



# European News Bulletin

European Network for Smoking and Tobacco Prevention

Combining efforts for effective tobacco control in Europe

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## Foreword from ENSP Secretary General

Dear Reader,

First of all, the ENSP Secretariat would like to express its thanks for the very positive comments we have received on the new format of the ENSP European News Bulletin and the new subscription procedure, which started on 1 March 2011.

The ENSP European News Bulletin features European tobacco control news, announcements, events, publications and other relevant topics. The ENSP Secretariat compiles the ENB for you on a weekly basis (whenever possible) and sends it directly to your mail box, thus saving you time for your direct tobacco control activism and keeping you informed about developments throughout Europe. The ENSP European News Bulletin is currently the only regular compilation of information specific to tobacco control in Europe.

We are eager to improve our services to tobacco control advocates and all your comments are welcome.

In return, as expressed in our motto *Combining efforts for effective tobacco control in Europe*, the ENSP Secretariat also needs your modest financial support to help maintain and develop our information services, for which we regrettably no longer receive co-funding from the European Commission.

Thus, should you wish to continue receiving the ENSP European News Bulletin, we invite you to consult our website ( <http://www.ensp.org/node/462> ) without delay for more details and to renew your subscription by 1 April 2011.

Working together to save lives,

Francis Grogna

## **BELGIUM: General smoking ban in hospitality sector starting 30 June**

*The Constitutional Court annuls the exceptions to the smoking ban in the hospitality sector. Smoking will only be allowed in separate designated smoking rooms, as from June 30.*

So far the smoking ban applied only to hospitality venues serving meals, such as restaurants, cafes and taverns.

Cafes that sell only prepackaged foods (crisps, etc.), were exempted from the ban. For these venues, the smoking ban would become applicable only from 2014.

Both supporters and opponents of the smoking ban were dissatisfied with the legislation currently in force and the Flemish League against Cancer (VLK) asked the Constitutional Court

to strike down the exceptions.

The Flemish League won as the Court considered that the current law is unconstitutional and now annuls all exceptions. A general smoking ban will be enforced in Belgium from June 30.

The Flemish League against Cancer and the National Coalition against Tobacco said they were pleased with the Court ruling.

Source: De Standaard, 15 March 2011

[http://destandaard.be/artikel/detail.aspx?artikelid=DMF20110315\\_093](http://destandaard.be/artikel/detail.aspx?artikelid=DMF20110315_093)

Related articles:

Algemeen rookverbod in horeca vanaf 30 juni, De Morgen, 15 March 2011

<http://www.demorgen.be/dm/nl/993/Gezondheid/article/detail/1236181/2011/03/15/Algemeen-rookverbod-in-horeca-vanaf-30-juni.dhtml>

La clope au café, c'est terminé, Le Soir, 15 March 2011

<http://www.lesoir.be/actualite/belgique/2011-03-15/la-clope-au-cafe-c-est-termine-828458.php>

La cigarette bannie des cafés, Le Soir, 16 March 2011

<http://www.lesoir.be/actualite/sciences/2011-03-16/le-11h02-la-cigarette-bannie-des-cafes-828529.php>

Tabac au café une loi stupide part en fumée, Le Soir, 16 March 2011

<http://www.lesoir.be/debats/editos/2011-03-16/tabac-au-cafe-une-loi-stupide-part-en-fumee-828504.php>

Des Mesures urgentes nécessaires, Le Soir, 15 March 2011

<http://www.lesoir.be/actualite/belgique/2011-03-15/des-mesures-urgentes-necessaires-828478.php>

## **BELGIUM: expands smoking ban to all cafes, casinos**

Belgium's top court decided Tuesday to widen the country's smoking ban in public spaces to cover all cafes and the kingdom's nine casinos from July 1.

Smoking has been banned in work places, restaurants and pubs that serve food since 2009, while temporary exemptions had been granted to casinos and cafes that only serve snacks such as crisps and peanuts.

The law had called for the exemptions to end sometime between January 1, 2012 and January 1, 2014, but the Flemish Anti-Cancer League asked Belgium's constitutional court to strike them down.

The court decided to lift the exemptions but gave establishments until June 30 to "adapt to the general smoking ban."

