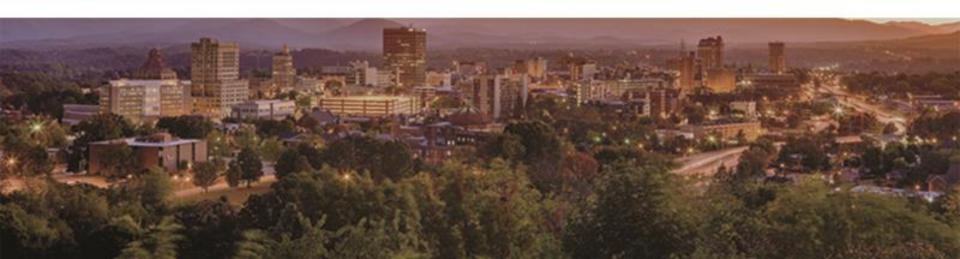


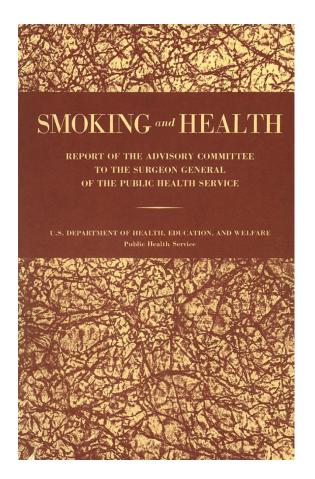


Updates on Tobacco Prevention and Control for the Justus Warren Heart Disease and Stroke Task Force Sally Herndon, MPH

November 17, 2016



The Health Consequences of Smoking: 50 Years of Progress A Report of the Surgeon General



The Health Consequences of Smoking—50 Years of Progress

A Report of the Surgeon General



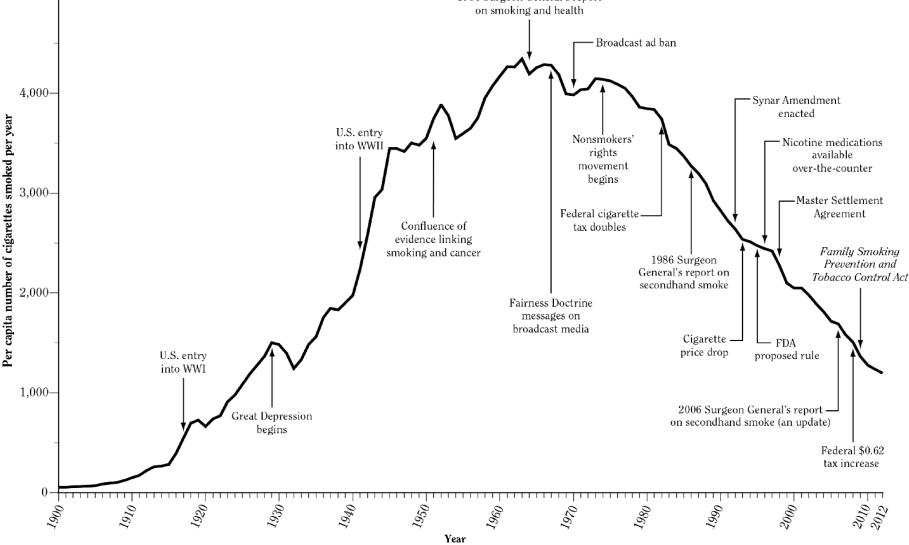
U.S. Department of Health and Human Services

2014



1964

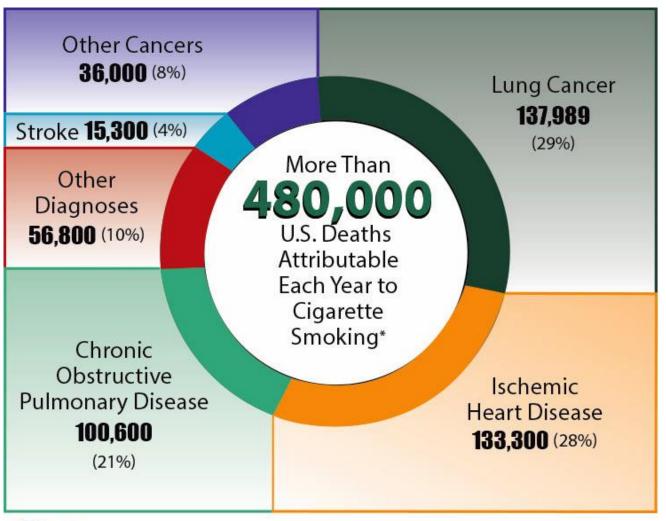
Figure 2.1 Adult* per capita cigarette consumption and major smoking and health events, United States, 1900-2012 5.000 -1964 Surgeon General's report on smoking and health Broadcast ad ban 4,000enacted U.S. entry Nonsmokers' into WWII rights movement begins 3,000-



