

A light green outline map of the state of Kentucky is centered on the page. The text is placed within the map's boundary.

**KENTUCKY PREFERRED  
EMPLOYER NETWORK**

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The screenshot shows a Windows Internet Explorer browser window displaying the website for the Kentucky Cabinet for Health and Family Services (CHFS). The browser's address bar shows the URL <http://chfs.ky.gov/dph/info/dpqi/hp/pen.htm>. The website header includes the Kentucky.gov logo, navigation links for 'KY Agencies' and 'KY Services', and a search bar. The main content area is titled 'KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES' and 'DEPARTMENT FOR PUBLIC HEALTH'. A navigation menu lists 'About CHFS', 'Contact Us', 'Forms and Documents', and 'Información en Español'. The breadcrumb trail reads: 'Home > Department for Public Health > Department Information > Division of Prevention and Quality Improvement > Health Promotions Branch > Preferred Employer Network'. The 'Preferred Employer Network' section features the Kentucky logo and a detailed text block explaining the network's purpose: 'With health care costs squeezing corporate profits, it is increasingly difficult to manage growth and overhead expenses. The unrelenting rise in health care costs is likely to continue to wreak havoc on the bottom line. A first step toward health care cost containment is to reduce tobacco use in Kentucky. Employers willing to assist their employees with tobacco cessation can reduce tobacco use in the workplace and improve the health and wellness of their employees.' Below this, it states: 'Tobacco dependency is the single most preventable cause of chronic disease and death in the United States, causing more than 435,000 deaths each year. Smoking puts both the smoker and the nonsmoker at risk. Tobacco use is a known cause of multiple cancers, heart disease, stroke, and complications of pregnancy, respiratory diseases and many other diseases.' The final paragraph reads: 'Despite these health dangers and the public's awareness of these dangers, tobacco use remains high. In the United States each year, \$75 billion is spent on healthcare as a result of smoking and exposure to secondhand smoke and \$82 billion is...'. To the right of the main text is a 'Related Content' sidebar with links to 'Tobacco Home', 'Tobacco Contacts', 'Tobacco Free Schools', 'Kentucky Tobacco Laws', 'Kentucky's Tobacco Quit Line 1-800-QUIT NOW', 'Tobacco Links', 'Kentucky Tobacco Data Reports', 'Tobacco Fact Sheets and Resources', 'Doctors, Dentist and Health Care Professionals', 'Medicaid/Medicare Cessation Benefits', and 'Coordinator Tools'. At the bottom of the sidebar is a button that says 'For help quitting tobacco'. The browser's taskbar at the bottom shows the Start button, an 'Inbox - Microsoft Outlook' window, and the current website window. The system clock in the bottom right corner shows '10:38 AM'.

*Tobacco use remains the leading preventable cause of death in Kentucky. This toolkit provides guidance for implementing the Preferred Network Employers initiative in the workplace.*

## Dear Employers:

We hope that you will take just a few moments to review the enclosed materials. We are confident you will find them helpful in adding tobacco cessation to your employee's health care benefits.

Tobacco dependency is increasingly recognized as the single largest cause of preventable chronic disease and death in Kentucky. Smoking puts the smoker and the nonsmoker at risk. Overwhelming evidence shows that quitting tobacco is the greatest single thing someone can do to lead a healthier and more productive life. More than 58% of tobacco users in Kentucky say they want to quit; many lack the resources they need to be successful.

Your employees look to you for their health coverage needs. Unfortunately, employees who use tobacco products drive up your costs in providing their health coverage. We have gathered resources to help you encourage tobacco cessation among your employees. The materials in this workbook are designed to provide you with evidence-based recommendations and tools for tobacco cessation treatment that will increase the likelihood of a successful quit attempt.

We also hope you will consider enrolling in the Preferred Employer Network. As a member of the Preferred Employer Network, you will receive proven, professional resources to assist your employees in quitting their addiction to tobacco. You will receive exclusive tobacco cessation services and materials, ongoing communications to keep you updated on the number of referrals your business makes to Kentucky's Tobacco Quitline, direct access to our Worksite Wellness Coordinator, plus sample materials to use to create a tobacco-free workplace.

Thank you again for reviewing this life changing initiative. Enroll today to take advantage of these resources.



