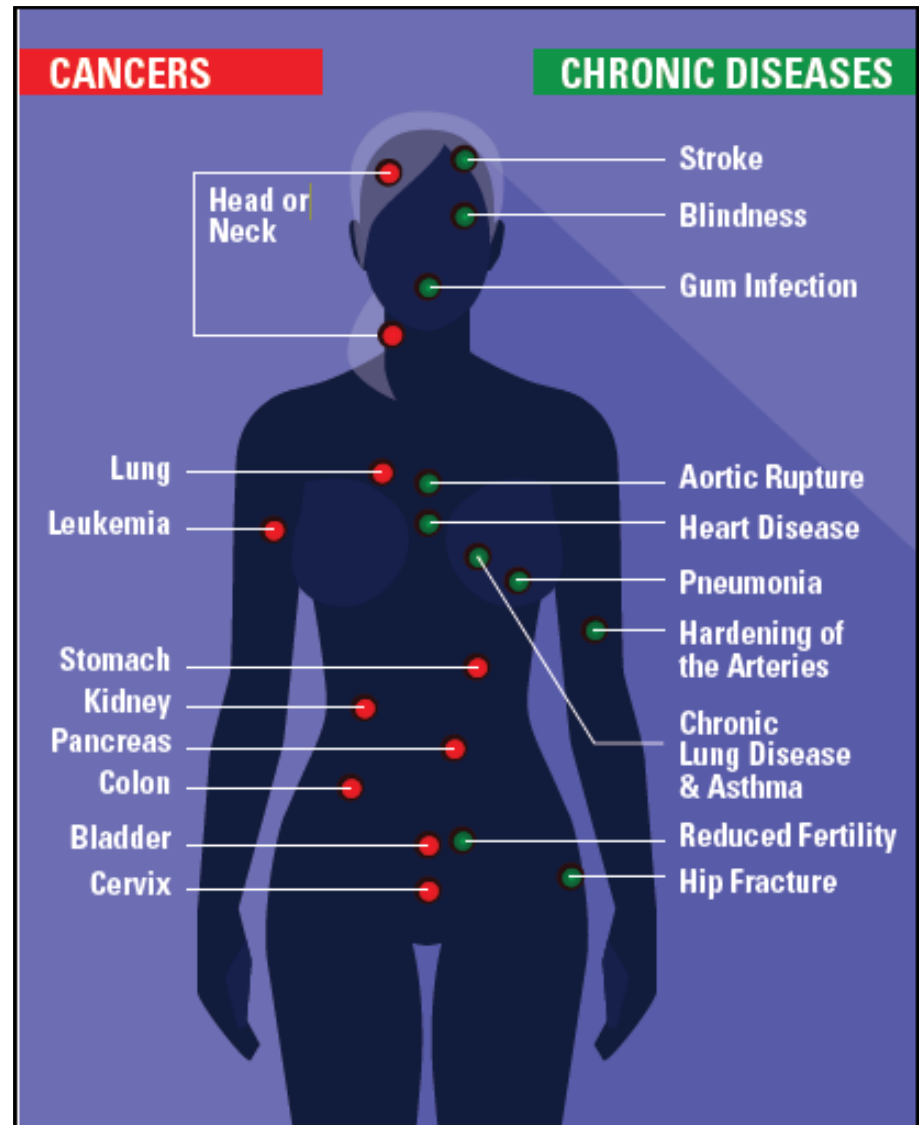
Other cancers include cancers of the lip, pharynx and oral cavity, esophagus, stomach, pancreas, larynx, cervix uteri (women), kidney and renal pelvis, bladder, liver, colon, and rectum; also acute myeloid leukemia

The Toll of Tobacco Use in Nevada

- The tobacco industry spends over **\$64.2 million** each year to market their products in Nevada. (Toll, 2018)
- Smoking is the leading cause of preventable death and kills 480,000 people each year in the U.S. than alcohol, AIDS, motor vehicle crashes, illegal drugs, murders, and suicides **combined**.* (Toll, 2017)
- In Nevada, the combined monetary toll of tobacco use **per each smoker's** lifetime is calculated at **\$1,413,733**. (Toll, 2017)
- In Nevada, **\$1.08 billion** is spent in annual health care costs directly caused by smoking. (Toll, 2017)
- Proportion of cancer deaths in Nevada attributable to smoking **30.9%** (Wallethub, 2017)



Smoking damages
ALL
OF
THE BODY:
healthcare providers
know this, the
general public is not
completely aware.



Graphic by National Jewish Health, Quitlogix 2016

Three Link Chain of Addiction

There are three aspects to nicotine addiction:

- Biological (Physical)
- Psychological (Mental)
- Sociocultural (Social)



Breaking Physical Addiction

One-Two Punch

Either counseling or medication are effective when used alone, but the combination of counseling and medication is more effective than either alone.



Secondhand Smoke

Contains over 4,000 chemicals, 60 of which are known to cause cancer.

Nicotine	One of the most addictive substances known to man	As addictive as heroine
Arsenic	Rat poison	Insecticide and weed killer
Benzene	Formed from coal and petroleum- Known carcinogen	Used as a solvent in fuel Associated with Leukemia
Formaldehyde	Highly poisonous liquid used to preserve bodies	Also found in cigarette smoke
Hydrogen Cyanide	Gas chamber poison	Metal cleaner and insecticide
Carbon Monoxide	Car exhaust fumes. Forms when cigarette is lit.	Rapidly fatal in large amounts
Ammonia	Found in dry cleaning fluids	Toilet cleaner

Health Impact of Secondhand Smoke Exposure

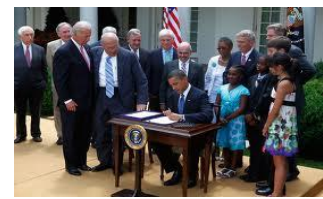
- There is no risk free level of exposure to secondhand smoke
- Secondhand smoke causes heart disease
 - Breathing SHS has immediate adverse effects on your blood and blood vessels;
 - **Nonsmokers who are exposed at home or at work increase their risk of developing heart disease by 25–30%;**
 - People who already have heart disease are at especially high risk of suffering adverse effects from breathing secondhand smoke and should take special precautions to avoid even brief exposures.
- Secondhand smoke causes lung cancer
 - SHS causes lung cancer in adults who themselves have never smoked;
 - **Nonsmokers who are exposed at home or at work increase their risk of developing lung cancer by 20–30%; and**
 - Even brief secondhand smoke exposure can damage cells in ways that set the cancer process in motion.

Thirdhand Smoke Exposure

- May remain inside even when smoking took place earlier
- Residue includes heavy metals, carcinogens and even radioactive materials that young children can get on their hands and ingest, especially if they're crawling or playing on the floor.
- Substances in thirdhand smoke include
 - hydrogen cyanide, used in chemical weapons;
 - butane, used in lighter fluid;
 - toluene, found in paint thinners;
 - arsenic;
 - lead;
 - carbon monoxide; and even
 - polonium-210,
- Eleven of the substances are highly cancer-causing.