The judges ruled that the government failed to prove that pubs would be harmed by a general smoking ban, saying that drawing distinctions between establishments was actually harmful to competition.

The court also stated that the protection of the health of employees and non-smokers should apply to casinos even though they serve a "specific" clientele.

Source: AFP, 15 March 2011

[http://news.yahoo.com/s/afp/20110315/afp\\_belgiumtobaccohealth](http://news.yahoo.com/s/afp/20110315/afp_belgiumtobaccohealth)

## **HUNGARY'S smoking ban may be delayed**

A proposal by governing party Fidesz to ban smoking in all closed public spaces from the middle of the year - including entertainment venues, restaurants and offices - was submitted at the end of last month. Over a dozen amendment motions have since been submitted.

According to Világgazdaság, one of the few amendment motions which have a chance is the one which would delay the introduction of the ban by half a year.

Source: Caboodle.hu, 10 March 2011

[http://www.caboodle.hu/nc/news/news\\_archive/single\\_page/article/11/hungarys\\_sm-1/?cHash=342ea6c473](http://www.caboodle.hu/nc/news/news_archive/single_page/article/11/hungarys_sm-1/?cHash=342ea6c473)

## **IRELAND: 6,500 deaths every year linked to smoking**

This shocking comparison by the Irish Heart Foundation is a wake-up call to smokers wanting to quit today — Ash Wednesday and national No Smoking Day.

Smoking-related illness accounts for the loss of 6,500 lives every year — about 18 people dying every day.

"We know it is not easy to stop smoking. Nicotine is a highly addictive drug but our message is that it's never too late to stop and it is about finding a way that suits you," said its chief executive, Michael O'Shea.

A recent survey of more than 13,000 people in Britain found that while over 60% want to quit, over half of them found it difficult to go a day without smoking.

Source: 9 March 2011

<http://www.irishexaminer.com/ireland/kfeyqlojidoj/rss2/>

## **MOLDOVA: „We're fed up of fumes!!!” - Underwear for Moldovan deputies**

As the Moldova state institutions appear to be devoid of potency and of capacity to implement the Moldovan legislation on tobacco and smoking control, "Young and Free" decided to draw attention of the authorities, by offering to each Deputy in Parliament underwear. On the panties fabric the words "The impotence of the law no. 278 from 14.12.2007 gives us headaches. We've HAD ENOUGH!" are printed.

The underwear, which was made individually according the panties size of each Deputy, was offered to every lawmaker on 10 March 2011, just before the start of Parliament plenary session.

Each of the panties was accompanied by a set of leaflets containing provisions on tobacco control and smoking in public places that are not respected in Moldova, as well as a personal letter to Parliament in its quality of a body that can make inquiries to representatives of the executive, to seek explanation from the Government on compliance of the legislation in this area.

Since 2006 "Young and Free": Training Resource Centre, in partnership with colleagues from the Coalition of NGOs Promoting Tobacco Control Policies, are advocating for tobacco control in Moldova and for a state's greater accountability for the citizens health.

*Despite the fact that:*

- the Republic of Moldova has a *Law on tobacco and tobacco products* (last modification – on 14.12.2007),
  
- since the moment that *the WHO Framework Convention on Tobacco Control (FCTC)* came into force (thanks' to civil society involvement) in Moldova, two years have passed,

*In almost all public places throughout Moldova people are smoking.*

*No resolute measures to establish a framework for compliance with the Law on tobacco, or the FCTC are taken by institutions responsible for the functioning of tobacco and smoking control legislation.*

*Therefore, "Young and Free", in collaboration with the Association "Youth for the right to live" decided to protest in an original way emphasizing that active and passive smoking affects reproductive health, births, child health and oncological disease.*

For more info please visit:

<http://www.tineriliberi.md/index.php?mod=News&id=72>

## **NORWAY: Tobacco display bans: Philip Morris vs Norway in front of the EFTA Court**

This is one of the first legal challenges brought against the most recent tobacco control policy: display ban of cigarettes. Its outcome is expected to indirectly determine also the legality of the first display ban adopted within the EU (in EIRE) and to shape the ongoing reform of the EU tobacco products directive.