# Kentucky Preferred Employer Network

## Collaborating for change

The Kentucky Tobacco Prevention and Cessation Program has partnered with the Kentucky Association of Health Underwriters (KYAHU) to help Kentucky employers encourage their employees to quit tobacco use and stay tobacco free. This Preferred Employer Network Toolkit will help employers create a safe environment for all employees and provide tips to support and encourage their employees who use tobacco products to quit by using proven tobacco cessation methods.

## Rising Health Care Cost

The health and well being of employees is a major factor for employers trying to control health care costs. A big step to containing those costs is to reduce tobacco use within your business or company.

Tobacco use dependency is the single most preventable cause of chronic disease and death in the United States, causing more than 435,000 deaths each year. Smoking puts both the smoker and the nonsmoker at risk. Tobacco use is a known cause of multiple cancers, heart disease, stroke, and complications of pregnancy, respiratory diseases and many other diseases.

Each year, \$75 billion is spent in the United State on healthcare as a result of smoking and exposure to secondhand smoke and \$82 billion in lost productivity in the workplace. Overall, 26% of adults in Kentucky smoke. We know that quitting tobacco use at any age can have positive results on an employee's health and productivity. In Kentucky, 58% of tobacco users report that they want to quit; however, many of those who are tobacco dependent lack the support they need to overcome their addiction.

## As a Preferred Employer Network Member

Becoming a Preferred Employer Network member is a cost effective way to reduce tobacco use in the workplace and improve the health and wellness of employees. Companies of any size will have access to the resources needed to begin helping those ready to quit tobacco. By completing the brief enrollment form, your business becomes connected to a statewide network of cessation specialists, health experts, and worksite wellness coordinator.

As a Preferred Employer Network member you receive:

- Materials to educate employees about tobacco use and quit resources.
- Ability to refer employees to Kentucky's Tobacco Quitline.
- Updates on new resources, research, and promotional materials.

Quarterly reports will be sent to Preferred Employer Network members and will include: the number of employees enrolled in counseling, quit attempts, and quit rates. Due to HIPPA regulation, specific employee data cannot be provided.

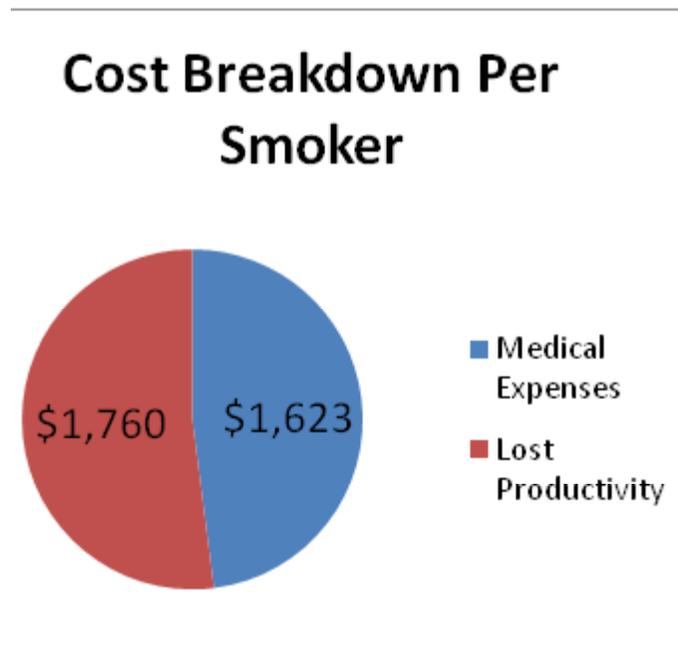
## Employers Pay a High Cost for Tobacco Use

### Financial Burden

The Centers for Disease Control and Prevention estimates the United States experiences \$97 billion in lost productivity annually from smokers who die prematurely. In addition, the economic cost of smoking is approximately \$96 billion per year in direct health care costs.

Annually, over \$1.2 billion is spent to treat Kentuckians for illnesses caused or made worse by their use of tobacco products. The amount is equal to \$300 per Kentuckian. Combined medical costs and productivity losses attributable to each pack of cigarettes sold are approximately \$10.08 per pack.