Sources: Adapted from Warner 1985 with permission from Massachusetts Medical Society, ©1985; U.S. Department of Health and Human Services 1989; Creek et al. 1994; U.S. Department of Agriculture 2000; U.S. Census Bureau 2013; U.S. Department of the Treasury 2013.

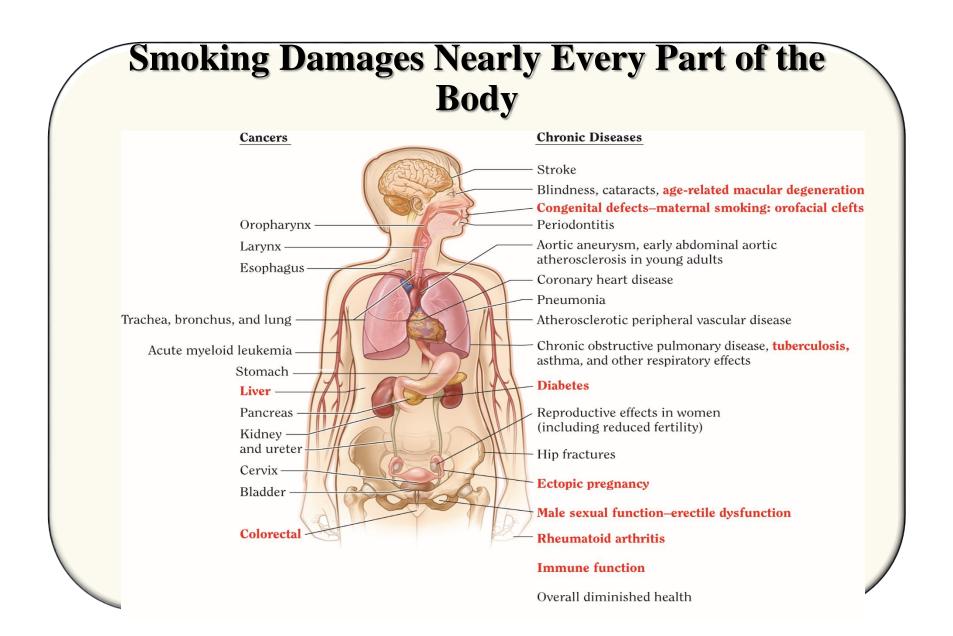
Adults ≥ 18 years of age as reported annually by the Census Bureau.

The Toll of Smoking (Does Not include the Added Toll of Secondhand Smoke)



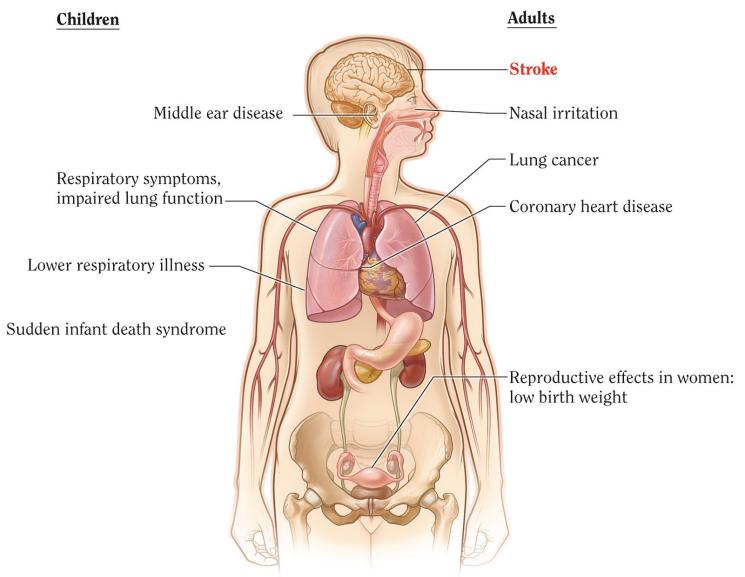






Source: The health consequences of smoking – 50 years of progress: a report of the Surgeon General. – Atlanta, GA. : U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.