In an attempt to cut impulse buys of tobacco products and to further reduce smoking rates, five countries (Australia, Canada, Iceland, Ireland and Norway) have recently banned the display of tobacco products at the point of sale.

As with many tobacco control policies, both the scientific basis and the legality of display bans are questioned today. This is certainly the case for plain packaging, as we have recently reported here and here.

A more detailed analysis of the pending EFTA case (E-16/2010) is forthcoming in issue 2 of the European Journal of Risk Regulation, which is expected by next June.

As the first empirical evidence about the public health effectiveness of display bans begins to emerge (the Icelandic measures dates back 2001), Philip Morris recently took the Norwegian state to court in an attempt to overturn the law banning the display of cigarettes in stores. In Norway, since January 2010, cigarettes have been banished to closed cases, while cigarette dispensers may no longer display brand labels.

Source Alberto Alemanno Blog, 6 March 2011

<http://www.albertoalemanno.eu/articles/display-ban-of-tobacco-products-philip-morris-vs-norway-in-front-of-the-efta-court>

## **TURKEY: Cigarette consumption down in Turkey in 2010**

The ban on smoking in indoors in Turkey began to have an impact on the consumption of cigarettes in Turkey.

The amount consumed in 2010 went below 100 billion cigarettes for the first time in many years in Turkey.

According to figures compiled by the Tobacco and Alcohol Market Regulatory Authority (TAPDK), Turks consumed 93.3 billion cigarettes in 2010. The amount of cigarettes consumed in Turkey in 2009 was 107.5 billion.

Source: World Bulletin, 16 March 2011

<http://www.worldbulletin.net/?aType=haber&ArticleID=71059>

## **UK: Comprehensive tobacco plan a victory for public health, says heart charity**

The Coalition Government has announced details of its new Tobacco Control Plan and the British Heart Foundation is pleased to see the plan includes a range of measures which will help protect people from the dangers of smoking.

The plan includes implementing important legislation prohibiting the display of tobacco in large shops in England from April next year and all other shops from April 2015.

The Coalition Government has also announced it will consult on plans to introduce plain packaging for cigarettes across the UK by the end of the year. Under the proposal, cigarette packaging would be plain-coloured and show simply the product name, brand and health warnings.

We're pleased to see the Government will defend the ban on cigarette vending machines due in October because we've been fighting hard to make sure this ban goes ahead.

Betty McBride, Director of Policy and Communications at the British Heart Foundation, said: "The Coalition Government has been under enormous pressure from a tobacco industry hell-bent on derailing important legislation banning tobacco displays in shops. Today is a victory for health campaigners and show of strength from Health Secretary Andrew Lansley.

Source: Medical News Today, 10 March 2011

<http://www.medicalnewstoday.com/articles/218673.php>

## **UK: Tobacco industry still glamorising smoking, government warns**

*Further curbs on TV, films and internet under consideration as promoters skirt advertising ban*

Further curbs on the portrayal of smoking on television, in films and on the internet are to be considered by the government, which said the tobacco industry continued "to find ways" of promoting products despite legislation banning advertising.

The Department of Health in England promised to "continue to work" to reduce the depiction of smoking and tell regulators and the entertainment industry to consider what more could be done.

Guidelines produced by Ofcom, the UK communications regulator, say smoking should generally not be shown before the 9pm TV watershed and should never be glamorised or condoned.

Source: The Guardian, 10 March 2011

<http://www.guardian.co.uk/society/2011/mar/09/tobacco-rebuke-glamorising-smoking-media>

## **STUDY: New 'dissolvable tobacco' products may increase risk of mouth disease**

The first study to analyze the complex ingredients in the new genre of dissolvable tobacco products has concluded that these pop-into-the-mouth replacements for cigarettes in places where smoking is banned have the potential to cause mouth diseases and other problems. The report appears in ACS's Journal of Agricultural and Food Chemistry.

