Pregnant & Still Smoking: Better Way Needed To Quit

By Gil Ross — February 10, 2016

According to new data from the Centers for Disease Control, over 8 percent of pregnant women in America smoke. That's about one-half the overall smoking rate among adults but given the dire consequences for the fetus and baby, it's still way too high.

The habit is most prevalent during the first two trimesters: one-fifth of women who smoked during pregnancy quit by the third trimester.

Smoking while pregnant raises the risk to the baby of many neonatal and subsequent illnesses (for a partial list, see below).

Other major findings from the new data include:

- one in 10 women who gave birth in 2014 smoked in the three months before they got pregnant
- The highest rate of smoking during pregnancy occurred in American Indian or Alaskan Native women, 18 percent of whom smoked at some point while pregnant
- About 13 percent of women between ages 20 and 24 who gave birth last year smoked while pregnant, the highest prevalence of any age group
- Smoking during pregnancy was least common in California just 1.8 percent of women did so; (Note: the state has the lowest general smoking rate for its adult population)
- Smoking during pregnancy was highest in West Virginia, where 27.1 percent of women smoked during pregnancy; (for its adult population the state's general smoking rate is among the highest in the nation)
- Women who smoked during pregnancy did smoke fewer cigarettes as the pregnancy went on; on average, they smoked 13 cigarettes a day before becoming pregnant and nine cigarettes a day by the third trimester

While most people know that smoking is bad for your health, it's even worse when the adverse effects redound upon the fetus, newborn and infant as they do.

In ACSH's groundbreaking monograph, "Cigarettes: What the Warning Label Doesn't Tell You" (2003, second edition, which I co-edited) its Chapter 10, "Reproductive Effects of Smoking" by Dr. John Patrick O'Grady, professor of Ob-Gyn at Tufts, has these as the topic headings, which would
hopefully be enough to scare pregnant women off of their decision to smoke:

- Infertility
- Ectopic pregnancy
- Miscarriage
- Intrauterine growth retardation and low-birth weight
- Prematurity
- Stillbirth
- SIDS
- Various birth defects

These do not include later effects on the infant, toddler and child, such as a markedly increased risk of asthma and ear infections.

So then, given the omnipresent warnings about smoking, often aimed at pregnant women, why do so many still smoke?

The answer is superficially simple, yet actually frustratingly complex: smoking combustible cigarettes, with their deadly mixture of addictive volatile and solid ("tar") substances (especially nicotine), combined with the habitual/behavioral pattern of hand-to-mouth oral gratification, is an exceedingly difficult habit from which to escape. Add to that the belief that smoking helps to reduce weight gain (which may contain a morsel of truth), and the difficulties of quitting come into perspective.

Rather than more lectures and public health advisories, which they've likely seen and likely feel quite guilty about already, more effective aids to help them quit are what's desperately needed.

The current panoply of FDA-approved methods patches, gum and drugs (some of which are not advised during pregnancy anyway) fail more than nine times out of 10 attempts. The studies up till now on reduced-harm products (e-cigarettes and vaping devices) for non-pregnant smokers provide some optimism, but there are scanty or no data available for their usefulness nor safety for pregnant women. More such research is ongoing, however.

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