There is No Safe Level of Secondhand Smoke Exposure



The Burden of Tobacco Use and Secondhand Smoke Exposure in NC

Tobacco use is the #1 cause of preventable death in North Carolina (and the U.S.)



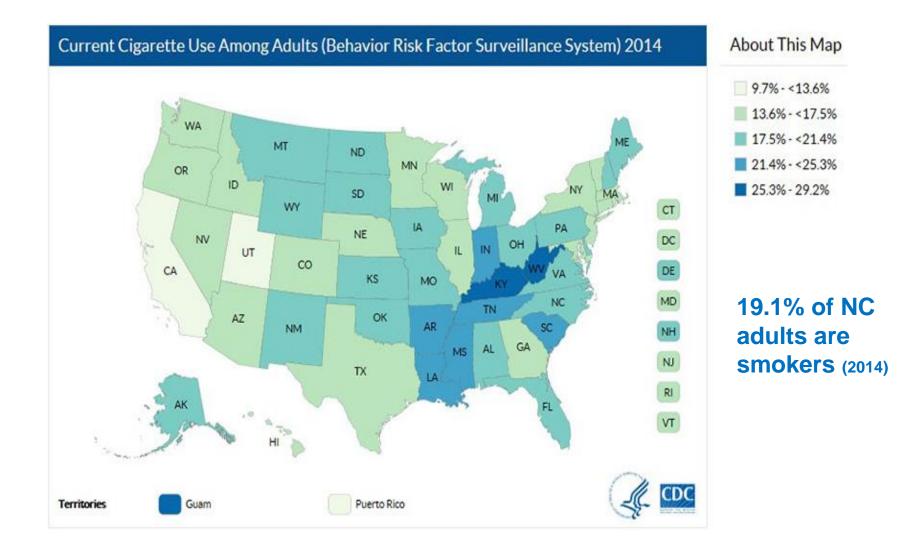
Smoking costs North Carolina \$3.81 billion per year in health care costs

Including \$931 million in Medicaid costs. There is an additional annual cost of \$293 million from health problems due to secondhand smoke.

Who is Still Using Tobacco?



Population Data on Tobacco Use

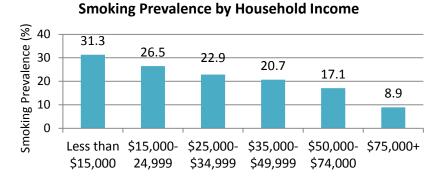


LOW SOCIOECONOMIC STATUS = Higher risk for smoking

US

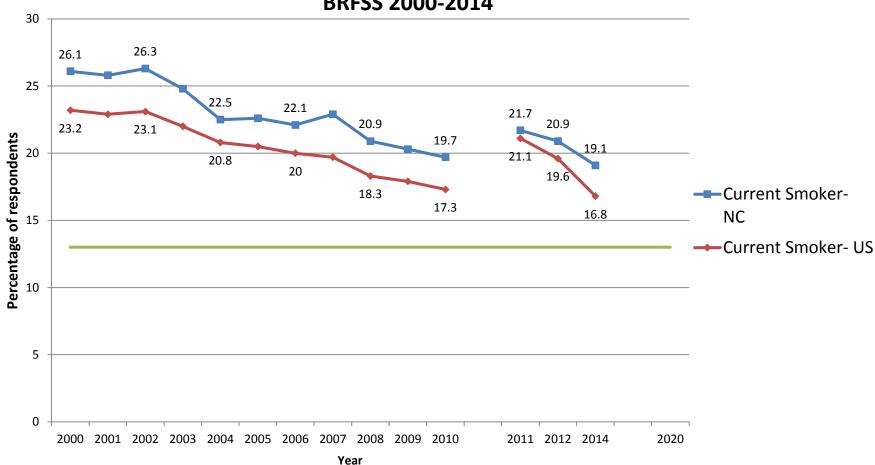
Income Status	Current Smoking Prevalence (%)
Below poverty level	26.3
At or above poverty level	15.2

NC



Education Level	Current Smoking Prevalence (%)
Less than high school	22.9
GED	43.0
High school graduate	21.7
Some college	19.7
Associate degree	17.1
Undergraduate degree	7.9
Postgraduate degree	5.4