John V. Goodpaster and colleagues point out that the first dissolvable tobacco products went on sale in 2009 in test markets in Indianapolis, Ind., Columbus, Ohio, and Portland, Oregon. The products contain finely-ground tobacco and other ingredients processed into pellet, stick, and strip forms that are advertised as smoke and spit-free. Health officials are concerned about whether the products, which dissolve inside the mouth near the lips and gums, are in fact a safer alternative to cigarette smoking. Goodpaster and colleagues note the possibility that children may be accidentally poisoned by the nicotine in these products. "The packaging and design of the dissolvables may also appeal to children, and some dissolvables, such as Orbs, may be mistaken for candy," the report states.

The researchers' analysis found that the products contain mainly nicotine and a variety of flavoring ingredients, sweeteners, and binders.

"The results presented here are the first to reveal the complexity of dissolvable tobacco products and may be used to assess potential health effects," said Goodpaster, noting that it is "therefore important to understand some of the potential toxicological effects of some of the ingredients of these products." Nicotine in particular, he noted, is a toxic substance linked to the development of oral cancers and gum disease.

Source: Eurekalert, 16 March 2011

[http://www.eurekalert.org/pub\\_releases/2011-03/acs-nt031611.php](http://www.eurekalert.org/pub_releases/2011-03/acs-nt031611.php)

## **STUDY: Emphysema found in blood may help you quit smoking**

So you smoke cigarettes on a regular basis with no plans to quit.

Lung cancer and respiratory ailments could be looming, but how do you know? A new blood test is being developed that detects the early development of emphysema well before symptoms occur and provide some form of peace of mind. Not all smokers develop emphysema, but finding out far in advance may just be the wakeup call you need.

Dr. Ronald G. Crystal, chairman and professor of genetic medicine and the Bruce Webster Professor of Internal Medicine at Weill Cornell Medical College and chief of the Division of Pulmonary and Critical Care Medicine at New York-Presbyterian Hospital/Weill Cornell Medical Center says:

"We know, from other studies, that smokers who learn from objective evidence that their health is in danger are much more likely to quit. That is the only thing that will help them avoid this deadly disorder."

*Source: The American Journal Respiratory and Critical Care Medicine*

Article: Medical News Today, 12 March 2011

<http://www.medicalnewstoday.com/articles/218986.php>

## **EVENT : UN Summit on Non-Communicable Diseases (NCDs)**

NCDs are chronic diseases that are not contagious. They account for 63% (35 million) of all deaths worldwide. These NCDs cause the highest number of deaths worldwide, and are the focus of the upcoming UN Summit:

- heart disease and stroke;
- cancer;
- respiratory diseases, such as asthma and chronic obstructive pulmonary disease (COPD);
- diabetes.

The top risk factors for NCDs are:

- tobacco use (the leading risk factor for NCDs);
- alcohol use;
- inadequate or poor nutrition;
- lack of exercise.

The UN Summit on Non-Communicable Diseases (NCDs) takes place at the UN headquarters in New York from 19 to 20 September 2011. The Summit is the biggest and best opportunity to put NCDs on the global agenda and to ask for:

- a global commitment to prevent NCDs;
- resources for NCD interventions;
- governments to be accountable on NCD progress;
- accelerated implementation of the Framework Convention on Tobacco Control;
- inclusion of NCDs in the UN's next Millennium Development Goals, slated for 2015.

We need advocacy now, in the months leading up to September. It is critical to ensure that NCDs receive the global attention and resources that they require.

Please use the resources available at <http://www.1500aday.org> / to encourage your Head of State to attend the UN Summit on NCDs.

<http://www.ensp.org/node/575>

## **Possible European-level initiative on the protection of workers' health from environmental tobacco smoke (ETS) at the workplace.**

The European Commission, responding to a resolution of the European Parliament, has developed draft options for new policies to protect workers from exposure to environmental tobacco smoke at the workplace.

The Commission (DG for Employment, Social Affairs and Inclusion) has appointed GHK Consulting Ltd to assess the potential impacts of these options.

The study, which will finish in summer 2011, will examine how the options interface with existing controls in Member States and the prospective health, economic and other impacts. The final report will inform the Commission's engagement with social partners.

More details of the project are available at <http://www.etsimpactassessment.eu/>

## **European Parliament: Report on reducing health inequalities in the EU (2010/2089(INI))**

The European Parliament has adopted a resolution where it says that everybody should have access to healthcare systems and affordable healthcare. The specific needs of vulnerable groups such as women, older patients, undocumented migrants, ethnic minorities, need to be taken better into account. Life expectancy has been shown to vary across EU Member States by 14.2 years for men and 8.3 years for women, says the resolution. Also within countries, groups of different education levels and social situations have widely differing health prospects.