<http://www.nytimes.com/2009/01/03/health/research/03smoke.html>





Family Smoking Prevention and Tobacco Control Act: Gives the Food and Drug Administration (FDA) the authority to regulate the manufacture, distribution, and marketing of tobacco products to protect public health.



Restricts **tobacco product** advertising and marketing to youth by directing FDA to issue regulations which, among other things:

- Require proof of age to purchase these tobacco products – the federal minimum age to purchase is 18.
- **Bans cigarettes with characterizing flavors** (except menthol and tobacco).
- Require face-to-face sales, with certain exemptions for vending machines and self-service displays in adult-only facilities.
- **Ban the sale of packages of fewer than 20 cigarettes.**
- **Limit color and design of packaging and advertisements**, including audio-visual advertisements (However, implementation of this provision is uncertain due to pending litigation. See *Discount Tobacco City & Lottery v. USA*, formerly *Commonwealth Brands v. FDA*.)
- Ban tobacco product sponsorship of sporting or entertainment events under the brand name of cigarettes or smokeless tobacco.
- Ban free samples of cigarettes and brand-name non-tobacco promotional items.
- **Prohibits “reduced harm” claims including “light,” “low,” or “mild,” without an FDA order to allow.**
- Requires industry to submit marketing research documents.

Final Deeming Regulation Provisions

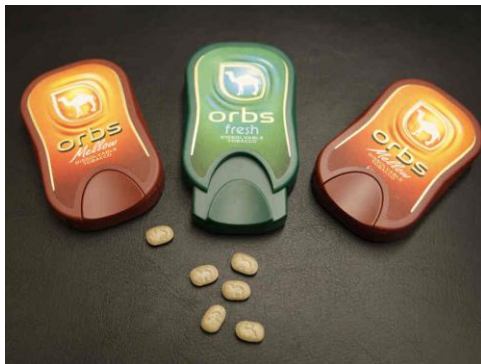
	 CIGARETTES	 SMOKELESS TOBACCO	 CIGARS	 E-CIGARETTES & OTHERS
Minimum sales age of 18 and age verification under 27	✓	✓	✓	✓
Prohibition on vending machine sales	Allowed in adults-only facilities	Allowed in adults-only facilities	Allowed in adults-only facilities	Allowed in adults-only facilities
Prohibition on self-service displays	Allowed in adults-only facilities	Allowed in adults-only facilities		
Minimum package size requirements	✓			
Prohibition on breaking packages by retailers (e.g., sales of loosies)	✓	✓		
Prohibition on free samples	✓	Allowed in qualified adults-only facilities	✓	✓
Prohibition on characterizing flavors	Menthol and tobacco allowed			
Mandatory warning labels on packages and advertisements	9 Rotating warnings	4 Rotating warnings	6 Rotating warnings ¹	1 Static warning
Prohibition on brand names on non-tobacco products and brand name sponsorship of sporting and cultural events	✓	✓		
Required notice of advertising in any non-traditional medium	✓	✓		

Other Tobacco Products

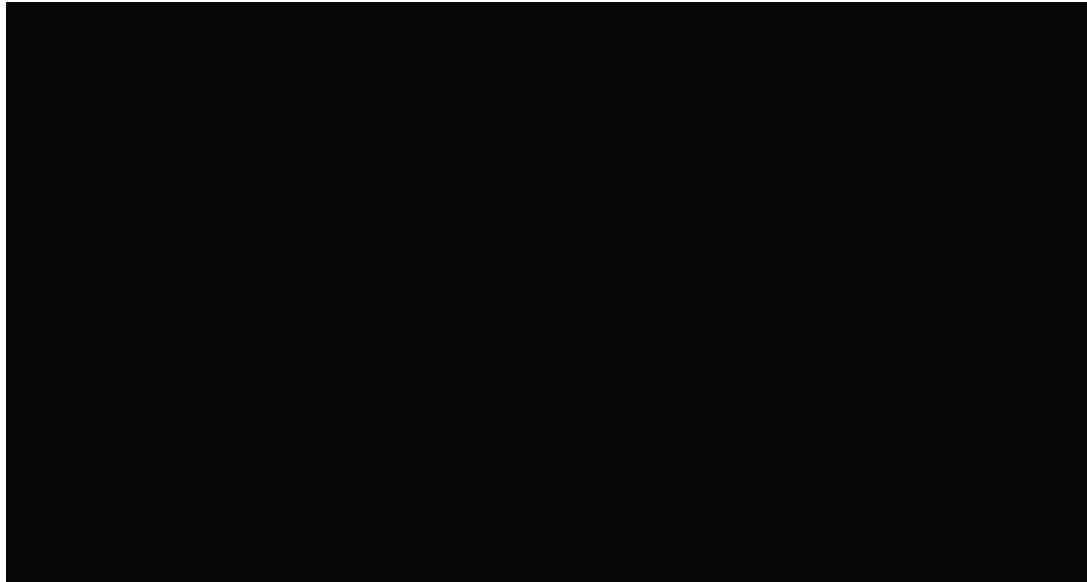
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- ❖ Chewing Tobacco, Snuff
- ❖ Hookah
- ❖ Electronic Cigarettes/ E-cigarettes

Other Tobacco Products (OTP's)/Emerging Tobacco Products

Other Tobacco Products, or OTPs, commonly refer to any tobacco product that is not a cigarette.



Other Tobacco Products California Ad



Cigars, Little Cigars, Cigarillos



CIGARETTE



LITTLE CIGAR



CIGAR



CIGARILLO (TIPPED)



CIGARILLO

- Little cigars or cigarillos resemble cigarettes.
- Little cigars and cigarillos were intended to replace cigarettes as cigarette advertising became increasingly restricted, and taxes on cigarettes, but not cigars, continued to increase, according to tobacco industry documents.
- Come in flavored varieties, including cherry, chocolate, vanilla, peach rum, raspberry, **Menthol** and sour apple.
- Flavorings may appeal to youth and young people.
- Flavorings in cigars are not regulated by the federal government (FDA).
- Preferred by African American and Hispanic youth.



Not Your Grandfather's Cigar

*A New Generation of Cheap and Sweet Cigars
Threatens a New Generation of Kids*

Slideshow

Snus



- A moist powder smokeless tobacco product.
- Placed between the cheek and gum.
- Used like smokeless tobacco, but more desirable because it doesn't require the user to spit.
- Also different because it is heated using steam and not fire, which means it contains a lower amount of nitrosamines, a known cancer-causing agent.
- Contains more nicotine than cigarettes.
- Negative health effects are similar to smokeless tobacco use and include developing lesions in the mouth, gum recession and cancer of the mouth or tongue.

