### Secondhand Smoke: The Facts

### What Is Secondhand Smoke?

Secondhand smoke is the combination of smoke from the burning end of a cigarette and the smoke breathed out by smokers. Secondhand smoke contains more than 7,000 chemicals. At least 250 those chemicals are known to be harmful and toxic and about 70 can cause cancer.[[1]](#endnote-1)Since the 1964 Surgeon General’s Report, 2.5 million adults who were nonsmokers died because they breathed secondhand smoke.[[2]](#endnote-2)There is no risk-free level of exposure to secondhand smoke.

### Secondhand Smoke Causes Heart Disease

* Exposure to secondhand smoke has immediate adverse effects on the cardiovascular system and can cause coronary heart disease and stroke.
* Breathing secondhand smoke can have immediate adverse effects on your blood and blood vessels, increasing the risk of having a heart attack.

### Secondhand Smoke Causes Lung Cancer

Secondhand smoke causes lung cancer in adults who have never smoked.

* Nonsmokers who are exposed to secondhand smoke at home or at work increase their risk of developing lung cancer by 20–30%.ii
* Secondhand smoke causes more than 7,300 lung cancer deaths among U.S. nonsmokers each year.[[3]](#endnote-3)
* Nonsmokers who are exposed to secondhand smoke are inhaling many of the same cancer-causing substances and poisons as smokers.[[4]](#endnote-4)
* Even brief secondhand smoke exposure can damage cells in ways that set the cancer process in motion.iv
* As with active smoking, the longer the duration and the higher the level of exposure to secondhand smoke, the greater the risk of developing lung cancer.iv

### Secondhand Smoke Harms Children

Secondhand smoke can cause serious health problems in children[[5]](#endnote-5).

* Studies show that older children whose parents smoke get sick more often. Their lungs grow less than children who do not breathe secondhand smoke, and they get more bronchitis and pneumonia.
* Wheezing and coughing are more common in children who breathe secondhand smoke.
* Secondhand smoke can trigger an asthma attack in a child. Children with asthma who are around secondhand smoke have more severe and frequent asthma attacks. A severe asthma attack can put a child's life in danger.
* Children whose parents smoke around them get more ear infections. They also have fluid in their ears more often and have more operations to put in ear tubes for drainage.

\*The information reproduced from the website *Smoking and Tobacco Use* by the Center for Disease Control (CDC)

1. U.S. Department of Health and Human Services. [The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General](http://www.cdc.gov/tobacco/data_statistics/sgr/50th-anniversary/index.htm). Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014 [accessed 2015 Aug 20]. [↑](#endnote-ref-1)
2. U.S. Department of Health and Human Services .[A Report of the Surgeon General: How Tobacco Smoke Causes Disease: What It Means to You](http://www.cdc.gov/tobacco/data_statistics/sgr/2010/consumer_booklet/index.htm). Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2010 [accessed 2015 Aug 20]. [↑](#endnote-ref-2)
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4. U.S. Department of Health and Human Services. [The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General](http://www.cdc.gov/tobacco/data_statistics/sgr/2006/index.htm). Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006 [accessed 2015 Aug 20]. [↑](#endnote-ref-4)
5. American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome. The Changing Concept of Sudden Infant Death Syndrome: Diagnostic Coding Shifts; Controversies Regarding the Sleeping Environment; and New Variables to Consider in Reducing Risk. Pediatrics 2005;116(5):1245–55 [↑](#endnote-ref-5)