



Support HB 259

Why Secondhand Smoke Should be Eliminated from NC's Worksites & Public Places

Secondhand Smoke Kills. According to the US Surgeon General, there is **NO** safe level of exposure to secondhand smoke.¹

- Nonsmokers exposed to secondhand smoke have been shown to have many of the same tobacco-related diseases as active smokers. Secondhand smoke has been shown to increase nonsmokers' risk of heart disease, stroke, and cancer.²
- Every year secondhand smoke causes the deaths of 35,000 Americans.² In North Carolina, 1,220 to 2,180 adults, children and babies die each year from others' smoking.³
- As little as thirty minutes of exposure can trigger a heart attack in someone with heart disease or risk factors for heart disease.⁴ The Centers for Disease Control and Prevention (CDC) warns, "...all patients at risk of coronary heart disease or with known coronary artery disease should be advised to avoid all indoor environments that permit smoking".⁵

North Carolina Citizens Support Smoke-Free Policies. According to an Elon poll⁶ (Sept. 06):

- 86% of North Carolinians agree or strongly agree that employees in North Carolina should be able to work in a smoke-free environment;
- 64.7% of respondents support or strongly support a law in NC that would not allow smoking in restaurants & bars;
- 79.2% agree that restaurant employees in NC should be able to work in a smoke-free environment.

Smoke-Free Policies are Good for Business.

- No rigorous, scientifically conducted study has found negative economic impact from smoke-free policies; some, in fact, have found an increase in restaurant and bar sales following local or statewide restrictions on smoking in public places.⁷
- According to the Society of Actuaries, the cost of secondhand smoke to the US economy is nearly \$10 billion a year, ranging from medical bills to lost hours on the job.⁸
- The EPA estimates that smoke-free restaurants can expect to save about \$190 per 1,000 square feet each year in lower cleaning and maintenance costs.⁹

Smoke-Free Policies Save Health Care Costs.

- Most smokers want to quit and smoke-free policies help smokers quit smoking.¹⁰
- Smoking costs in North Carolina are \$2.46 billion in direct medical costs. Smoking-attributable health care costs to the Medicaid Program are \$769 million annually.³
- According to the American Society of Actuaries, the total annual direct medical costs of secondhand smoke nationally was estimated to be \$5 billion in 2005.⁸ The estimated annual cost of direct medical costs due to secondhand smoke exposure in North Carolina is \$143,036,292.¹¹

All North Carolina Workers Deserve a Safe, Smoke-Free Workplace.

HB 259 will protect a majority of NC workers from the harmful effects of secondhand smoke. North Carolina has enacted many laws to protect the health and safety of workers—it only makes sense that we extend these policies to include protection from the known dangers of secondhand smoke.

Vote YES! on HB 259

For more information, contact NC Alliance for Health at 919-463-8328 or ncalliance@heart.org.

- ¹ U.S. Department of Health and Human Services. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General—Executive Summary*. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006.
- ² National Cancer Institute. *Health Effects of Exposure to Environmental Tobacco Smoke*. Smoking and Tobacco Control Monograph No. 10. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, National Cancer Institute; 1999.
- ³ Campaign for Tobacco-Free Kids "The Toll of Tobacco in North Carolina" Fact Sheet, downloaded March 1, 2007 at <http://www.tobaccofreekids.org/reports/settlements/toll.php?StateID=NC>
- ⁴ Sargent, RO, Shepard, RM and Glantz, SA Reduced incidence of admissions for myocardial infarction associated with public smoking ban: before and after study. *BMJ* 2004 328: 977-980.
- ⁵ Pechacek, TF and Babb, S *How acute and reversible are the cardiovascular risks of secondhand smoke?* *BMJ*. 2004 Apr 24;328(7446):980-3.
- ⁶ Elon University Poll, Institute for Politics and Public Affairs, October 3, 2006. Downloaded March 1, 2007 at: <http://www.elon.edu/e-web/elonpoll/100306.xhtml>
- ⁷ Scollo, M., Lal, A., Hyland, A., Glantz, SA. Review of the quality of studies on the economic effects of smoke-free policies on the hospitality industry. *Tobacco Control*, 12: 13-20, 2003.
- ⁸ Behan, D.F.; Eriksen, M.P.; Lin, Y., "Economic Effects of Environmental Tobacco Smoke," Society of Actuaries, March 31, 2005.
- ⁹ Samet, J.; Bohanon, Jr., H.R.; Coultas, D.B.; Houston, T.P.; Persily, A.K.; Schoen, L.J.; Spengler, J.; Callaway, C.A., "ASHRAE position document on environmental tobacco smoke," American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE),2005.
- ¹⁰ Taskforce on Community Preventive Services. Recommendations Regarding Interventions to Reduce Tobacco Use and Exposure to Environmental Tobacco Smoke. *Am J Prev Med* 2001; 20 (2S): 16-66.
- ¹¹ North Carolina Department of Health and Human Services, Tobacco Prevention and Control Branch, March 1, 2007.