Dissolvable Tobacco Products



- Camel Orbs: mint-sized; dissolve in about 10- 15 minutes; contains about 1 milligram of nicotine, almost as much as one cigarette.
- Camel Strips: resemble Listerine breath strips; dissolve in about 2-3 minutes; contains about 0.6 mg of nicotine.
- Camel Sticks: resemble toothpicks; dissolves in about 20-30 minutes; contains about 3.1 mg per stick, similar to the nicotine content in about two cigarettes.

Chewing Tobacco and Snuff

- Snuff is moist, finely chopped tobacco that is placed between the cheek and gum and doesn't require chewing. Some snuff is packaged in individual serving bags, so people can use it without spitting.
- Chewing tobacco, another form of spit tobacco, comes in three types: loose leaf, plugs, and twists. Loose leaf is shredded tobacco leaves made into strips; plugs are pressed into small, soft blocks flavored with licorice and sugar and then dried; and twists are dried and twisted into hard spirals.
- In 2016, 2.8% of Nevadans surveyed reported using smokeless tobacco.



Oral Cancer

- According to the Oral Cancer Foundation, approximately 49,750 Americans will be diagnosed with oral cancer or pharyngeal cancer this year
- Oral cancer will cause over 9,575 deaths each year, killing roughly one person per hour, 24 hours per day
- Of the 49,750 people diagnosed with oral cancer this year, only about 57% will still be alive in 5 years (increased survival due to HPV16 attributable cancers)
- 2:1 male to female ratio (this ratio is changing with the increased incidence of tobacco and alcohol in women)
- Usually occurs after the age of 40 (this ratio is changing with increased incidence of HPV-16 related oral cancer in young adult and teen population)

Tobacco Use and Oral Cancer and Other Conditions

- Any area in the mouth/oropharynx can potentially be susceptible to oral cancer, but research has shown that when people use a smoked tobacco product, **the lateral border (side) of the tongue and floor of the mouth have a higher risk of developing oral cancer.**
- Areas of the mouth more exposed to the heat will exhibit more breakdown of mucosa tissue.
 - For smokeless tobacco users, it is the gums, inside lips (top/bottom) or cheeks (front/back).
 - For pipe smokers, it tends to be the lips because of the direct contact with the pipe smoke and the lip.
 - Oral cancer develops earlier in people that use smokeless tobacco and keep it in the same place over time.
 - **Teens and 20 year olds can develop oral cancer with smokeless tobacco** use whereas it may take a few more years to develop oral cancer if they use cigarettes.



Oral cancer



Leukoplakia caused by use of spit tobacco



Hairy Tongue (not cancerous)

Hookah



- Hookahs are also known as water pipes.
- Commonly used by youth and young adults and believed to be safe.
- Using water as a filter does not change the level of nicotine in the smoke compared to pipes without a water filtration process.
- Lounges popping up near schools and universities.
- Hookah smoke contains 36 times more tar than cigarette smoke.
- Smoking hookah fills your body with 8 times more Carbon Monoxide.
- 12 % of Americans have smoked hookah during their lifetime.

Hookah Continued



- 20% of 18-24 year old currently use hookah. The highest increase in hookah smoking is among single males and those with high income and education levels.
- During an average hookah session you take 5 times the number of puffs.
- Each hookah session equals 100 more times the smoke volume compared to a single cigarette.
- A typical hookah session involves more frequent puffs, deeper inhalation, over a longer period of time than cigarettes.
- CDC estimates 1.6 million young people used hookahs in 2014, the large pipes used to smoke flavored tobacco. The agency said those numbers have tripled since 2011.

Electronic Cigarettes Background



- Nicotine delivery device first developed in China in 2004.
- E-cigarettes are known by many different names. They are sometimes called e-cigs, e-hookahs, juul, mods, vape pens, vapes, tank systems, and electronic nicotine delivery systems.”
- When the user puffs on the inhaler, the battery causes the tip of the e-cigarette to glow and the heat created by the battery turns the liquid nicotine into an aerosol of liquid, flavorings and nicotine.
- Include a battery component, a vaporizer, a cartridge filled with liquid nicotine and an inhaler.
- Available in numerous flavors.
- Using an e-cigarette is commonly referred to as vaping.

E-Cigs Refillable and Disposable

- The e-cigarette can be sold as a metal tube that requires **refillable** containers or tanks of nicotine and flavorings, often called **juice**, and the cartridge can contain up to 20mg of nicotine or more. These devices can be **plugged into a computer to be recharged**.
- Hundreds of e-juice flavors such as coffee, tobacco, apple, strawberry, banana and bubble gum.
- Numerous inexpensive e-cigarettes available that are **disposable** and don't require refilling the cartridge. These products can be discarded once the user depletes the liquid nicotine. These products can look like a marker or pen.



E-juice

A traditional single cigarette yields about 1mg of absorbed nicotine. **A 15 ml bottle of e-juice can be the equivalent of 4 packs of cigarettes**, but this varies since some e-cigarettes can be shut on and off.



E-cigarette Prevalence

- In 2016, **24%** of adults in Clark Co. had ever used an e-cigarette (ATS 2016)
- More than **70.0%** of smokers believe that e-cigarettes are less harmful than regular cigarettes.
- The most commonly cited reasons for use by e-cigarette users include: **the perception that they are healthier/less toxic than traditional cigarettes, aid in tobacco craving/withdrawal symptoms, smoking cessation facilitator, and relapse avoidance.**
- In 2016, **an estimated 2 million youth**, reported current use (use on one or more days in the past 30 days) of **any tobacco product.**

11 yr olds Instagram Vape post



E-CIGARETTES ARE NOW THE MOST COMMONLY USED TOBACCO PRODUCT AMONG U.S. YOUTH.

IN THE U.S., YOUTH ARE MORE LIKELY THAN ADULTS TO USE E-CIGARETTES

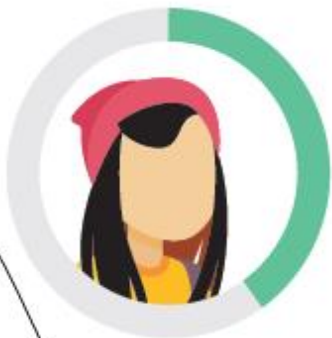


In 2016, more than
2 MILLION

U.S. middle and high school students used e-cigarettes in the past 30 days, including:

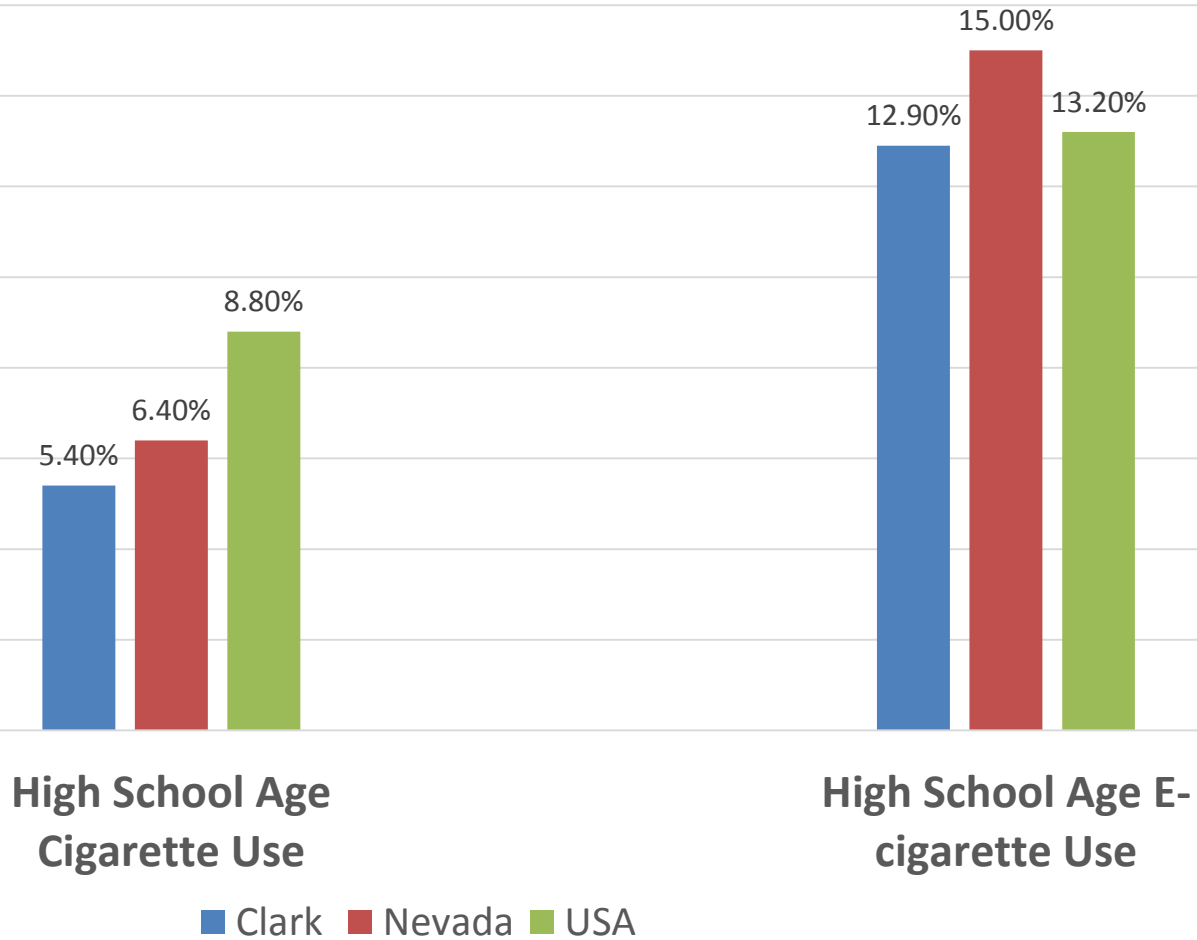
4.3%
MIDDLE SCHOOL STUDENTS

11.3%
HIGH SCHOOL STUDENTS



AMONG CURRENT E-CIGARETTE USERS AGED 18-24 YEARS,
40.0% had **NEVER BEEN** cigarette smokers

2017 Clark County, Nevada, U.S. High School Cigarette and E-cigarette Prevalence



Nevada Youth Risk Behavior Factor Survey, 2017

Candy Flavors

According to CDC research, during 2012–2016 the number of available e-cigarettes, including rechargeables, disposables, prefilled cartridges, and e-liquid refills, increased 190 percent nationally, and the percentage of those that were flavored increased from 11 percent to 44 percent. The increased product availability corresponded to an increase in sales.



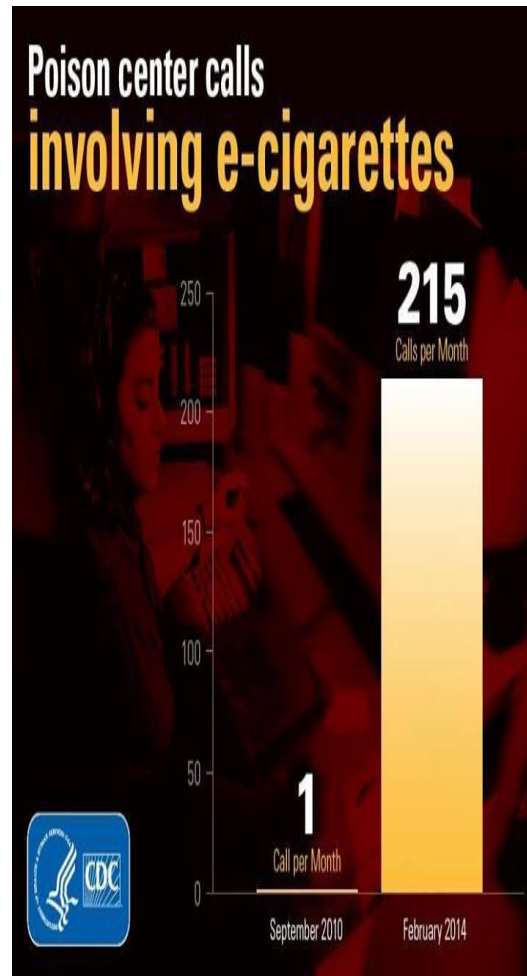
E-cigarette Safety and Quality

- 2009 FDA studied 2 brands of e-cig and found:
 - Carcinogens and heavy metals found in juice and aerosol
 - Quality control was inconsistent or non-existent
 - Nicotine free e-cigs contained nicotine
 - Nicotine levels varied, sometimes twice as high as FDA approved devices
 - Not recognized as quit smoking devices
- **Nicotine** is highly addictive and is a vasoconstrictor meaning it instantly **narrows** blood vessels:
 - Increases heart rate by 10-20 beats per minute.
 - Considered a neurological-toxin and is used as an insecticide.
- The liquid used in e-cigarettes, when ingested or absorbed through the skin, can cause vomiting, seizures or death.

E-cigarette Safety and Quality

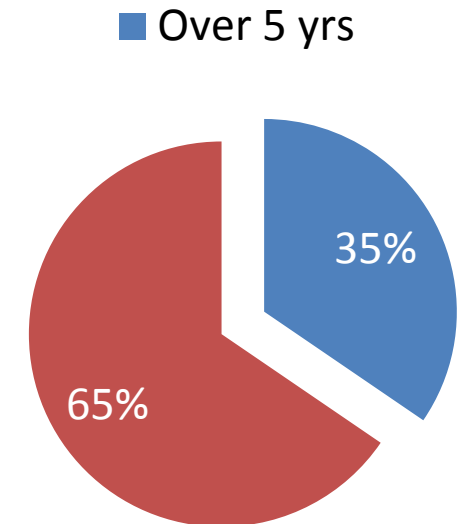
- Poison centers reported **2,405** e-cigarette calls from Sept. 2010 to Feb. 2014. The total number of poisoning cases is likely higher than reflected in this study, because not all exposures might have been reported to poison centers.
- Calls to poison centers involving e-cigarette liquids containing nicotine rose from **one** per month in Sept. 2010 to **215** per month in Feb. 2014.
- According to the CDC, more than half (**51.1 percent**) of the calls to poison centers due to e-cigarettes involved **young children 5 years and under**, and about 42 percent of the poison calls involved people age 20 and older.

