

SMOKING CESSATION BY THE NUMBERS

Smoking Cessation:
A Report of the Surgeon General

About **34 million** U.S. adults currently smoke cigarettes.



▶ Smoking is the leading cause of preventable disease and death in the United States

▶ **480,000** Americans die from smoking each year, accounting for nearly 1 in 5 deaths



▶ **16 million** Americans live with a smoking-related disease

▶ Smoking-related death and disease cost the United States over **\$300 billion** each year



Smoking cessation improves health, saves lives, and reduces financial burden.

Quitting smoking:

- Reduces risk of premature death and can add as much as a decade to life expectancy
- Reduces risk for many adverse health effects, including reproductive health outcomes, cardiovascular diseases, chronic obstructive pulmonary disease (COPD), and 12 types of cancer
- Benefits people who have already been diagnosed with coronary heart disease or COPD
- Benefits people at any age, with greater benefits for those who quit earlier in life
- Reduces the financial burden that smoking places on people who smoke, healthcare systems, and society



MOST ADULTS WHO SMOKE WANT TO QUIT; MANY TRY TO QUIT AND EVENTUALLY SUCCEED IN QUITTING.

▶ **Nearly 70%** of adults who smoke say they want to quit



▶ Each year, **over 50%** of adults who smoke try to quit



▶ **3 in 5** adults who ever smoked have quit



EVIDENCE-BASED TREATMENTS WORK.

3 FORMS OF COUNSELING



individual



group



telephone

7 MEDICATIONS APPROVED BY THE FOOD AND DRUG ADMINISTRATION (FDA)

including 5 forms of nicotine replacement therapy (NRT) and 2 non-nicotine medications

▶ Combining counseling and medications can more than double the chances of successfully quitting

▶ Using combinations of NRT, such as long-acting NRT (patch) with short-acting NRT (gum or lozenge), can further increase the likelihood of quitting

▶ Text messaging and web-based cessation interventions can help people successfully quit smoking

EVIDENCE-BASED TREATMENTS ARE UNDERUSED.

Fewer than **1 in 3** adults who try to quit smoking use proven cessation treatments.

Coordinated action is needed at the clinical, system, and population levels to:

- ▶ Increase treatment delivery by integrating cessation interventions into routine healthcare
- ▶ Improve treatment access through comprehensive, barrier-free, and widely promoted insurance coverage of smoking cessation treatments
- ▶ Create environments that encourage people to quit smoking and make quitting easier by:
 - ▶ Raising the price of cigarettes
 - ▶ Implementing hard-hitting mass media campaigns
 - ▶ Implementing smoke-free policies
 - ▶ Requiring pictorial health warnings
 - ▶ Maintaining statewide comprehensive tobacco control programs

E-CIGARETTES ARE A CHANGING GROUP OF PRODUCTS AND FURTHER RESEARCH IS NEEDED ON THEIR POTENTIAL EFFECTIVENESS FOR SMOKING CESSATION.

- ▶ Research is uncertain on whether e-cigarettes, in general, increase smoking cessation.
- ▶ Some research suggests that using e-cigarettes containing nicotine is associated with greater smoking cessation compared to e-cigarettes that don't contain nicotine, and some research suggests that more frequent use of e-cigarettes is associated with greater smoking cessation than less frequent use.
- ▶ The FDA has not approved e-cigarettes as a quit smoking aid, and more research is needed on whether e-cigarettes are effective for quitting smoking and to better understand the health effects of e-cigarettes.

- ▶ E-cigarettes are not safe for youth, young adults, pregnant women, as well as adults who do not currently use tobacco products.
- ▶ In order for adult smokers to achieve any meaningful health benefits from e-cigarettes, they would need to fully switch to e-cigarettes and stop smoking cigarettes completely.
- ▶ Among those who have switched completely, the ultimate goal should be to also stop using e-cigarettes completely to achieve the maximum health benefit.