Cost Component	Total	Per Pack	Per Smoker
<b>Adult Expenditures</b>			
Ambulatory Care	\$270,111,896	\$0.48	\$297.90
Hospital Care	\$895,124,176	\$1.59	\$987.20
Rx	\$354,900,384	\$0.63	\$391.41
Nursing Home	\$135,661,580	\$0.24	\$149.62
Other Care	\$116,281,354	\$0.21	\$128.24
<b>Total</b>	<b>\$1,772,079,391</b>	<b>\$3.15</b>	<b>\$1,954.35</b>
Neonatal Expenditures	\$5,614,639	\$0.01	\$6.19
<b>Total Expenditures</b>	<b>\$1,777,694,030</b>	<b>\$3.16</b>	<b>\$1,960.55</b>



Tobacco users cost employers annually through lost production, secondhand smoke exposure, workers compensation and medical expenses. That's money going up in smoke.

# Tobacco Use Costs Everyone

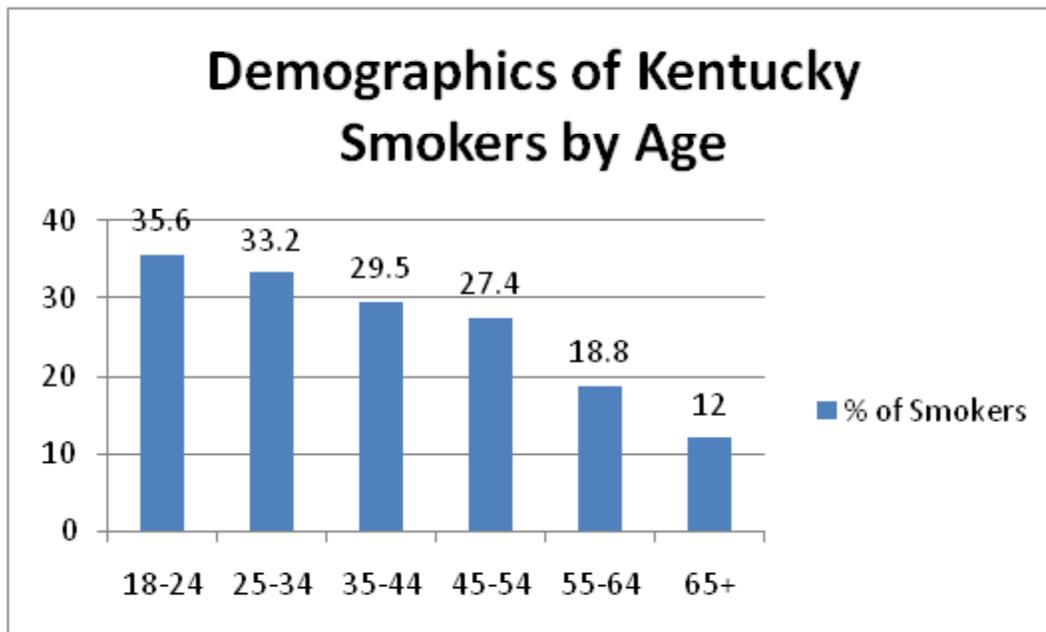
## First step to reduce cost

With health care costs squeezing corporate profits, it is increasingly difficult to manage growth and overhead expenses. The unrelenting rise in health care costs continues to wreak havoc, affecting employers and employees both directly and indirectly. Without changing lifestyle choices and company policies toward promoting healthy behavior, the situation will continue to spiral downward. A first step toward health care cost containment is to reduce tobacco use. Tobacco is a major contributor in the top three leading causes of morbidity and mortality: cancer, heart disease, and vascular disease. Approximately 58% of all smokers in Kentucky want to quit; many of your employees are looking for resources to help them break their tobacco addiction.

The benefits are likely to reap cost savings from lower insurance premiums, increased productivity, fewer medical claims, and higher cleaning and maintenance costs.

## The state of tobacco use in Kentucky

Over 1.1 million adults, approximately 26% of the population in Kentucky, report current smoking. Kentucky ranks among the states with the highest adult smoking rates. Tobacco use is responsible for an estimated 7,800 (370.6 per 100,000 population) deaths each year, which ranks Kentucky with the highest smoking-attributable mortality rate in the United States.



## Using Your Company's Health Plan ...

...to help employees and their families quit using tobacco.

More than 58% of all smokers in Kentucky want to quit; many employees are looking for help to break their tobacco addiction. KYAHU and the Kentucky Tobacco Prevention and Cessation Program provide a direct link through the Preferred Employer Network.