National Poison Control Center



Nevada Poison Center E-juice

Nevada E-cigarette Poisonings 139 total calls from 2011-2017



Source: Nevada Poison Center, August, 2018.

Secondhand Aerosol

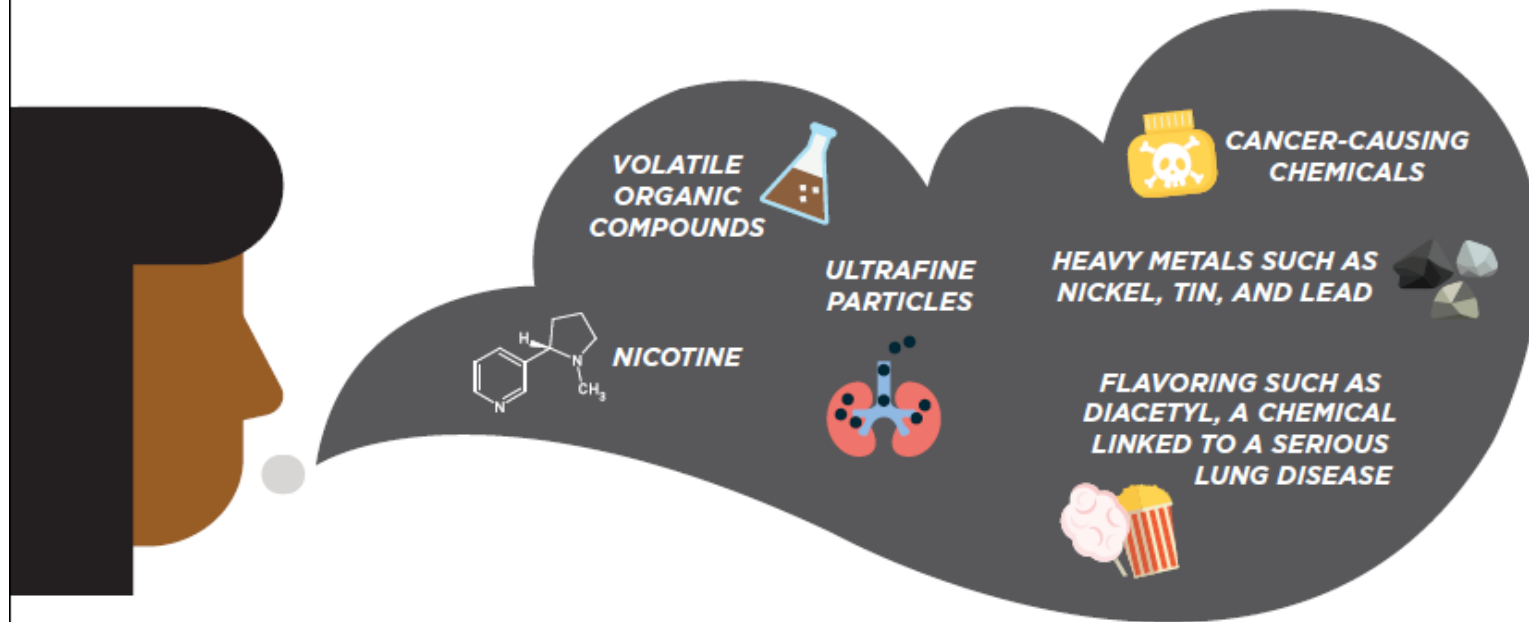
- E-cigarettes do not just emit “harmless water vapor.” **Secondhand e-cigarette aerosol (incorrectly called vapor by the industry) contains nicotine, ultrafine particles and low levels of toxins that are known to cause cancer.**
- Exposure to fine and ultrafine particles may exacerbate respiratory ailments like asthma, and constrict arteries which could trigger a heart attack.
- At least 10 chemicals identified in e-cigarette aerosol are classified as carcinogens and reproductive toxins. The compounds that have already been identified in mainstream (MS) or secondhand (SS) e-cigarette aerosol include: **Acetaldehyde (MS), Benzene (SS), Cadmium (MS), Formaldehyde (MS,SS), Isoprene (SS), Lead (MS), Nickel (MS), Nicotine (MS, SS), N-Nitrosornicotine (MS, SS), Toluene (MS, SS).**
- **E-cigarettes contain and emit propylene glycol (PG), a chemical that is used as a base in e-cigarette solution and is one of the primary components in the aerosol emitted by e-cigarettes.**
 - Short term exposure causes eye, throat, and airway irritation.
 - Little known about long-term exposure PG.
 - Material Safety Data Sheet from Dow Chemical states “inhalation exposure to PG mist should be avoided.”
- **Even though propylene glycol is FDA approved for use in some products, the inhalation of propylene glycol is not.** Some studies show that heating propylene glycol changes its chemical composition, producing small amounts of propylene oxide, a known carcinogen.



Secondhand Aerosol

WHAT IS IN E-CIGARETTE AEROSOL?

THE E-CIGARETTE AEROSOL THAT USERS BREATHE FROM THE DEVICE AND EXHALE CAN CONTAIN HARMFUL AND POTENTIALLY HARMFUL SUBSTANCES:



It is difficult for consumers to know what e-cigarette products contain. For example, some e-cigarettes marketed as containing zero percent nicotine have been found to contain nicotine.

Health Effects

- Desert Research Institute study has found that significant amounts of cancer-causing chemicals such as formaldehyde are absorbed by the respiratory tract during a typical vaping session, underscoring the potential health risks posed by e-cigarettes.
- A study from Johns Hopkins School of Public Health showed that e-cigarettes lower immunity to flu viruses and Strep bacteria.
- The study further concludes free radicals in the “vapor” are damaging enough that vaping may be harmful even if the product does not contain nicotine.

Health Effects

- The first study to look at exposure to aerosol from in real-use conditions found that nonsmokers who were exposed to conventional cigarette smoke and e-cigarette aerosol absorbed similar levels of nicotine.
- Researchers found that smoking suppresses the activity of 53 genes involved in the immune system. E-cigarette use also suppressed those 53 immune genes – along with 305 others.

