

Depression, cannabis use, and binge drinking are on the rise among US former smokers

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A new study in the *American Journal of Preventive Medicine* found that the prevalence of depression, cannabis use, and alcohol abuse increased among former smokers from 2005 to 2016 in the United States. Therefore, increases in these risk factors for relapse among former

smokers could threaten progress in reducing the prevalence of cigarette use.

"It's good news that as tobacco control efforts have been successful at reducing smoking, the proportion of former [smokers](#) among the US population is increasing. However, as our study demonstrates, more of them are now suffering from depression and engaging in [problematic substance use](#)," said lead investigator Renee D. Goodwin, Ph.D., Institute for Implementation Science in Population Health, The City University of New York; Department of Epidemiology, Mailman School of Public Health, Columbia University; and Department of Epidemiology and Biostatistics, Graduate School of Public Health and Health Policy, The City University of New York, New York, NY.

Conducted in 2018-9, the study investigated the prevalence of depression, [cannabis use](#), and alcohol misuse among former smokers ages 18 and older in the US from 2005 to 2016. Data were drawn from the National Survey on Drug Use and Health, an annual, nationally representative cross-sectional study. More than 67,000 individuals, aged 18 and over, participated in the study. It is the first national US study to focus on the prevalence and time trends of depression, marijuana use, and problematic alcohol use among former smokers.

During the study period, the incidence of major depression increased from 4.88 percent to 6.04 percent, cannabis use during the previous year rose from 5.35 percent to 10.09 percent, and alcohol binge drinking during the previous month went up from 17.22 percent to 22.33 percent among former smokers.

The results show that the profile of former smokers has changed over the study period. An increasing percentage of the US population who were ever smokers, no longer smoke (49.7 percent in 2016, compared to 44.4 percent in 2002). Former smokers are slightly more likely to be

male than female, married, and of non-Hispanic white ethnicity. In 2016 compared to 2002, former smokers were more likely to be older than 65, never married, have some college education, and incomes over \$75 thousand a year. More than half of them had also quit smoking for three years or more. Factors that may have affected the results are the increasing legalization, decreasing perception of risk associated with use, and reduced stigma of cannabis, which may sometimes be used by smokers trying to quit tobacco. However, the investigators note that when former smokers use it, they increase their likelihood of returning to tobacco.

"Because previous research has demonstrated that these factors put former smokers at greater risk of relapsing with tobacco (and relapse is a risk that lingers for decades), our study should signal an alarm for public health leaders and healthcare providers. The findings represent a looming threat to the progress that has been made in reducing the prevalence of cigarette use," Dr. Goodwin cautioned.

Dr. Goodwin noted that the findings should have bearing on ongoing tobacco control policy decisions, "Since it has been shown that depression and substance use may compromise abstinence, anyone designing community-based public information campaigns and engaged in clinical interactions with former smokers should be made aware that modifiable predictors of relapse are increasing among former smokers. As such, screening for these issues and referral to treatment should be high priorities. These are important steps for assuring growing and sustained abstinence among the US population, a trend with significant health and societal benefits."

More information: "Increasing Depression and Substance Use Among Former Smokers in the United States, 2002-2016," *American Journal of Preventive Medicine* (2019). [DOI: 10.1016/j.amepre.2019.05.014](https://doi.org/10.1016/j.amepre.2019.05.014)

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