Research shows that the most effective tobacco dependence treatment includes medications and coaching/counseling. This combination has been shown to double or triple the employee's chances of quitting successfully. Businesses that have included a tobacco cessation benefit in their health plan, report that this coverage has reduced total tobacco consumption, increased the number of tobacco users to undergo treatment, increased productivity, and increased the percentage of those who successfully quit. Compare what you now spend on tobacco-related illnesses with the cost of providing effective tobacco cessation services for employees. Then, consider the kinds of treatment that can effectively help smokers quit and reduce your healthcare costs.

### Are Cessation Health Benefits Cost-Effective?

- Tobacco cessation is more cost-effective than most other common and covered disease prevention interventions, such as treatment of hypertension and high cholesterol.
- It costs between 10 and 40 cents per member per month to provide a comprehensive tobacco cessation benefit (costs may vary).

### Tobacco dependence treatment benefits found to be most effective

- Cover at least four counseling sessions of at least 30 minutes each, including proactive telephone counseling and individual counseling.
- Provide counseling and medication coverage for at least two smoking cessation attempts per year.
- Cover both prescription and over-the-counter nicotine replacement medication.
- Eliminate or minimize co-pays or deductibles for counseling and medications.

### Tobacco Dependence Treatment Medications

Type	Form	Common Brand Names
Prescription Nicotine Replacement Therapy	Inhaler	Nicotrol
	Nasal Spray	Nicotrol
Over-the-Counter Nicotine Replacement Therapy	Gum Patch Lozenge	Nicorette Nicoderm, Habitrol, Prostep, Nicotrol COMMITT

Programs consisting of several treatment components have proven to be most successful.

## How Does the Kentucky's Tobacco Quitline Work?

Kentucky's Tobacco Quitline is a free, statewide, telephone based tobacco cessation service. The quitline offers:

- one-on-one proactive counseling for tobacco users who are ready to quit.
- support for people who want to stop smoking or using other tobacco products
- information on tobacco dependence for health care professionals
- and, information about local resources to help tobacco users quit

The free quitline service is available to everyone in Kentucky age 15 and over. Services are available in English and Spanish at the time of the call. Counseling in other languages is available free through a third party translation service. Services are also available for the deaf and hard-of-hearing.

Quitline hours of operation are flexible to meet nearly everyone's needs. Counselors are available Monday through Sunday 8:00 am to 1:00 am EST – 119 hours a week.

Quitlines differ greatly from "hot lines". Callers to Kentucky's Tobacco Quitline participate in on-going tobacco cessation counseling. Callers will work with their counselor through five counseling sessions. Pregnant smokers will be able to participate in up to eight counseling sessions. During the sessions, callers will discuss past quit attempts, identify their triggers for tobacco use and establish a network of supporters to help through difficult situations.

National Jewish Health operates Kentucky's Tobacco Quitline. Founded in 1899 as a nonsectarian, nonprofit hospital, National Jewish Health is a 501(c) (3) not-for-profit corporation that has been dedicated to respiratory health for 110 years. Due to tobacco's impact on respiratory health, National Jewish is strongly committed to local, regional, and national efforts toward prevention and cessation. They have been providing comprehensive telephonic quitline services since 2002.

Callers to Kentucky's Tobacco Quitline speak with coaches trained to assist them with quitting. Coaches have a minimum of a Bachelors degree or equivalent and are trained in behavioral modification and motivational interviewing. Quitline coaches receive clinical supervision from a PhD. level specialist and work closely with psychologists trained in tobacco cessation and motivational interviewing/behavioral change. The training program in addiction, tobacco cessation techniques, and motivational interviewing/behavioral modification meets all ATTUD (Association for the Treatment of Tobacco Use and Dependence) competencies.

Multiple scientific reviews have established that proactive telephone counseling through quitlines is an effective cessation method. The U.S. Public Health Service Clinical Practice Guidelines and the Guide to Community Preventive Services both recommend quitlines as an effective method to help people stop using tobacco.

For your employees who are contemplating quitting, refer them to Kentucky's Tobacco Quitline at 1-800-QUIT NOW (1-800-784-8669). If your employee wants to quit within the next 30 days, provide them with a fax referral form. The fax referral form should be faxed to the quitline. Quitline counselors will contact your employee about tobacco cessation.

Some outreach materials may be downloaded from the program's web site at <http://chfs.ky.gov/dph/info/dpqi/hp/tobacco.htm>.