Association Recommendations

American Association for Respiratory Care

Position Statement

Electronic Cigarette

In line with its mission as a patient advocate and in order to ensure patient safety, **The American Association for Respiratory Care (AARC) opposes the use of the electronic cigarette (ecigarette).** Even though the concept of using the e-cigarettes for smoking cessation is attractive, they have not been fully studied and the use among adolescents is increasing year after year. There is no evidence as to the amount of nicotine or other potentially harmful chemicals being inhaled during use or if there are any benefits associated with using these products. The effects of nicotine on the body are known to be harmful and this does not change when ingested in a smokeless route. Additional safety concerns are emerging concerning ingestion of the Liquid Nicotine Solution (LNS) by young children as poison control centers report a continual increase in calls as e-cigarettes become more popular.

Association Recommendations

- The **World Health Organization (WHO)** recommends that e-cigarettes not be used indoors, especially in smokefree environments, in order to minimize the risk to bystanders of breathing in the aerosol emitted by the devices and to avoid undermining the enforcement of smokefree laws.
- The **National Institute for Occupational Safety and Health (NIOSH)** recommends that employers “establish and maintain smoke-free workplaces that protect those in workplaces from involuntary, secondhand exposures to tobacco smoke and airborne emissions from e-cigarettes and other electronic nicotine delivery systems.”
- The **American Industrial Hygiene Association (AIHA)** also recommends that e-cigarettes be included in smokefree laws: *“Because e-cigarettes are a potential source of pollutants (such as airborne nicotine, flavorings, and thermal degradation products), their use in the indoor environment should be restricted, consistent with current smoking bans, until and unless research documents that they will not significantly increase the risk of adverse health effects to room occupants.”*

Association Recommendations

- The **American Public Health Association** adopted a resolution, “Supporting Regulation of Electronic Cigarettes,” that outlines seven action steps including, “States and municipalities [should] enact and enforce laws...prohibiting the use of e-cigarettes in all enclosed areas of public access and places of employment. These standards should be incorporated into existing clean indoor air laws.”
- The **American Association for Cancer Research** and the American Society of Clinical Oncology supports prohibiting the use of e-cigarettes in smokefree spaces until the safety of second- and thirdhand aerosol exposure is established.
- The **American Society for Heating, Refrigeration, and Air Conditioning Engineering (ASHRAE)** Journal stated: “We conclude that e-cigarettes emit harmful chemicals into the air and need to be regulated in the same manner as tobacco smoking.”

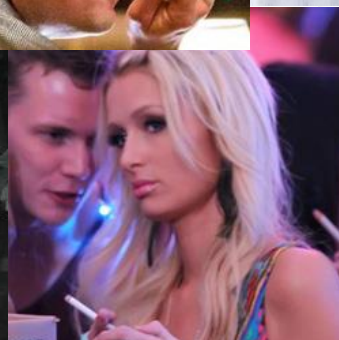
E-cig Industry Using Big Tobacco's Playbook

- Celebrity spokespeople
- Print ads feature rugged men and glamorous women
- Sex sells
- Sponsor sports and music festivals
- Products available in sweet flavors
- Use cartoons
- Their ads say "Switch, Don't quit"

Celebrity Use/Endorsements of E-cigs/Glamorization

- Other celebrities that have been known to smoke electronic cigarettes, but haven't been caught on a camera yet include Mel Gibson, Miley Cyrus, Kate Moss, Ryan Seacrest, Ashley Greene, Nikki Reed, Harrison Ford, Jeremy Piven, and Kate Middleton

Leonardo DiCaprio
Robert Pattinson
Katherine Heigl
Lindsay Lohan
Johnny Depp
Jenny McCarthy
Dennis Quaid
Charlie Sheen
Courtney Love
Stephen Dorff
Brittany Spears
Paris Hilton
Catherine Zeta Jones
Zayn Malik
Michelle Rodriguez
Carrie Fisher
Tom Petty



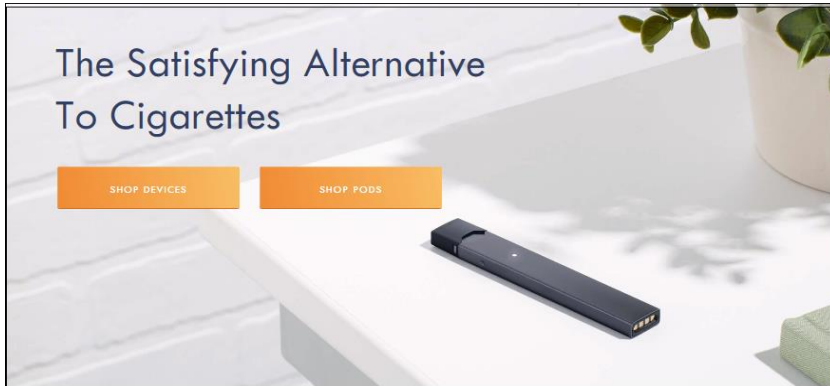
Print Ads Feature Rugged Men and Glamorous Women



E-hookah = E-cigarettes



JUUL = E-cigarette



- Newer vaping device gone “viral”
- Looks like a USB flash drive, rechargeable in a laptop
- Popular with high schoolers and college age
- Flavors like mango, fruit medley, crème brulee, cool mint, virginia tobacco
- Schools around nation reporting students fill the devices with marijuana, a homemade substance, or Juul-issued flavor "pods," which can deliver more than double the nicotine — and nicotine buzz — of other vaping products.
- Juul devices and pods can be ordered online from its website. A starter kit goes for \$49.99

E-cigs for Marijuana Use

- Orange County, California reporting increasing number of teens filling e-cigs with THC (psychoactive substance in marijuana) oil, Hemp oil, hash wax (dabs, honey) which can deliver a more potent high than using marijuana via traditional smoking methods.
- Dabs 70-90% of THC
- Numerous videos on YouTube demonstrating how to use e-cigarettes to smoke marijuana derivatives.
- Some web forum discussions around smoking meth using e-cigs.



Nevada and Recreational Marijuana

- 21 and older can use and possess
- July 1, 2017 recreational MJ available
- Not allowed to use any form in public but legislation to change that is expected.
- Only legal place to use currently is in a private residence.
- The Nevada Clean Indoor Air Act only deals with the “smoking of tobacco”
- Secondhand marijuana smoke exposure issues similar to SHS
- Can legally possess up to 1 oz or 1/8 oz of concentrates
 - 28 grams in an ounce
 - average joint ½ gram of MJ
 - 1 oz of MJ can make about 60 joints



