

TOBACCO EXPOSURE AND USE ASSESSMENT

RATIONALE

Smoking remains a major public health issue. Since the first Surgeon General's report in 1964 more than 20 million premature deaths can be attributed to cigarette smoking.¹ Smoking has been causally linked to diseases of almost all organs of the body.¹ While smoking rates for adults and teens have decreased by half compared to rates in 1964, in the United States, 42 million adults and 3 million middle and high school students continue to smoke.² Young people are particularly susceptible to long term consequences and addiction. The younger a person is when starting to smoke the greater the chances of addiction.³

Early cardiovascular damage is seen in most young smokers. Those who are most sensitive die very young. Smoking reduces lung function and retards lung growth.³ A teen who smokes may end up as an adult with lungs that never have grown to full capacity, which increases the risk of chronic obstructive pulmonary disease.³ Of youth who continue to smoke, a third will die prematurely from smoking.³ More than 100,000 babies have died in the last 50 years from sudden infant death syndrome (SIDS), complications from prematurity, complications from low birth weight, and other pregnancy problems resulting from parental smoking.^{2(p1)}

Our youth are exposed to a wide range of tobacco products from cigarettes, cigars, pipes, bidis, kreteks, and smokeless tobacco. Smokeless tobacco in the United States includes chewing tobacco and snuff tobacco.¹ Different methods of nicotine transport are emerging such as hookahs or water pipes. The American Cancer Society also notes dissolvable tobacco, which comes in the form of strips, orbs, sticks and lozenges.⁴ All these products are detrimental to one's health. More recently electronic cigarettes, e-cigarettes, have come into fashion and are often marketed as safe. E-cigarettes are battery powered devices that provide nicotine and additives to the user in an aerosol.⁵ E-cigarettes not only contain nicotine but also an ingredient for aerosolizing and flavoring. Flavoring adds to the appeal for children and there has been accidental ingestion.⁶

Regulation is also an issue.⁶ In the United States from 2011-2012, experimentation and recent use of e-cigarettes doubled among middle and high school students which resulted in an estimated 1.78 million students using e-cigarettes by 2012.⁵ There is a form of electronic nicotine delivery devices called hookah pens, which are made to mimic other items such as marking pens or forms of makeup (mascara or lip gloss) and are therefore easy to hide from parents and teachers in plain sight. In addition, youth are sharing with each other ways to put other drugs into the reservoirs of these electronic products, such as hash oil. Recently the California Department of Public Health published a response to the Food and Drug Administration regarding the health concerns and dangers that e-cigarettes pose. The California Department of Public Health not only supports the Food and Drug Administration's proposition to regulate tobacco products such as e-cigarettes but also to provide additional guidelines to protect the public against the dangers.⁷

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SCREENING REQUIREMENTS

- Assess tobacco and nicotine exposure and use at each health assessment visit using a standardized and validated screening tool, such as the Hooked on Nicotine Checklist, as described in Bright Futures.
- Provide anticipatory guidance to patients and their parents/caregivers.
- Encourage tobacco abstinence. If already using, *encourage quitting and provide a list of resources to help quit.*

Bright Futures*

- Bright Futures, [Guidelines and Pocket Guide, 3rd Edition](#)
- Bright Futures [Adolescence Section](#) for risk reduction related to tobacco, alcohol and other drugs.
- Bright Futures section for promoting [mental health](#) as substance use and abuse can occur concurrently with a mental health issue.
- Utilize the [patient questionnaire to assess tobacco use](#).
- Utilize the [Hooked on Nicotine Checklist](#) (page 46) as described in the Tobacco Dependence Chapter of the History, Observation and Surveillance section of the Performing Preventive Services: A Bright Futures Handbook.

CONSIDERATIONS FOR REFERRAL TREATMENT AND/OR FOLLOW-UP

- Recommend quitting to parents and adolescents who smoke or use tobacco products. Refer smokers to tobacco cessation programs such as the California Department of Health Services quit line: 1-800-NO-BUTTS.
- Additional resources can be found at [California Smokers Helpline](#)
- Information about quitting from the [California Department of Public Health Tobacco Control Program](#) and [Help With Quitting](#)

Resources

- California Department of Public Health: 2015 [State Health Officer's Report on E-Cigarettes](#)
- [TobaccoFreeCA](#)
- Palo Alto Medical Foundation – Sutter Health [Hotlines for Teens](#)
- [California Tobacco Control Program](#)
- [KidsHealth](#)
- California Department of Health Services quit line: 1-800-NO-BUTTS.

References

- ¹ United States Department of Health and Human Services. [The Health Consequences of Smoking-50 Years of Progress: A Report of the Surgeon General](#). 2014. Accessed February 26, 2014.
- ² United States Department of Health and Human Services. [The Health Consequences of Smoking-50 Years of Progress: A Report of the Surgeon General. Fact Sheet](#). 2014. Accessed July 2, 2014.

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- ³ United States Department of Health and Human Services. [Preventing Tobacco Use Among Youth and Young Adults. Fact Sheet](#). Surgeon General. 2012. Accessed February 26, 2014.
- ⁴ American Cancer Society. [Questions About Smoking, Tobacco, and Health. Is Dissolvable tobacco safe?](#) Revised: February 13, 2014. Accessed July 2, 2014.
- ⁵ Centers for Disease Control and Prevention. [Notes from the Field: Electronic Cigarette Use Among Middle and High School Students-United States, 2011-2012](#). *Morbidity and Mortality Weekly Report (MMWR)*. 2013;62(35):729-730. Accessed May 8, 2014.
- ⁶ Cobb, NK, Byron, MJ, Abrams, DB and Shields, PG. ["Novel Nicotine Delivery Systems and Public Health: The Rise of the "E-Cigarette."](#) *American Journal of Public Health*. 2010;100(12):2340-2342. doi:10.2105/AJPH.2010.199281.
- ⁷ Chapman, R. [California Department of Public Health Response to US Department of Health and Human Services, Food and Drug Administration, Docket No. FDA-2014-N-1089, and RIN 0910-AG38](#). Accessed October 15, 2014.

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