## Preferred Employee Network

### PATIENT FAX REFERRAL FORM

Today's Date \_\_\_\_\_

Fax to: 1-800-261-6259

Use this form to refer patients who are ready to quit tobacco in the next 30 days to Kentucky's Tobacco Quitline.

#### PROVIDER(S): Complete this section

Provider name	Contact Name
Clinic/Hosp/Dept	E-mail
Address	Phone (    )    -
City/State/Zip	Fax (    )    -

#### PATIENT: Complete this section

\_\_\_\_\_ Yes, I am ready to quit and ask that a quitline coach call me. I understand that Kentucky's Tobacco Quitline  
*Initial* will inform my provider about my participation.

Best times to call? morning afternoon evening weekend

May we leave a message? Yes No

Are you hearing impaired and need assistance? Yes No

Date of Birth?    /    /    Gender M F

Patient Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ KY

Zip Code \_\_\_\_\_ E-mail \_\_\_\_\_

Phone #1 (    )    - \_\_\_\_\_ Phone #2 (    )    - \_\_\_\_\_

Language English Spanish Other \_\_\_\_\_

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_

### PLEASE FAX TO: 1-800-261-6259

Or mail to: Kentucky's Tobacco Quitline, c/o National Jewish Health®, 1400 Jackson St., S117A, Denver, CO 80206

**Confidentiality Notice:** This facsimile contains confidential information. If you have received this in error, please notify the sender immediately by telephone and confidentially dispose of the material. Do not review, disclose, copy or distribute.

## Maximizing Your Cessation Efforts

Promoting and supporting a tobacco-free workplace makes good business sense. It says a lot about your commitment to your employees and customers. There are five areas where a tobacco-free workplace will have a positive impact.

1. Protect your employee's health.
  - Reduce risk of lung cancer. Employees exposed to secondhand smoke at work are 12-19% more likely to get lung cancer.
  - Reduce heart attacks. Exposure to secondhand smoke increases the risk of a heart attack by 25-35%.
  - Reduce heart disease and upper respiratory infections.
2. Lower your costs.
  - Businesses pay an average of \$2,189 in workers' compensation costs for smokers, compared with \$176 for nonsmokers.
  - Smoking costs employers an estimated \$3,391 per smoker per year, comprised of \$1,623 indirect medical expenditures and \$1,768 in lost productivity.
  - The Environmental Protection Agency (EPA) estimates that tobacco-free businesses can save about \$190 per 1,000 square feet in lower cleaning and maintenance costs.
  - The National Fire Protection Association found that in 2007 smoking materials caused 11,300 fires in nonresidential structures, resulting in direct property damages of \$93 million.
  - Fire insurance is commonly reduced 25-30% in smoke-free businesses.
3. Increase productivity and morale.
  - Employees who take four 10-minute breaks a day to smoke actually work one month less per year than nonsmokers.
  - Smoking in the workplace causes inefficiency, errors, eye irritation, and lower attentiveness.
4. Reduce absenteeism.
  - Smokers, on average, miss 6.2 days of work per year due to sickness compares to non smokers, who miss 3.9 days per year.
5. Reduce your liability.
  - Disability claims based on secondhand smoke exposure are eliminated.
  - A smoke-free workplace prevents violations of the Americans With Disabilities Act that result from limiting access by people with respiratory problems who cannot patronize or work in your business due to secondhand smoke.

What's the bottom line? Plain and simple – being tobacco-free adds up. It's the right thing to do – for the health of your employees and customers AND for the wealth of your business.

To receive information about Worksite Wellness email the Worksite Wellness Coordinator at Teresa.Lovely@ky.gov or visit the Preferred Employer Network section to download sample materials to use to create a tobacco-free workplace at <http://chfs.ky.gov/dph/info/dpqi/hp/tobacco.htm>.

# BENEFITS OF A SMOKE-FREE WORKPLACE

## Costs to Employers

Despite peer-reviewed reports and a high level of public knowledge of the adverse effects of smoking, tobacco use remains the leading preventable cause of disease, disability, and death in the United States. Each year, an estimated 443,000 people die prematurely from smoking or exposure to secondhand smoke, with an additional 8.6 million smoking-related illnesses. In 2009, 26% of Kentucky adults reported being current smokers compared to the U.S. national average of 18%. Among adults ages 35+, over 7,800 died as a result of tobacco use per year, on average, during 2000-2004. This represents a smoking-attributable mortality rate of

370.6 per 100,000.

