

SMOKELESS TOBACCO

Smokeless tobacco is tobacco that is not burned. It comes in many forms:

- ⇒ *Chewing tobacco*, that is placed between the cheek and gums;
- ⇒ *Snuff*, which can be sniffed if dried;
- ⇒ *Dip*, moist snuff that is used like chewing tobacco;
- ⇒ *Snus* (pronounced snoose), a tea-bag like packet of moist snuff that is placed between the upper cheek and gum; and
- ⇒ *Dissolvable* products, including lozenges, orbs, sticks, and strips
 - ◊ Snus, orbs, sticks and strips are all newer products that do not require spitting, so they can be used discreetly.

Nicotine in these products is absorbed through the lining of the mouth.

Dip and chew contain more nicotine than cigarettes.

- ⇒ Holding an average-size dip in your mouth for 30 minutes gives you as much nicotine as smoking three cigarettes.¹
- ⇒ A two-can-a-week snuff dipper gets as much nicotine as a one and one-half pack-a-day smoker.¹



At least 28 chemicals in smokeless tobacco have been found to cause cancers, including esophageal, mouth and pancreatic cancer.²

- ⇒ Constant exposure to tobacco juice also causes cancer of the pharynx, larynx, and stomach.
 - ◊ Users have an 80% higher risk of developing oral cancer than non-users, and these cancers can form within five years of regular use.³

Using smokeless tobacco increases your heart rate and blood pressure within a few minutes. This can cause a buzz or rush, but the rise in pulse and blood pressure also places extra stress on your heart.¹

Smokeless tobacco also causes gums to shrink, exposing the root of the tooth and increasing the risk of tooth decay and gum disease.



“...scientific evidence has unequivocally established that tobacco consumption and exposure to tobacco smoke cause death, disease and disability, and that there is a time lag between the exposure to smoking and the other uses of tobacco products and the onset of tobacco-related diseases”.

-World Health Organization

SMOKELESS TOBACCO, CONTINUED

Smokeless Tobacco Use in Connecticut



In 2011, the last year for which data is available, 5% of all high school students reported using smokeless tobacco:

9.4% of males, and 0.5% of females⁴

Among middle school youth, 2.1% of males and 1% of females reported using smokeless tobacco.

Smokeless tobacco use is significantly higher in grade 8 (2.7%) than in grade 6 (0.6%)

Among all Connecticut adults, use of smokeless tobacco products has increased from .74% in 2001 to 1.9% in 2012.⁵

Data suggests that smokeless tobacco is *not* substituting for smoking but is adding to the number of tobacco users and contributing to dual use of tobacco products.⁶

As more states implement clean indoor air policies, smokeless tobacco products are being marketed to cigarette smokers as a substitute that can be used when smoking is not an option.

⇒ From 1998 to 2008, the total advertising and marketing expenditures of the top five smokeless tobacco companies in the United States increased by 276 percent.⁶

REFERENCES:

- 1 "Smokeless Tobacco: A Guide for Quitting", NIH Publication No. 12-3270, National Institutes of Health, August 2012
- 2 National Cancer Institute, Fact Sheet, Accessed December 23, 2013; <http://www.cancer.gov/cancertopics/factsheet/Tobacco/smokeless>
- 3 "Smokeless tobacco and cancer"; Dr Paolo Boffetta MD, Prof Stephen Hecht PhD, Nigel Gray MD, Prakash Gupta MD, Kurt Straif MD *The Lancet Oncology* - 1 July 2008 (Vol. 9, Issue 7, Pages 667-675)
- 4 CT Department of Public Health, Ct School Health Survey 2011, Available at ct.gov/dph/tobacco [Stats and Reports]
- 5 Behavioral Risk Factor Surveillance Survey, data of 2012, CT Department of Public Health
- 6 Campaign for Tobacco Free Kids: www.tobaccofreekids.org; accessed December 24, 2013 "Smokeless Tobacco in the United States", June 15, 2012

Major League Baseball

Beginning with the 2012 season, Major League Baseball added a clause to player, manager, and coach contracts that they may no longer carry a tobacco tin or package in their uniforms during games, any time there are fans in the ballpark, during televised interviews, team-sponsored appearances, autograph signings and at other events where fans are present.

These changes were made both to protect the players' health and to help prevent youth initiation since kids see players as role models.

Use of smokeless tobacco has been banned in the Minor Leagues since 1993.

A study of professional baseball players found no connection between use of smokeless tobacco and player performance.¹

