

Advocating for raising the smoking age to 21

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Henry Ford Hospital pulmonologist Daniel Ouellette, M.D., who during his 31-year career in medicine has seen the harmful effects of smoking on his patients, advocates for raising the smoking age to 21.

He says the move would help curb access to tobacco products at an early age and lead to reductions in [smoking prevalence](#).

Dr. Ouellette also suggests that e-cigarettes, whose use among middle and [high school students](#) tripled from 2013 to 2014, are largely unproven as a smoking cessation tool. Their [potential health risks](#) are not yet known, though hospitalizations related to them have included pneumonia, congestive heart failure and seizure.

Dr. Ouellette is presenting talks on both topics at the American College of Chest Physicians' annual meeting Oct. 24-28 in Montreal.

"Most of my patients are diagnosed with emphysema or lung cancer at a relatively young age from smoking, despite the media attention given to the health risks of smoking and despite them knowing about those risks," says Dr. Ouellette, director of Henry Ford's Pulmonary Inpatient Service and a senior staff physician in the Division of Pulmonary and Critical Care Medicine.

"Cigarette smoking doesn't affect just smokers, it affects everyone. And we all pay for the health care costs."

According to the Centers for Disease Control and Prevention, smoking

causes one in five deaths in the United States, and is linked to cancer, heart disease, stroke, lung disease, diabetes and chronic obstructive pulmonary disease. An estimated \$170 million is spent annually for smoking-related medical care for adults, and more than \$156 billion in lost productivity is attributed to premature death and exposure to secondhand smoke.

In a Institute of Medicine released in March 2015, the authors of "Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products," concluded that increasing the age for tobacco products "will likely" prevent or delay initiation of tobacco use by adolescents and young adults. The report also said "adverse maternal, fetal and infant outcomes - including preterm births, low birth weight and sudden infant death - will also probably decrease due to reduced tobacco exposure in mothers and infants."

Given current smoking rates, says Dr. Ouellette, 5.6 million Americans under 18 will die in their lifetime from a smoking-related illness. National data show that 95 percent of adult smokers begin smoking before age 21. Research has shown that genetic factors may make quitting at an early age difficult, and that there's a strong correlation between young people smoking and [health risks](#) like depression, anxiety and stress, Dr. Ouellette says.

In June, Hawaii became the first state in the United States to raise the tobacco sale [age](#) to 21. At least 90 cities in eight states have followed suit, according to the Campaign for Tobacco-Free Kids.

Dr. Ouellette is skeptical about e-cigarettes and their use as a smoking cessation tool.

To date, he says, there's no medical evidence to show e-cigarettes are less harmful than [tobacco products](#). Four studies have found that e-

cigarettes are not effective for quitting smoking, Dr. Ouellette says.

"They're unregulated so we can't be sure what's in them. In some studies, it showed that the particulates may be comparable to that of a regular cigarette," Dr. Ouellette says. "They also come from China, which makes it hard to know who is manufacturing them."

Dr. Ouellette says the most effective way to quit [smoking](#) is a combination of proven nicotine replacement methods like the patch or gum, and counseling.

Provided by Henry Ford Health System

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