The average annual healthcare cost associated with tobacco use in Kentucky is over \$2 billion. To effectively address adult smoking, the Kentucky Tobacco Program has adopted an aggressive action plan to work with employers to lower adult smoking rates and the associated economic burden of tobacco use. Employee wellness programs are proven to reduce chronic disease risks from smoking, as well as promote healthy habits. As highlighted below, employee tobacco use results in significant direct and indirect costs to employers:

Financial Costs when Employees Smoke	
Absenteeism	On average, smokers miss 60% more days of work per year due to sickness (including smoking-related chronic conditions), compared to non-smokers.
Workers' Compensation payments	Businesses pay an average of \$2,189 in workers' compensation costs for smokers, compared with \$176 for nonsmokers.
Smoke Breaks	Employees who take four 10-minute breaks per day to smoke actually work one month less per year than workers who don't take smoke breaks.
Health Insurance Costs and Claims	The American Cancer Society estimates that employees who smoke have an average insured payment for health care of \$1,145, compared to an average of \$762 among nonsmokers.
Maintenance costs	The Organization for Economic Cooperation and Development estimates that maintenance costs are 7% higher in buildings that allow smoking.
Accidents and Fires	The National Fire Protection Association found that, in 1998, smoking materials caused 8,700 fires in non-residential structures, resulting in a direct property damage of \$60.5 million.

Employers with smoke-free policies experience:

- ✓ **Decreased** absenteeism among non-smoking employees.
- ✓ **Decreased** housekeeping and maintenance costs.
- ✓ **Decreased** insurance costs and smoking-related fires.

There is a heavy price tag associated with tobacco use, resulting in costs of \$770 per non-smoking adult, nearly \$3,400 per tobacco user, and over \$157 billion in total economic losses annually.

In 2009, 26% of Kentucky adults were smokers. If the rate of tobacco use among your employees is the same as the average rate, these are the attributable costs:

Total Employees	Total Smokers (26%)	Total Annual Costs (x \$3,400)
100	26	\$ 88,400
500	130	\$ 442,000
1,000	260	\$ 884,000
5,000	1300	\$ 4,420,000

How much does tobacco cost employers?

Based on the Centers for Disease Control and Prevention's (CDC) estimate that each smoker costs employers \$3,400 annually, the following formula provides insight into determining the smoking attributable costs in your business.

Step 1: To calculate the percentage of employees who smoke, either multiply the percentage of adult Kentuckians who smoke (26%) or multiply the total number of employees times the estimated percentage of employees who smoke. The resulting number provides an estimate of the total number of smokers in your workplace.

Step 2: Multiply the total number of smokers times the CDC estimate of the cost (\$3,400) per smoker:

What does smoking cost your company?

$$\begin{aligned}
 & \text{_____ Total number of employees} \\
 \times & \text{_____ Estimated \% of employees who smoke (26\%)} \\
 = & \text{_____ Total number of smokers} \\
 \times & \text{_____ \$3,400 cost per smoker} \\
 = & \text{_____ Employers estimated cost of smoking per year}
 \end{aligned}$$

This final number represents your costs associated with employees who smoke.

## Cost to Employees

An extensive body of epidemiologic data has consistently linked tobacco usage to a variety of adverse health outcomes. Smokers have been found to incur an increased relative risk of morbidity and mortality from coronary heart disease, stroke, lung cancer, chronic obstructive pulmonary disease (COPD), and a wide variety of neoplastic diseases. There is also strong evidence that smoking is related to infertility,

low birth weight, stillbirth, preterm delivery, and sudden infant death syndrome (SIDS).

Unfortunately, the harmful effects of smoking do not end with the smoker. Even brief exposure to secondhand smoke can be dangerous, as nonsmokers inhale many of the carcinogens and toxins in cigarette smoke.