Source: European Parliament, February 2011

More info is available at <http://www.ensp.org/node/574>

## **Pfizer Press Release : Governments need to improve smoking cessation services, smokers say**

**Healthcare professionals urge better education for Doctors to help smokers quit -**

Embargoed until 15.00 hours Thursday 17 March 2011

Over 78 million smokers in Europe want to quit,<sup>1</sup> but half (50%) of those surveyed who have tried to quit rate smoking cessation services as inadequate, poor or unacceptable, according to new research released today.<sup>1</sup>

Amongst healthcare professionals (HCPs) surveyed, 87% believe this support for smokers should be provided by primary care physicians.<sup>2</sup> However, over half of physicians (55%) believe primary care HCPs lack the educational support to deliver these services effectively.<sup>2</sup>

These findings form part of research commissioned by Pfizer, which examines attitudes to smoking and smoking cessation amongst 2,482 HCPs, 20,010 smokers and 22,683 non-smokers across 20 European countries.<sup>1,2</sup>

Services and support are key to helping smokers quit and to helping governments who have signed up to the World Health Organization's Framework Convention on Tobacco Control (FCTC) meet their commitments to drive tobacco use down.<sup>3</sup> When it comes to investment in improving smoking cessation services there is strong support from HCPs, non-smokers and smokers alike. 68% of non-smokers and 51% of smokers surveyed across Europe believe governments should invest more in bringing smoker numbers down, rather than in treating the health problems resulting from smoking.<sup>1</sup> This is echoed by HCPs surveyed, 88% of whom believe it is the government's responsibility to improve infrastructure that supports smoking cessation.<sup>2</sup>

With just under half (48%) of smokers surveyed citing cost as the biggest barrier to seeking professional help to quit,<sup>1</sup> funding for services and treatments is needed to encourage smokers to access the support available. Four out of 10 smokers say funding of smoking cessation treatments would encourage them to access support services.<sup>1</sup> HCPs are also supportive of funding for smoking cessation treatments with over three quarters (77%) surveyed saying that smokers trying to quit should be reimbursed for clinically proven medications.<sup>2</sup>

Professor Luke Clancy, Chairman of the Tobacco Control Committee, European Respiratory Society (ERS) said: "Tobacco use is one of the biggest public health problems but stopping smoking is a significant challenge. Nicotine is highly addictive, similar to and in some ways more addictive than 'hard' drugs such as heroin or cocaine.<sup>4</sup> However studies show that even a brief conversation with a clinician could double a smoker's chances of quitting successfully.<sup>5</sup> If we're to drive down deaths from tobacco use we must respond to the call to action from HCPs for better education to improve the chances of a smoker quitting successfully when they utilise

these services.”

In an effort to reduce tobacco use, the EU and its Member States have signed up to the WHO's Framework Convention on Tobacco Control (FCTC).<sup>3</sup> The FCTC's Article 14, through its recently adopted guidelines, demands action to promote cessation of tobacco use and provide adequate treatment for tobacco dependence. Countries who have signed up to the FCTC therefore have a legal obligation to implement the recommendations of Article 14.

A landmark report, Europe Quitting: Progress and Pathways (EQUIPP) looks at how 20 countries across Europe are progressing in line with their Article 14 obligations.

It represents the views of over 60 European smoking cessation experts and is endorsed by the European Respiratory Society (ERS), the European Network for Smoking and Tobacco Prevention (ENSP), and The German Society for Pneumology. The report makes actionable recommendations at both an EU and country level for how improvements can be made.

Improved education for HCPs feature in the recommendations made by smoking cessation experts for every one of the 20 countries analysed, alongside other strategies to improve smoking cessation such as clinical guidelines, increased tobacco prices and reimbursement for interventions and treatment.

