

NC's Smoke-Free Law Will Save Lives and Health Care Costs

- As of January 2, 2010,
 - 2.8 million workers, 69% of the workforce, will be protected by smoke-free policies.¹
 - 395,000 bar and restaurant workers will be able to go to work knowing that their hearts and lungs are protected by smoke-free policies.²
 - Millions more North Carolinians will be protected from short-term exposure when spending time in restaurants and bars.
- Studies have shown that smoke-free laws can reduce deaths and hospital admissions due to heart attack by 17%; In North Carolina, this would translate to a reduction of nearly 4,400 admissions and 1,100 deaths due to heart attacks.³ This will save NC more than \$48 million in health care costs.⁴
- Local communities now have authority to pass local ordinances restricting smoking in other indoor, public places to further protect additional workers & visitors from the dangers of secondhand smoke.

Smoke-Free Laws Won't Hurt Business

- No rigorous, scientifically conducted study has found negative economic impact from smoke-free policies in restaurants or bars; some, in fact, have found an increase in restaurant and bar sales following local or statewide restrictions on smoking in public places.^{5 6 7} Previous economic impact studies in North Carolina have shown no negative economic impact of smoke-free policies.⁸
- Customers prefer smoke-free restaurants, according to Zagat Survey; 77% of diners saying they'd eat out less if smoking were *permitted* in restaurants, and only 2% saying they'd dine out more.⁹
- Employees turn over, and associated costs like hiring and training, are not more likely to increase due to smoke-free laws.¹⁰ Smoke-free restaurants can expect to save about \$190 per 1,000 square feet each year in lower cleaning and maintenance costs.¹¹
- Nine out of 10 North Carolinians agree that all employees should be able to work in a smoke-free environment.¹²

The Cost and Impact of Secondhand Smoke Remains Too High in North Carolina

- The 2006 Surgeon General's Report on the Health Consequences of Involuntary Exposure to Secondhand Smoke found that there is no risk-free level of exposure to secondhand smoke.¹³
- As little as thirty minutes of exposure can trigger a heart attack in someone with heart disease or risk factors for heart disease.¹⁴
- Every year secondhand smoke causes the deaths of 35,000 Americans.¹⁵ In NC, more than 1,600 adults, children and babies die each year from others' smoking.¹⁶
- 1.3 million workers are not protected from exposure to secondhand smoke at work by voluntary policy, and there are significant disparities by the type of work that people do.^{17 18}
- It is estimated that North Carolinians spend \$288 million annually in health care costs due to exposure to secondhand smoke.¹⁹
- Tobacco use costs North Carolina taxpayers \$2.46 billion in direct healthcare costs (\$769 million in Medicaid expenses alone), and \$3.3 billion in lost productivity annually.²⁰

Everyone Deserves the Right to Breathe Smoke-Free Air!
Make All Worksites Smoke-Free.

References:

- ¹ This number is based upon application of data provided in Plescia et al, "Protecting Workers from Secondhand Smoke in North Carolina" NC Med J May/June 2005, Volume 66, Number 3 on the rate of workers who report smoke-free policies, to US Department of Labor statistics on labor distribution in NC, last updated March, 2008.
- ² NC Restaurant and Lodging Association, May, 2009.
- ³ This number is based upon application of data provided in 2002-2006 NC Crude and Age-Adjusted Hospitalization Rates (per 100,000 population) for Acute Myocardial Infarction as Principal Diagnosis by County of Residence. Prepared by NC DHHS State Center for Health Statistics 20NOV08. 2002-2006 Hospitalizations for Acute MI, ICD-9CM code: 410; Age adjusted using a 2000 Population Standard. This provides the average number of hospital admissions due to myocardial infarctions, or heart attacks, which was then applied to the estimated number of heart attacks caused by exposure to secondhand smoke, outlined in Parikh NI et al, Long Term Trends in Myocardial Infarction Incidence and Case Fatality in the National Heart, Lung, and Blood Institute's Framingham Heart Study. *Circulation*. 2009;119:1203-1210.
- ⁴ This number is based upon application of data provided in reference xi to estimated costs for treatment of heart attack, as outlined in Pfannenschmidt, S and Wansink D. North Carolina's Secondhand Smoke Healthcare Cost Burden, prepared by the NC Department of Public Health and Blue Cross Blue Shield of North Carolina, February, 2009.
- ⁵ 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.
- ⁶ Eriksen, M.; Chaloupka, F. "The Economic Impact of Clean Indoor Air Laws" *CA: A Cancer Journal for Clinicians* 57(6): 367-378, November 2007
- ⁷ Alamar, B., Glantz, S. "Effect of Smoke-Free Laws on Bar Value and Profits" *American Journal of Public Health* 97(8): 1400-1402, August 1, 2007.
- ⁸ Goldstein, A., Sobel, R. Environmental tobacco smoke regulations have not hurt restaurant sales in North Carolina. *North Carolina Medical Journal* 59(5): 284-288, September/October 1998.
- ⁹ Zagat Survey, LLC, "Zagat releases 2008 America's Top Restaurants Survey showing U.S. dining is getting greener, healthier and more casual," PRNewswire, October 24, 2007.
- ¹⁰ Thompson, E., et al. "Smoke-free Laws and Employee Turnover," *Economic Policy*, Online Early publication January 16, 2008
- ¹¹ "The dollars (and sense) benefits of having a smoke-free workplace," *Michigan Department of Community Health*, [2000].
- ¹² 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>
- ¹³ 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
- ¹⁴ Pechacek, TF and Babb, S *How acute and reversible are the cardiovascular risks of secondhand smoke?* *BMJ*. 2004 Apr 24;328(7446):980-3.
- ¹⁵ 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.
- ¹⁶ Campaign for Tobacco-Free Kids "The Toll of Tobacco in North Carolina" Fact Sheet, downloaded Jan 26, 2009 at: <http://www.tobaccofreekids.org/reports/settlements/toll.php?StateID=NC>
- ¹⁷ This number is based upon application of data provided in Plescia et al, "Protecting Workers from Secondhand Smoke in North Carolina" NC Med J May/June 2005, Volume 66, Number 3 on the rate of workers who report smoke-free policies, to US Department of Labor statistics on labor distribution in NC, last updated March, 2009.
- ¹⁸ Plescia et al, "Protecting Workers from Secondhand Smoke in North Carolina" NC Med J May/June 2005, Volume 66, Number 3.
- ¹⁹ Pfannenschmidt, S and Wansink D. North Carolina's Secondhand Smoke Healthcare Cost Burden, prepared by the NC Department of Public Health and Blue Cross Blue Shield of North Carolina, February, 2009.
- ²⁰ "The Toll of Tobacco in North Carolina" Campaign for Tobacco-Free Kids. Downloaded on October 27, 2008 at: <http://www.tobaccofreekids.org/reports/settlements/toll.php?StateID=NC>