### The Health Risks Associated With Tobacco Use

Mouth, Lip, Throat, Larynx	Increased risk of cancer, inflammation, laryngitis
Respiratory System	Bronchitis, emphysema (Chronic Obstructive Pulmonary Disease - COPD, lung cancer
Circulatory System	Heart disease, heart attack, high blood pressure, coronary artery disease (poor circulation in the legs causing ulcers, pain, and sometimes the need for amputation)
Bones	Brittle bones (osteoporosis)
Immune System	Depressed immune response, increased infections
Brain	Increased risk of brain hemorrhage (stroke), women using the contraceptive pill have an even greater risk of stroke
Stomach and Intestines	Lining becomes tender leading to bleeding, ulcers, and may lead to cancer
Pancreas, Kidney and Bladder	Increased risk of cancer
Reproductive System (Male and Female)	Decreased sperm count, lower sex drive, egg damage, irregular menstrual cycle and altered hormone levels, cancer of the cervix, penis and anus, early onset of menopause, increased risk of breast cancer
Pregnancy and Babies	Lower than average birth weight, high risk of Sudden Infant Death Syndrome (SIDS), increased risk of premature birth, higher increased risk of miscarriage and still births, increased risk of impairment in mental and physical development, nicotine carried to baby in breast milk
Oral health	Oral cancer, tooth loss, bone loss, gum recession, mouth sores, oral fungal infection

According to the International Agency for Research on Cancer:

- Nonsmokers exposed to secondhand smoke in the workplace have a 16-19% increased risk of lung cancer
- Nonsmokers exposed to secondhand smoke from their spouses have an increased risk of lung cancer that is 30% for men and 20% for women
- Involuntary smoking increases the risk of an acute coronary heart disease event by 25-35%

Each year secondhand smoke causes:

- 3,000 deaths from lung cancer of otherwise healthy nonsmokers
- Up to 62,000 deaths from cardiovascular disease of otherwise healthy nonsmokers
- Up to 300,000 lower respiratory tract infections (such as pneumonia and bronchitis) in U.S. infants and children younger than 18 months of age
- An increase in the number of asthma attacks and the severity of asthma in up to one million asthmatic children

Chemicals in Cigarettes	Common Use
Carbon Monoxide	Gas in car exhausts
Copper	Electric wiring
Tar	Road Surfaces
Nicotine	Pesticide
Acetone	Paint stripper
Ammonia	Cleaning agent
Arsenic	Rat poison
Benzene	Gasoline fumes
Butane	Lighter fluid
Hydrogen cyanide	Poison in gas chamber
Methanol	Rocket fuel
Methane	Swamp gas
Toluene	Industrial solvent
DDT	Banned insecticide
Radon	Radioactive gas
Polonium	Radioactive fallout

The U.S. Environmental Protection Agency classifies secondhand smoke as a “Group A” carcinogen along with asbestos, benzene, arsenic and radon. There is no safe exposure level for Group A carcinogens. Secondhand smoke kills more people than all other Group A carcinogens combined.

Resources:

Centers for Disease Control and Prevention. (2010). Smoking and tobacco use. Retrieved: November 9, 2010. Available at: <http://www.cdc.gov/tobacco/>

International Agency for Research on Cancer. (2002). Tobacco smoke and involuntary smoking summary of data reported and evaluation, 83.

National Cancer Institute. (1999). Health effects of exposure to environmental tobacco smoke: the report of the California Environmental Protection Agency. Retrieved: November 9, 2010. Available at: [http://cancercontrol.cancer.gov/tcrb/monographs/10/m10\\_complete.pdf](http://cancercontrol.cancer.gov/tcrb/monographs/10/m10_complete.pdf)

Service, R., Lippman, H. et al

The “benefits” poster at right can be copied and placed on employee’s bulletin boards. Other outreach materials can be located at [chfs.ky.gov/dph/info/dpqi/hp/tobacco.htm](http://chfs.ky.gov/dph/info/dpqi/hp/tobacco.htm).

# the benefits of quitting

Compared to smokers, your....

**Stroke** risk is reduced to that of a person who never smoked after five to 15 years of not smoking.

**Cancers of the mouth, throat, and esophagus** risks are halved five years after quitting.

**Cancer of the larynx** risk is reduced after quitting.

**Coronary heart disease** risk is cut by half one year after quitting and is nearly the same as someone who never smoked 15 years after quitting.

**Chronic obstructive pulmonary disease** risk of death is reduced after you quit.

**Lung cancer** risk drops by as much as half 10 years after quitting.

**Ulcer** risk drops after quitting.

**Bladder cancer** risk is halved a few years after quitting.

**Peripheral artery disease** goes down after quitting.

**Cervical cancer** risk is reduced a few years after quitting.

**Low birthweight baby** risk drops to normal if you quit before pregnancy or during your first trimester.



**Kentucky Public Health**  
Prevent. Promote. Protect.

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