

A complete ban on all smoking would not improve healthy life expectancy for 40 years

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The negative impact of smoking on health inequalities in the UK means even if smoking stopped tomorrow, the full health benefits would not be seen until 40 years down the line.

New research shows that the maximum improvement that could be expected from a complete cessation of smoking is only around 2.5 years rather than the full 6.3 years which separate smokers and those that have never smoked.

The research by the International Longevity Centre (ILC) and Bayes Business School, titled "Leveling Up—The Great Health Challenge," shows how [health inequalities](#), particularly smoking, impact the UK's health and working futures. The findings state that the UK Government's target of leveling up healthy life expectancy by five years by 2035 is unachievable, and can only be reached if much bolder policies are adopted.

The conclusions come ahead of the release of a Government white paper on health disparities, and the 2017-2022 Tobacco Control Plan—both of which are to be released this year—which aims to make England 'smoke free' by 2030. Most worryingly, the report says that even if all smoking ceased tomorrow, the impact could take 40 years to work through.

The report, led by Professor Les Mayhew of Bayes Business School, highlights that [life expectancy](#) has increased by more years than healthy years since 2001, with the time spent in ill health increasing as a result. Factors contributing to this include an [aging population](#), negative health behaviors such as smoking, and the success of the NHS in keeping people alive.

To put the research into perspective, smoking is the major cause of death and ill health in the UK. It is implicated in deaths from cancer, heart, and respiratory disease accounting for about 75,000 deaths a year in England and half a million hospital admissions (92,000 deaths UK-wide). It affects all ages: For example, the health of a 34-year-old smoker is the same as that of someone aged 40 who has never smoked.

The geography of smoking, and deaths associated to lung cancer, is also strongly correlated with health expectancy and with deprivation. The [local authorities](#) with the highest prevalence of smoking, as ranked by the Office for National Statistics on their smoking index, are Blackpool, Kingston upon Hull, Barking and Dagenham. Those ranked lowest are Richmond upon Thames and Windsor.

Professor Mayhew, Head of Global Research at ILC and Professor of Statistics at Bayes Business School (formerly Cass), said there is no silver bullet in untangling the web of how to solve this problem.

"The challenges involved in improving [healthy life expectancy](#) include the interconnected risk factors associated with smoking, such as tackling mental illness, drug abuse, obesity, poor housing, and deprivation among others. It means that while tackling [smoking](#) head-on is a welcome and necessary step, it is only the beginning of a much bigger journey towards leveling up."

"With differences of up to 15 years in health expectancy between the healthiest and least healthy areas, the scope to level up is definitely there—the policies just need to be much bolder in order to succeed."

More information: Report: [ilcuk.org.uk/levelling-up-the- ... at-health-challenge/](https://ilcuk.org.uk/levelling-up-the-...at-health-challenge/)

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