Comparison of tobacco and marijuana SHS

	tobacco	marijuana
tar (mg/cig)	24.3 ± 1.8	49.7 ± 2.5*
NO (µg/cig)	1101 ± 47	2087 ± 152*
NOx (µg/cig)	1172 ± 44	2284 ± 229*
CO (mg/cig)	61.7 ± 2.0	54.0 ± 3.7*
nicotine (mg/cig)	4.77 ± 0.26	0.065 ± 0.018*
ammonia (µg/cig)	5568 ± 322	14270 ± 472*
HCN (µg/cig)	83.8 ± 7.8	685 ± 29*
NNN	41 ± 4.8	<0.634*
NAT	17.4 ± 1.4	<2.34*
NAB	2.71 ± 0.52	<0.793*
NNK	92 ± 11.7	<4.65*
mercury	8.32 ± 0.57	<4.40*
cadmium	478 ± 19	4.0–13.4*
lead	34.5–115	<34.5
chromium	31.0–103	31.0–103
nickel	35.5–118	35.5–118
arsenic	<11.3	<11.3
selenium	<17.5	<17.5

E-cigarettes in Nevada

- As of 2015 legislative session some age restriction for purchase not for use.
- **NOT covered under Nevada Clean Indoor Air Act.**
- **NO** restrictions on advertising.
- **NOT** taxed as tobacco products.
- **NO** tobacco retailer license required to sell e-cigs in Nevada.
- **NO** local control.
- Numerous NV businesses and organizations have voluntarily implemented restrictions on the use of e-cigs indoors and outdoors.
- Added e-cig use question to Nevada's 2013 BRFSS, YRBS, BABY BEARS survey.
- 2015 YRBS to determine youth and e-cig prevalence.



E-cigarette Public Health Concerns

- Re-normalizes the image of smoking
 - Allowed in places where smoking is not allowed
 - Unrestricted advertising
 - Mimics the smoking behavior
- May increase “dual” use
- May be a gateway to cigarettes and other tobacco products.
- Long term health effects are unknown



Brief Tobacco Use Intervention

Using the 3A Approach

The AHRQ recommends healthcare providers conduct brief tobacco use interventions, which includes the following steps:

1. Ask (about tobacco use)
 2. Advise (client to quit)
 3. Assist (in quit attempt by educating client on dangers of tobacco use and referring client to 1-800-QUIT-NOW for further assistance) (AHRQ, 2014).
- **Since 2006 SNHD and partners have trained over 30,000 healthcare providers in the above approach.**
 - **In the past, the above steps were good enough.**
 - **CDC is requiring that funded programs do more.**

ASK: Tobacco Use Status

Rather than asking patients **Do you smoke cigarettes ?** The question in the EHR could be modified as follows:

Do you use tobacco products such as?

Cigarettes

Electronic Vapor Products (e-cigarettes)

Cigars

Hookah

Pipe

Chew

Other _____

As more people are switching or using dual types of tobacco products, we are under pressure to make sure that more than smoking cigarettes is captured. Additionally, immigrants from other countries are using nontraditional tobacco products as well.

Assure that Nevada Tobacco Quit line is included in Discharge Education



- The Nevada Tobacco Quitline offers FREE telephone-based service to Nevada residents 13 years or older.
- Hours of Operation: Every day 4 am – 10 pm (PST).
- **Free 12 week supply** of Nicotine Replacement Therapy (NRT) for uninsured clients , supply **mailed to clients home**, counseling and support provided while people are becoming non-tobacco users.
- **Free 8 week supply** of NRT- provided to Medicaid clients
- **Free 2 week supply** of NRT- provided to privately insured clients
- **Fast, Free telephonic** access to trained tobacco cessation experts that can assist with quitting the use of all tobacco products including e-cigarettes.

Advise clients to call from a 702 area code phone:

- 1-800-QUIT-NOW (1-800-784-8669)
- Services available in Spanish and other languages
- 1-855-DEJELO-YA (1-855-335-3569)

Nevada Cessation Behavior

Nevada 2016 Adult Tobacco Survey

Table 6. Smoking Cessation Behavior and Attempted Methods among Tobacco Users in the Past Year

ADVISED TO QUIT DURING DOCTOR'S VISIT IN THE PAST YEAR

50.2%

CESSATION BEHAVIORS*	SMOKING TOBACCO	SMOKELESS TOBACCO
Tried to Quit in the Past Year	45.8%	30.6%
CESSATION METHODS USED IN THE PAST YEAR**	SMOKING TOBACCO	SMOKELESS TOBACCO
Stopping on own/Willpower	95.7%	100.0%
Nicotine replacement	28.3%	0.0%
Other methods	22.9%	24.9%
Other prescription medication	13.1%	0.0%
Switching to smokeless tobacco	12.2%	Not Applicable
Tried 1-800-QUIT-NOW	10.2%	0.0%
Herbal/Homeopathic medicine	4.3%	0.0%
Group Counseling	0.0%	0.0%

*Of those who reported using tobacco products.

**Of those who reported they tried to quit within the past year.

Referral sources to state Quitline (7/1/15-6/30/16)

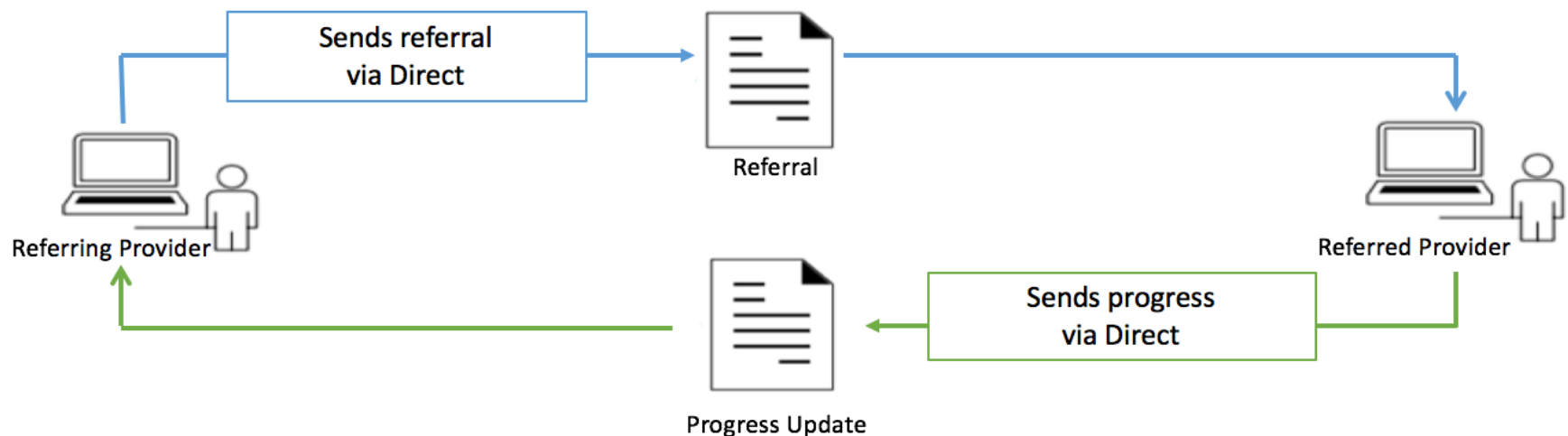
#1 Television

#2 Relative-Family-Friend

#3 Health care provider

Connecting Your Patients with the Nevada Tobacco Quitline

- Once a patient's referral is received, a Quitline counselor reaches out to the patient and attempts to enroll him or her in the Quitline program.
- This electronic loop of information from referral to care coordination assists you in providing the best care and support for your patient.
- This referral loop also meets the Transition of Care Meaningful Use objective. Research shows that even brief intervention by physicians and other clinicians can significantly improve cessation rates, and Quitline referral provides a quick, convenient way for time-strapped physicians to offer an effective, free solution for patients.



