

## Clearing the smoke

Martin McKee

Malta should be congratulated as it takes its place alongside Ireland, Norway and New York in introducing regulations to safeguard the health of smokers as well as non-smokers. Its achievement should not be underestimated.

Like those that have gone before it, the government of Malta will have had to face many difficulties in bringing this legislation into force in the face of opposition from powerful lobby groups that have sought to block it. However, this is just the start; experience of Ireland in its struggle to introduce its ban gives us some idea of the amount of disinformation we can expect. For example, the tobacco industry and its front organisations predicted that Irish pubs would empty when the ban was introduced. Yet, as any visitor to Dublin will see, they are as busy as ever and surveys conducted by the Irish Office of Tobacco Control found that, after the ban, 71 per cent of people questioned had visited a pub in the preceding fortnight, an increase from 68 per cent beforehand. The percentage of smokers was unchanged, at 74 per cent. As this example shows, it is now clear we have been misled by the tobacco industry for decades.

So what is the truth about smoking bans?

The tobacco industry has long said one thing in public and another in private. One of the most notorious examples was in 1994 when the chief executives of seven of the largest tobacco companies testified to the US Congress that nicotine was not addictive even though their own internal documents clearly recognised it was. Indeed, for years they had been manipulating the content of cigarettes to increase the nicotine kick so as to speed the onset of addiction among new smokers. The realisation of the extent of the deception has come about as a consequence of a series of lawsuits in the US in which the industry was required to release millions of pages of internal documents. These revealed the lengths it was prepared to go to distort the scientific evidence. Since at least 1977 industry executives from different companies would meet, often in secret, to discuss ways of keeping alive the illusion that there was genuine scientific controversy about whether tobacco was harmful. They employed various techniques.

Advertising, such as a campaign arguing that everything in life has a risk - even eating a biscuit - and second-hand smoke is no different. But they also engaged in a major programme to produce research that was usually misleading and occasionally fraudulent. Much of this effort was dedicated to undermining the growing evidence of the harm of passive smoking, mainly by arguing that non-smoking wives of smokers were in some way different from the rest of the population. The effort they went to was immense, although this is hardly surprising given how much they had to lose. For example, when the International Agency for Research on Cancer produced what many people regard as the definitive study on the harm caused by second-hand smoke, they spent \$4 million in a campaign to undermine it.

So how dangerous is second-hand smoke? The tobacco industry argues that the risks are overstated. In fact, we have known that it is dangerous for over two decades. In 1981 a Japanese researcher published a study showing that non-smoking wives of male smokers had a substantially higher risk of lung cancer than those women living with non-smokers. By the mid-1990s this finding had been confirmed in over 30 other studies, with several showing that the effects were not limited to lung cancer and that second-hand smoke was a major cause of heart disease. However, all of these studies assessed exposure to second-hand smoke indirectly, on the basis of the presence of smokers in the same household. The tobacco industry criticised this approach, even though it was likely to underestimate any effect. However, the most recent research overcomes this limitation, assessing exposure directly by measuring levels of a nicotine breakdown product in blood samples. This showed that the danger was far greater than had been suspected, increasing the risk of coronary heart disease in non-smokers with the highest levels of exposure to other people's smoke by about 60 per cent and this was after all the usual risk factors had been taken into account.

What is more, we now know that studies in animals conducted secretly by the tobacco industry show that side-stream smoke, such as that from smouldering cigarettes in ashtrays, is even more harmful than directly inhaled smoke because of the lower combustion temperature involved.

Can we solve the problem of second-hand smoke by ventilation, as the tobacco industry argues? Much of the evidence they cite is their own, from studies guaranteed to give the results they want. In contrast, independent studies show that it requires fans blowing with the force of a wind tunnel to reduce exposure to safe levels. We need to remember that, just because the smell of smoke has gone, the danger may not have, as many harmful components of tobacco smoke are odourless. Indeed, the tobacco industry has worked hard to reduce the smell of environmental tobacco smoke for this reason.

Finally, will smoking bans in bars and restaurants reduce earnings and as a result increase unemployment? This is the industry's main argument. Again this is nonsense, unsurprisingly as the majority of people are already non-smokers and many avoid bars precisely because they are so smoky. In New York, in the nine months after the smoking ban was introduced, sales tax receipts on food and drink increased by 12 per cent and the hospitality industry took on several thousand new employees.

The reason why so many people believed that the opposite result would occur is clear from a systematic study of research on the economic effects of smoking bans, undertaken by researchers at the University of California in San Francisco. The researchers found 97 studies that had looked at this issue. Every one of the 37 studies that found a fall in sales had been funded by the tobacco industry or was written by consultants known to have industry links. Few of these studies had appeared in a scientific, peer-reviewed journal. None of the 60 independent studies found an adverse effect.

So given that most potential visitors to Malta are non-smokers, we can expect that regulations banning smoking in public places and limiting smoking in places of entertainment will attract more, not fewer, people to these establishments.

Smoking kills about 360 Maltese every year. Then there are the many more who are disabled by emphysema, heart disease and stroke. Many of those who die do so because of exposure to other people's smoke. And, given that most smokers want to quit anyway, a ban would give them the impetus to do so. The tobacco industry will use every opportunity to argue against this happening, to which we should respond: "Why on earth should we believe anything they say?"

Malta can boast of being in the forefront of the international smoke-free movement. May other countries soon follow suit.

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