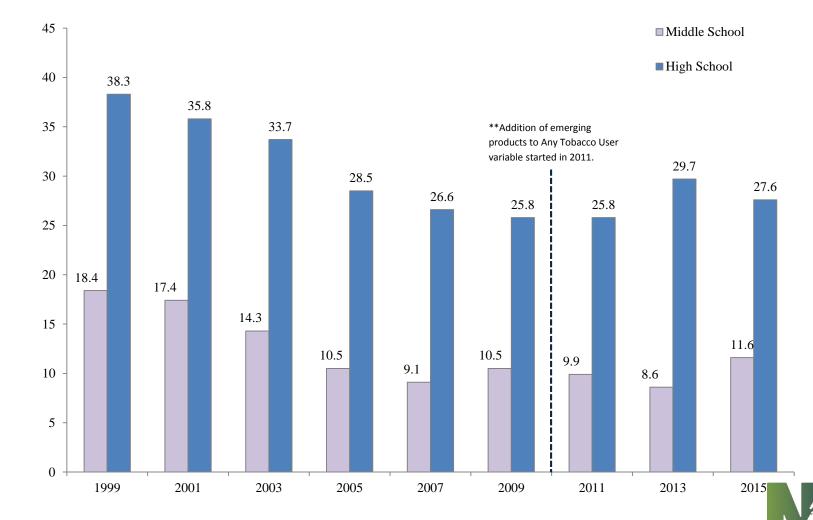
Education	Smoking Prevalence (%)
Less than high school	27.8
High school or GED	23.6
Some post-high school	19
College Graduate	8.5



Percentage of Smokers in North Carolina and the United States BRFSS 2000-2014

Note: The BRFSS methodology changed in 2011 so we can not compare data from 2000-2010 to 2011-2012. We have showed this change by including a break in the trend line.

Source: North Carolina Department of Health and Human Services, Division of Public Health, State Center for Health Statistics, North Carolina Behavioral Risk Factor Surveillance System (NC BRFSS), 2000-2014. http://www.schs.state.nc.us/schs/brfss/.



NC Middle & High School Current* Users of Any Tobacco Product: NC YTS, 1999-2015

Among Youth, E-cigarette Use May Lead to Conventional Cigarette Use

 High school students who had never smoked but reported ever using e-cigarettes at baseline were 2.7 times more likely to start using combustible tobacco after 1 year compared with high school students who never used e-cigarettes



 U.S. adolescents and young adults who had never smoked but used e-cigarettes at baseline were 8.3 times more likely to progress to cigarette smoking after 1 year than nonusers of e-cigarettes

Sources: Leventhal AM, Strong DR, Kirkpatrick MG, et al. JAMA 2015; Primack BA, Soneji S, Stoolmiller M, et al. JAMA Pediatr 2015



1-800-QUIT-NOW

Spanish Speaking 1-855-Dejelo-Ya An evidence-based telephone tobacco treatment service

- Consists of four treatment sessions
 - Special 10 treatment sessions and protocol for pregnant women
- Highly trained, professional Quit Coaches
- Available free to all North Carolina residents
- Accessible 24 hours a day, 7 days a week
- English, Spanish and interpretation service
- Integrated with an interactive web based tobacco treatment program



QuitlineNC More Demand, Fewer Resources



Funding Source	SFY 2011- 12	SFY 2012- 13	SFY 2013-14	SFY 2014-15	SFY 2015-16	SFY 2016-17
State Appropriations	\$2,828,965 ¹	\$1,898,000	\$1,200,000	\$1,200,000	\$1,100,000	\$850,000
Health and Wellness Trust Fund	\$931,057					
CDC Quitline Capacity Federal Grant ²		\$662,442	\$449,995	\$368,042	\$498,048	\$384,363
CDC ARRA Grant ³	\$170,000					
HRSA Federal grant ⁴		\$70,233	\$30,000			
CDC PHHSBG Federal Grant ⁵					\$103,422	
Medicaid FFP ⁶					\$100,000	\$350,000
State Health Plan Receipts (Funds can only serve State Health Plan Members)	\$899,997	\$600,000	\$941,336	\$1,259,357	\$959,902	\$617,486
TOTAL FUNDING	\$4,830,019	\$3,230,675	\$2,621,331	\$2,827,399	\$2,761,372	\$2,201,849
# of Tobacco Users Treated+	21,725	16,507	13,218 (Reduced services to 2 weeks NRT, 4 calls)	14,890 (Reduced services to 2 weeks NRT, 4 calls)	16,368 (Reduced services to no NRT and 1 call for March-May)	15,586 ++ (Based on reduced services continuing in SFY 16-17)



For Further Information Contact:

Sally Herndon, MPH Branch Head (919) 707-5401 sally.herndon@dhhs.nc.gov

Jim Martin, MS Director of Policy and Programs (919) 707-5404 jim.martin@dhhs.nc.gov