Free Materials

Quit cards: Distribute quit cards to each client (double sided Spanish/English)

Posters: Place posters in waiting areas (available English/Spanish)

If you require additional quit cards or posters, please email:

Regional Contacts:

azzarelli@snhdmail.org Southern Nevada
kseals@washoecounty.us Washoe County
Swartgow@carson.org all other areas of Nevada

Calling could double your chance of successfully quitting tobacco

1-800-QUIT-NOW

(1-800-784-8669)
or enroll online at www.nevadatobaccoquitline.com

Get fast, **FREE** access to trained tobacco cessation experts.



1-800-QUIT-NOW
Nevada Tobacco Quitline

Call 1-800 QUIT NOW
for FREE assistance quitting

WHEN SMOKERS QUIT

Health Benefits of Quitting Smoking:

- 20 MINUTES AFTER QUITTING**
Your blood pressure drops. The temperature of your hands and feet increases to normal.
- 8 HOURS AFTER QUITTING**
The carbon monoxide level in your blood drops to normal.
- 24 HOURS AFTER QUITTING**
Your chance of a heart attack decreases.
- 2 TO 3 MONTHS AFTER QUITTING**
Your circulation improves and your lung function increases up to 30%.
- 1 TO 9 MONTHS AFTER QUITTING**
Coughing, sinus congestion, fatigue and shortness of breath decrease.
- 1 YEAR AFTER QUITTING**
The risk of heart disease is half that of a smoker's.
- 5 YEARS AFTER QUITTING**
Your stroke risk is reduced to that of a nonsmoker's.
- 10 YEARS AFTER QUITTING**
The lung cancer death rate is about half that of a smoker's. The risk of cancer of the mouth, throat, esophagus, bladder, kidney and pancreas decreases.
- 15 YEARS AFTER QUITTING**
The risk of heart disease is that of a nonsmoker's.





NEVADA
Wellness

1-800-QUIT-NOW

Nevada Tobacco Quitline

Health Care Provider

English

OR

Español

[Home](#) | [Just Looking](#) | [Enroll Now](#)

Hello. [Sign In](#) or [Enroll today.](#)



Taking your first steps toward becoming tobacco free.

Get Healthy Clark County .org

- ABOUT US
 - BLOG
 - APPS
 - Powered by the Southern Nevada Health District
 - SEARCH
- GET MOVING BE SAFE EAT BETTER **LIVE TOBACCO FREE** MANAGE YOUR RISK COMMUNITY TOOLS
- QUIT SMOKING HEALTH CARE PROVIDERS OTHER TOBACCO PRODUCTS SMOKE-FREE HOUSING TOBACCO PREVENTION RESOURCES
- TOBACCO PREVENTION PROGRAMS SMOKE-FREE MEETING DIRECTORY TOBACCO FREE PUBLIC PLACES



LIVE TOBACCO FREE

See how a smoke-free lifestyle is possible through cessation resources, smoke-free housing, preventive programs and more.



SMOKE-FREE HOUSING DIRECTORY



SMOKE-FREE MEETING DIRECTORY



E-CIGARETTES

VivaSaludable .org



En el punto de mira

- Caminando Alrededor de Nevada**
Registre su actividad física diaria usando este programa en línea.
1-800-784-8669
- ¿Le interesa dejar de fumar?**
Tenemos recursos disponibles que le pueden ayudar...
- Viva Saludable Blog**
Un blog interactivo para divulgar información relacionada a la vida saludable.
- Letreros de No Fumar**
Descargue letreros gratis que dicen "No Fumar" para su hogar o negocio.
- El Reto de Nutrición**
Registre su consumo diario de frutas y vegetales usando este programa en línea.
- El Reto de Un Verano Libre de Soda**
Anímese a tomar el reto marcando cada día que no tome soda.

Medios de Comunicación

Viva Libre de Tabaco

El fumar cigarrillos es la causa principal de muerte prevenibles en los Estados Unidos y es responsable de más de 480,000 muertes cada año.

Adoptar una vida libre de tabaco ayuda a prevenir las enfermedades crónicas, mejora el funcionamiento de los pulmones, reduce el riesgo de enfermedades asociadas con el humo de segunda mano y también ahorra dinero.

En La Mira

- Letreros de No Fumar**: Baje los Letreros de "No Fumar" para su negocio y hogar.
- Formulario de Queja**: Llene el formulario de queja en línea para reportar una violación de la ley NCAIA.
- ¿Le interesa dejar de fumar?**: Tenemos recursos disponibles que le pueden ayudar...

Permanezca Conectado

- Contáctenos
- Enviar página por correo electrónico
- Imprimir página
- Blog

1-800-784-8669

Smoke-free Apartment & Meeting Directory

Apartment Insight Magazine Ad



IS YOUR MONEY GOING
UP IN SMOKE?

SMOKING COSTS MORE THAN JUST THE SMOKER.

Secondhand smoke covers walls and other exposed surfaces with a dirty yellow residue. The estimated cost to clean and refurbish a smoking unit can run \$4,000-\$15,000; while a non-smoking unit is usually less than \$1,000. As a manager or owner of an apartment complex, you can save thousands of dollars in maintenance costs by implementing a smoke-free policy. Other benefits of smoke-free policies include:

- Attraction and retention of tenants
- Decreased smoking-related complaints
- Possible insurance rate decrease
- Reduced cigarette butt litter
- Reduced fire danger

If you own, manage or know about other smoke-free apartments in Clark County, call 702-759-1270 or email TobaccoProgram@snhdmail.org. You can also call for FREE signage.

GETHEALTHYCLARKCOUNTY.ORG



Smoke-free
Meetings

Smoke-free public and private multi-unit housing



Smoke-free/tobacco-free indoor and outdoor environments



How you can help

- Ask patient/client about tobacco use not simply asking if they smoke cigarettes
- Modify patient intake/EHR to reflect tobacco use questions rather than only smoking conventional cigarettes.
- Make changes in your sphere of influence:
 - Modify patient education forms to promote Quitline resource and inform patient that tobacco use of any form is harmful
 - Modify EHR intake to include tobacco use as a stand alone question
 - Consider using e-referral to Quitline
 - Consider establishing minimum distance policies and prohibiting use of all tobacco products indoors



Thanks Questions?

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Please feel free to call or email to discuss any of the items presented in further detail.

Acknowledgments and Resources

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