John Young, Regional President, EuCan Primary Care, Pfizer, who initiated and funded the EQUIPP report notes: “Europe has significant challenges to overcome to reduce the burden of sickness, premature death and the economic impact of smoking. In order to affect real change, policies that promote smoking cessation and provision of these services must be in place. The EQUIPP report provides evidence-based approaches from leading experts on how to tackle tobacco use.

We urge those who can effect policy change at a national level to implement the recommendations of the EQUIPP report and pave the way for progress in driving down tobacco dependence and use in Europe.”

**For further enquiries or to request an interview with an EQUIPP spokesperson contact:**

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## **Notes to Editors**

### **About the EQUIPP report**

Initiated and funded by Pfizer, the EQUIPP report has been written by Bridgehead International, an independent research agency which has developed the report through desk research and interviews with experts in the field of tobacco dependence, tobacco control and smoking cessation. Overseeing the structure and content of the report were four Editorial Partners – Prof Luke Clancy (BSc, MB, MD, PhD, FRCPI, FRCP(Edin), FFOMRCPI), Prof Witold Zatooski (MD, PhD), Dr Thomas Hering (MD) and Antonella Cardone, MS, MBA – four of Europe’s experts in smoking cessation and tobacco control.

In order to provide an up-to-date picture of the current status of smoking cessation services across Europe, as well as conducting desk research using PubMed, Cochrane reviews and various other internet resources, interviews were conducted with expert stakeholders in 20 countries. The countries were: Austria, Belgium, Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Luxemburg, Netherlands, Norway, Poland, Portugal, Spain, Sweden, Switzerland and the United Kingdom. Interviews were conducted from June to October 2010 with a cross section of stakeholders, representing NGOs involved in smoking cessation, healthcare professionals, health policy makers and those advising national governments, utilising a structured interview guide. Some broader, free ranging qualitative questions were also included. In total, 57 experts were interviewed; generally three interviewees per country.

The Editorial Partners have reviewed and endorsed the content of the entire report and its recommendations. The opinions and recommendations contained within are those of the Editorial Partners and should not be attributed to Pfizer.

## **About the FCTC**

The Framework Convention on Tobacco Control (FCTC) is the first international public health treaty and it has contributed to a change in public perceptions about the need for regulations, and given new impetus to efforts to control the harm caused by tobacco. The FCTC requires that signatories enact comprehensive legislation to, amongst other things, restrict exposure to second-hand smoke, raise tobacco taxes, reduce smuggling, restrict tobacco advertising, increase the health warnings on tobacco packaging, provide support for smokers who want to quit and make medications available to help them do so. The FCTC came into force in February 2005, and as of October 2010 it has been ratified by 172 countries.

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1 This research was conducted by InSites Consulting in February 2011 and funded by Pfizer Ltd. Consumer research was conducted using an on-line quantitative survey in 20,010 smokers and 22,683 non-smokers across 20 European countries. The countries were: Austria, Belgium, Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Luxemburg, Netherlands, Norway, Poland, Portugal, Spain, Sweden, Switzerland and the

United Kingdom

2 This study was conducted by GfK NOP HealthCare between December 2010 and February 2011 and funded by Pfizer Ltd. This study was conducted using an on-line quantitative survey among 2,482 healthcare professionals across 20 European countries. The countries were: Austria, Belgium, Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Luxemburg, Netherlands, Norway, Poland, Portugal, Spain, Sweden, Switzerland and the United Kingdom

3 World Health Organization. Conference of the Parties to the WHO Framework Convention on Tobacco Control. Fourth session Punta del Este, Uruguay, 15–20 November 2010. FCTC/COP/4/8

4 Nicotine Addiction in Britain – a Report of the Tobacco Advisory Group. London: Royal College of Physicians, 2000. Accessed online at: <http://www.rcplondon.ac.uk/pubs/books/nicotine/contributors.htm> Last accessed July 2010

5 Hughes JR. New Treatments for Smoking Cessation. *CA Cancer J Clin.* 2000; 50: 143 – 151

## **RESEARCH: Secondhand smoke raises risk of delivering stillborn babies or babies with defects**

A pregnant mother who does not smoke and breathes in secondhand smoke has a higher chance of delivering a stillborn baby or a baby with a defect, researchers from the University of Nottingham, England, revealed in the journal *Pediatrics*.

