“Tobacco use is the single most preventable cause of disease, disability and death in the United States, yet more deaths are caused each year by tobacco use than by all deaths from human immunodeficiency virus (HIV), illegal drug use, alcohol use, motor vehicle injuries, suicides and murders combined.”1,2,3 The Centers for Disease Control (CDC) estimates that 480,000 deaths per year are caused by tobacco products.1 This makes tobacco prevention a critical issue. Tobacco 21 has presented such an opportunity.

Tobacco 21 policies prohibit sales of all forms of nicotine to anyone younger than 21—the period of their lives when most smokers become addicted. As physicians, we see the health consequences of tobacco use every day in the patients we serve. We also see the addictive nature of nicotine, with smokers averaging several cessation attempts before quitting for good. Stopping this addictive habit before it starts promises to greatly enhance the health of the Kansas City region.

Tobacco 21 Delays Smoking Initiation

High school students report that many have had their first cigarette by age 12—some swipe them from their parents, some get friends to buy them illegally but most get cigarettes from older friends. In our area, 80% of high schoolers will turn 18 in their senior year and are legally able to purchase and share with younger friends. Smokers frequently transition from experimentation to addiction between ages of 18 and 21. Ninety-five percent of committed smokers have started before age 21.3 Neurodevelopmental research shows that adolescent brains are still maturing in the areas of pleasure seeking, impulse control, risk assessment and decision making. The U.S. Surgeon General report states that the younger the age of initiation, the greater the risk of nicotine addiction, heavy daily smoking and difficulty quitting.4

The Institute of Medicine Report, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products, through mathematical modeling, estimates a reduction in youth smoking of up to 25% with implementation of Tobacco 21 policies. Much of this effect is due to the reduction of social sourcing to younger teens.5

Tobacco 21 Policies Have Broad Public Support

The CDC conducted a public survey in 2013 that showed broad support of Tobacco 21 policies. Three fourths of adults favor Tobacco 21 policies including more than 70% of smokers.6 Raising the drinking age to 21 has reduced the number of alcohol-related fatalities and continues to have incredible public support.7

It Makes Good Business Sense

Tobacco Control reports that a smoker costs a private employer in the United States an extra $5,816 per year compared with a nonsmoker. These costs include direct medical, smoke breaks and increased days lost to illness.8 The website WalletHub estimates the total cost of a single smoking Missourian at $1.2 million in his or her lifetime.9

Tobacco 21 will not harm business in the short run—only 2% of national
cigarette sales are made to 18-20 year olds. Over the long term, declines in smoking will occur gradually, giving retailers time to adjust to the changing market conditions.\(^\text{10}\)

**LOCAL POLICIES ARE EFFECTIVE**

Leaders in Needham, Mass., wanted to affect the rate of youth smoking in their community. They increased the legal age for purchase of tobacco products in 2005. They saw a dramatic fall in the rate of youth smoking despite the fact that there were surrounding neighborhoods where purchase was still legal at age 18 (decline of 46% in Needham and 19% in surrounding communities). The effect lasted—13 years after institution of the effort, the Massachusetts Department of Health found the following:

- The smoking rate for adults in Needham is 8.0%. This rate is 56% lower than the overall rate for Massachusetts (8.0% in Needham compared to 18.1% statewide).
- The rate of smoking during pregnancy in Needham is 90% lower than for Massachusetts overall (0.8% in Needham vs. 7.9% statewide).
- Mortality from lung cancer is 24% lower among males and 33% lower for females in Needham compared to Massachusetts.\(^\text{11}\)

Currently 120 communities and the state of Hawaii have raised the age of purchase to 21.

**WHY INCLUDE VAPING PRODUCTS?**

Use of vaping products among teens has been increasing faster than the rate of cigarettes. Electronic cigarette use among American middle and high school students jumped to 13.4% in 2014 from 4.5% in 2013, according to the CDC.\(^\text{12}\) The long-term health effects have not been fully quantified, but the addictive nature of alternative nicotine delivery systems is clear. Public health officials are concerned because of data showing that students who initially were using only electronic nicotine delivery devices were more likely to transition to tobacco products by the six-month point.\(^\text{13}\) With more than 700 flavors, including tutti-frutti, sweet tart and gummy bear, these products are clearly targeted at young people.

**EFFORTS IN KANSAS CITY**

Amazing partners have come to the table to make Tobacco 21 happen in the greater Kansas City community, including chambers of commerce, insurers, school districts, health systems, providers and businesses. With this broad base of support, municipalities have found it easy to make this choice on behalf of their residents. Tobacco 21 ordinances have now been enacted in the Missouri cities of Kansas City, Independence and Gladstone, and in the Kansas communities of Kansas City, Olathe and Iola, covering more than 800,000 people. There are another five communities in the planning stages.

I applaud the leadership of the Kansas City Medical Society and the Kansas City community in addressing youth smoking before it begins.

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tempts, the rate has not been adjusted in 23 years. If either of these bad proposals pass, a meaningful increase in the future will be even that much harder. Proposal #1 would, if passed, add future burdens by challenging transportation funding. Proposal #2 would add future burdens by challenging early childhood health funding. Both initiatives appear to be cynical attempts to encumber needed and popular programs with a tobacco Trojan horse.

Because of the unique ability of tobacco taxes to effect health change, they need to be used wisely. The hopelessly flawed current proposals are a perfect example of situation in which passing something is worse than passing nothing. Putting it another way, it’s better to do nothing than to do something stupid.

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FOR MORE INFORMATION

Initiative petition language for each proposal: https://www.sos.mo.gov/elections/petitions


Food labeling (cont’d from pg. 13)


Tobacco 21 (cont’d from pg. 15)

REFERENCES


12. E-cigarette use triples among middle and high school students in just one year, April 16, 2015, CDC Media Releases 2015.