

We've come a long way, baby...but there's still a long way to go vs. cigarettes

By ACSH Staff — January 8, 2014



It was 50 years ago today (almost it was Saturday January

11th, 1964) when U.S. Surgeon General Luther Terry released [the report of his committee](#) ^[1] on Smoking and Health. The committee had been intensely vetted, even getting the OK of the tobacco industry, and half of whom were smokers (including the Surgeon General). The press conference was held on a Saturday to [buffer effects on the stock markets](#) ^[2]; the deliberations had been underway for almost two years by that time.

The effects were immediate and intense, with a significant plummeting of the smoking rate, although that didn't last too long. The cigarette makers fought back and rebounded to an extent, but the die was in fact cast: since that time, smoking rates in the U.S. and Europe have been in decline, faster initially and more gradually of late. The work of Dr. C. Everett Koop, the 13th Surgeon General of the United States, also played a key role in the declining smoking rates. Still, over 40 million Americans smoke, and over 400,000 die from smoking each year (most of whom were ex-smokers. Quitting is the best step to protect one's health, but the damage done by smoking does not disappear for years).

One of the key articles in *JAMA* was authored by ACSH advisor Dr. Theodore Holford of Yale, and colleagues. They studied the [impact of the SG report over the five decades](#) ^[3], and concluded that tobacco control was estimated to be associated with avoidance of 8 million premature deaths and an estimated extended mean life span of 19 to 20 years. Although tobacco control represents an important public health achievement, efforts must continue to reduce the effect of smoking on the nation's death toll. Not too many other public health interventions can be credited with that vast amount of benefit.

Of course, as these authors acknowledge as do all the others in *JAMA* (and here at ACSH), progress is wonderful, but the goal of reducing smoking-attributable death and disease is an ideal not yet in sight. As we've been advocating for years now, harm reduction via clean (or cleaner) nicotine delivery would help to reduce this toll, which has been predicted to rise to one-billion dead this century if current trends continue. Two articles discuss e-cigarettes as harm reduction tools but predictably, sadly, the authors fail to give valid objective commentary, choosing to adhere to conventional dogma rather than trying to promote sound science to change the dreary scenario of

smoking.

The CDC's Tom Frieden is so used to manipulating data regarding e-cigarettes he probably couldn't stick to the facts now, even if he wanted to, which he does not. In his piece, [Tobacco Control: Progress and Potential](#) [4], he continues to parrot the official party line of concern about the possible dangers of e-cigarettes, while blithely ignoring the fate of the millions of addicted smokers. And Legacy's David Abrams tries, in fact, to show some support for harm reduction, but winds up talking out of both sides of his mouth by calling for FDA regulation of e-cigarettes [assuming appropriate scientific studies are completed](#), [5] and he aims for the drug approval arm (CDER) to supply the regulation: meaning medicinal regulation, a process that would end the current market and send e-cigarettes into the arms of Big Tobacco.

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