There is a 23% higher risk of delivering a stillborn baby and 13% higher chance of giving birth to a child with congenital birth defects.

It is important that expectant fathers who smoke either give up or smoke away from their pregnant partners, the researchers wrote. Researcher, Dr Jo Leonardi-Bee, said:

"Mothers' smoking during pregnancy is well-recognized as carrying a range of serious health risks for the unborn baby including fetal mortality, low birth weight, premature birth and a range of serious birth defects such as cleft palate, club foot and heart problems.

Dr Leonardi-Bee said: "What we still don't know is whether it is the effect of sidestream smoke that the woman inhales that increases these particular risks or whether it is the direct effect of mainstream smoke that the father inhales during smoking that affects sperm development, or possibly both. More research is needed into this issue although we already know that smoking does have an impact on sperm development, so it is very important that men quit smoking before trying for a baby.

Source: Medical News Today, 14 March 2011

<http://www.medicalnewstoday.com/articles/219056.php>

## **RESEARCH: Smoking and interstitial lung disease**

A team of researchers at Brigham and Women's Hospital (BWH) have found that approximately one out of every twelve adult smokers have abnormal lung densities present on chest computed tomography (CT) images suggestive of interstitial lung disease which is associated with substantial reductions in lung volumes. In addition, despite being positively associated with smoking, these lung densities were inversely not associated with emphysema. This research is published online on March 10th in the New England Journal of Medicine.

It is increasingly acknowledged that interstitial lung disease may evolve prior to the development of symptoms. Although it is known that smoking can cause some forms of interstitial lung disease, the prevalence of these chest CT scan abnormalities and their effect on lung volumes had been unclear. "This manuscript highlights the degree of lung volume reduction associated to previously unrecognized interstitial lung abnormalities in smokers," said Hiroto Hatabu, MD, and Ivan Rosas, MD of the Divisions of Radiology and Pulmonary/Critical Care Medicine at BWH.

Source: Medical News Today, 10 March 2011

<http://www.medicalnewstoday.com/articles/218751.php>

## **STUDY: Stopping smoking shortly before surgery is not associated with increased postoperative complications**

A meta-analysis of nine previous studies found that quitting smoking shortly before surgery was not associated with an increased risk of postoperative complications, according to a report that will appear in the July 11 print issue of Archives of Internal Medicine, one of the JAMA/Archives journals.

"Cigarette smoking has been implicated as a risk factor for postoperative complications across a spectrum of surgical specialties," the authors provide as background information. "Compared with nonsmokers, smokers who undergo surgery have longer hospital stays, higher risk of readmission, are more likely to be admitted to an intensive care unit, and have an increased risk of in-hospital mortality." They add that existing data do not provide clear advice on an optimal period for a patient to quit smoking before a surgical procedure.

In an accompanying editorial, Clara K. Chow, M.B.B.S., Ph.D., and P.J. Devereaux, M.D., Ph.D., from the Population Health Research Institute, McMaster University, Hamilton, Ontario, Canada, write that "while the review performed by Myers et al provides valuable information, it does not definitively answer the question raised."

'Physicians should ideally try to get their patients to stop smoking several months prior to their surgery. The appropriate advice regarding the optimal timing of smoking cessation for patients seen close to their scheduled surgery awaits further research. The magnitude of the problem (i.e., upwards of 70 million adult smokers worldwide undergo major surgery annually) highlights the need for large, high-quality, perioperative tobacco use studies.'

Source: Eurekalert, 14 March 2011

[http://www.eurekalert.org/pub\\_releases/2011-03/jaaj-sss031111.php](http://www.eurekalert.org/pub_releases/2011-03/jaaj-sss031111.php)

### **Launch 3rd European Tobacco Control Scale Progress in tobacco control in 31 European countries 2007-2010 Who will take the lead in the 3rd ranking?**

The results of the 3rd Tobacco Control Scale in Europe are being presented in a European

press event on Wednesday 23 March 2011. The press event will take place in the International Press Centre Nieuwspoord in The Hague, the Netherlands, and can be viewed online. The press event is planned a few days prior to the 5th European Conference on Tobacco or Health, to be held in Amsterdam, the Netherlands, 28-30 March 2011. This conference will be hosted by the Dutch Cancer Society and has been organised in collaboration with STIVORO, under the auspices of the Association of European Cancer Leagues.

The report describes the results of a survey of tobacco control activity in 31 European countries in 2010, using the Tobacco Control Scale (TCS). Countries were judged according to a scale of measures considered to be essential components of a comprehensive tobacco control programme. The following six policy measures were described by the World Bank:

1. price increases through higher taxes on cigarettes and other tobacco products;
2. bans/restrictions on smoking in public and work places;
3. better consumer information, including public information campaigns, media coverage, and publicising research findings;
4. comprehensive bans on the advertising and promotion of all tobacco products, logos and brand names;
5. large, direct health warning labels on cigarette boxes and other tobacco products;
6. treatment to help dependent smokers stop, including increased access to medications.

The results will be presented by Luk Joossens, Advocacy Officer of the Association of European Cancer Leagues (ECL) and co-author of the Scale.

You are cordially invited to view the press conference online at the [International Press Centre's website](#) starting at 14.00h CET.

Visit the following link to download the invitation and programme : <http://www.ensp.org/node/579>

## **OLAF: Huge Illegal Cigarette Factory Raided in Poland**

Plans by an international criminal gang to flood the EU market with millions of illegal cigarettes came to an abrupt end recently when Polish Police raided an illegal cigarette factory near to Warsaw, Poland. During the raid, the Polish Police arrested 32 people and seized cigarette making machinery and materials, including over 50 tonnes of cut tobacco. A consignment of nearly 5 million cigarettes, which had already been loaded on a lorry for distribution, was also seized.

*The raid was the result of investigations in several countries which were coordinated by the European Anti-Fraud Office, OLAF. Shortly after the illegal production facility was seized in Poland, 4 people were arrested in Germany and over 70 tonnes of tobacco destined for the factory were seized in Lithuania as part of the same operation.*

The Director-General of OLAF, Mr Giovanni Kessler, expressed his congratulations to the Polish Police and the Customs authorities in Germany and Lithuania for their achievements in this case. "This was an extensive criminal enterprise. The criminals could have produced around 120 million cigarettes with the tobacco which has been seized, representing potential losses to the EU taxpayer of €24 million, and there is no doubt that further deliveries of tobacco were planned. This operation clearly demonstrates the outstanding results that can be achieved through international cooperation". Mr Kessler went on to explain that the factory had been raided shortly after production had started. "This was a very large factory with considerable production capacity. If it had continued to run, losses to the EU and Member State budgets would potentially have been €6 million a week".

An estimated 10 billion euro in taxes and duties are lost to the budgets of the EU and Member States each year as a result of cigarette smuggling and counterfeiting.

For photos and video material courtesy of Polish police, please see: [http://www.policja.pl/portal/pol/1/63338/CBS\\_zabezpieczylo\\_50\\_ton\\_tytoniu.html](http://www.policja.pl/portal/pol/1/63338/CBS_zabezpieczylo_50_ton_tytoniu.html)

Source: OLAF, 15 March 2011

## **STUDY: Found lung cancer genes, blood test may be next**

Norwegian researchers have discovered genes that increase not only one's risk of lung cancer, but perhaps one's urge to smoke as well. Now these researchers are working on developing a blood test for lung cancer.

"Smoking is by far the largest risk factor for developing lung cancer," says Professor Frank Skorpen of the Department of Laboratory Medicine, Children's and Women's Health at the Norwegian University of Science and Technology (NTNU) in Trondheim. Professor Skorpen is among the researchers in a project studying genetic factors and treatments for lung cancer. The project receives funding under the National Programme for Research in Functional Genomics in Norway (FUGE), one of the Research Council's seven Large-scale Programmes.

The risk of contracting lung cancer is relatively small for non-smokers. But the genetic factor for lung cancer found by the NTNU researchers nearly doubles that predisposition.

"This is a common genetic variant," explains the professor. "Roughly 10 per cent of the population has inherited this variant on both alleles, from mother and father, so there are many people with an increased risk of developing lung cancer."

Source: Medical News Today, 12 March 2011

<http://www.medicalnewstoday.com/articles/218988.php>