

2013 Smokeless Tobacco Use Data Summary

"The body absorbs 3-4 times the amount of nicotine from smokeless tobacco products compared to normal cigarettes" -National Institute on Drug Abuse¹

SMOKELESS TOBACCO (SLT) PRODUCTS

- Smokeless tobacco products contain tobacco that is chewed, sucked on or sniffed and not smoked²
- The major smokeless tobacco products on the market today include snuff ('dipping'), chewing tobacco, snus, and dissolvable tobacco².
- Smokeless tobacco has 28 cancer causing chemicals¹.
- With novel smokeless tobacco products emerging on the market today in addition to the increasing rise of smokeless tobacco use since the early 2000's, Georgia must take extra steps to monitor smokeless tobacco^{1,3}.

ADULT SMOKELESS TOBACCO USERS⁴

21% (1.5 million) of adults in Georgia are cigarette smokers; and 4.4% (317,000) use smokeless tobacco.

- Males (7%; 260,000) are significantly more likely to use smokeless tobacco when compared to adult females (2%; 55,000) in Georgia.
- Smokeless tobacco prevalence is highest among young adults aged 18-24 years (6%; 56,000) in Georgia, when compared to other age group (Figure 1).
- The prevalence of smokeless tobacco use among NH white males (10%; 195,000) is the highest and twice that of NH black males (5%; 48,000) (Figure 2).
- NH black females (2%; 27,000) are two times more likely to use smokeless tobacco than NH white females (1%; 23,000).

Health Coverage

• Adults with health insurance coverage (4%; 192,000) have similar prevalence of smokeless tobacco use as those without health coverage (5%; 82,000).

Education Level

- Georgia adults with less than a high school degree (8%; 98,000) have the highest prevalence of smokeless tobacco use followed by adults with:
 - a high school degree (5%; 113,000)
 - some college (3%; 59,000) and
 - a college degree (2%; 42,000)

Figure 1: Percent of Adults Who Use Smokeless Tobacco by Age, Georgia, 2011⁴



Figure 2: Percent of Adults Who Use Smokeless Tobacco by Gender and Race/Ethnicity, Georgia, 2011⁴







Income Level

 Adults who have an annual household income of less than \$15K (5%; 48,000) and \$15K-\$24,999 (5%; 70,000) have the highest prevalence of smokeless tobacco use of any other household income group (Figure 3).

Geographic Location

 The Southeast (Waycross 9-2, 11%; 38,000) Health District has a significantly higher prevalence of smokeless tobacco use than the state average and other Georgia Health Districts (Table 1 & Figure 4).

	Smokeless Tobacco	Estimated Number of Adult Smokeless
Public Health District	Use Prevalence (%)	Tobacco Users
9-2 Southeast Health District (Waycross)*	11%	38,000
1-1 Northwest Health District (Rome)	7%	32,000
8-1 South Health District (Valdosta)	7%	16,000
6-0 East Central Health District (Augusta)	6%	23,000
10-0 Northeast Health District (Athens)	6%	19,000
2-0 North Health District (Gainesville)	5%	21,000
5-1 South Central Health District (Dublin)	5%	7,000
7-0 West Central Health District (Columbus)	5%	11,000
3-4 East Metro Health District (Lawrenceville)	4%	24,000
4-0 LaGrange Health District	4%	21,000
5-2 North Central Health District (Macon)	4%	15,000
8-2 Southwest Health District (Albany)	4%	11,000
9-1 Coastal Health District (Savannah)	4%	16,000
3-2 Fulton Health District	3%	14,000
1-2 North Georgia Health District (Dalton)	2%	7,000
3-1 Cobb/Douglas Health District	2%	10,000
3-5 DeKalb Health District	2%	8,000
3-3 Clayton County Health District (Jonesboro)	1%	2,000
Georgia	4%	317,000

Table 1: Prevalence of Smokeless Tobacco Use amongAdults by Public Health District, Georgia, 20114

*Significantly above the state smoking prevalence, based on 95% confidence intervals Data source: 2011 Georgia Behavioral Risk Factor Surveillance System (BRFSS) Data

Figure 4 Percent of Adults Who Use Smokeless Tobacco by Public Health District, Georgia, 2011⁴



Figure 5: Map of Urban and Rural Counties in Georgia



URBAN VERSUS RURAL SMOKELESS TOBACCO USE⁴

- The percentage of adults in Georgia who use smokeless tobacco is significantly higher in rural counties (7%; 120,000) than in urban counties (3%; 177,000) (See geographical map in Figure 5).
- Smokeless tobacco use prevalence among males is significantly higher in rural counties (12%; 100,000) than in urban counties (6%; 144,000).
- Among females, smokeless tobacco use prevalence is higher in rural counties (2%; 21,000) than in urban counties (1%; 33,000).

SMOKELESS TOBACCO USE AMONG YOUTH

- The percent of high school students in Georgia who use smokeless tobacco (10%; 43,000) is higher than that of middle school students (5%; 18,000) and adults (4.4%; 317,000)^{4,5}.
- Smokeless tobacco use has been rising among high school students in Georgia since 2005 but has remained fairly steady for middle school students (Figure 6)^{5,6}.

School Type & Gender⁵

 Male high school students (15%; 33,000) and middle school students (8%; 15,000) have a significantly higher smokeless tobacco use prevalence compared to female high school students (4%; 8,000) and middle school students (1%; 2,500) (Figure 7).

Figure 6: Percent of Students who Currently Use Smokeless Tobacco, Georgia, 2003-2011^{5,6}



Figure 7: Percent of Youth Smokeless Tobacco Users by School Type and Gender, Georgia, 2011⁵







Figure 9: Percentage of Youth Smokeless Tobacco Users by School Grade, Georgia, 2011⁵



Race/Ethnicity⁵

 NH white high school students (15%; 29,000) and middle school students (7%; 12,000) are significantly more likely to use smokeless tobacco compared to NH black high school students (3%; 5,600) and middle school students (2%; 12,000) (Figure 8).

Grade Level⁵

 More 12th graders (14%; 12,000) used smokeless tobacco than any other grade level (Figure 9).

Definitions:

Chewing tobacco: consists of loose tobacco leaves that come in a package that is placed between the cheek and gum. The juices are spit out and the package is held there as long as a person wants sometimes a few hours¹

Dissolvable tobacco: takes the form of a hard compressed product of powdered tobacco. It is dissolved in the mouth and requires no spitting¹.

Smokeless tobacco: tobacco products that are not smoked out of a cigarette or pipe but found for example in different forms of tobacco leaves and used in the mouth for varying amounts of times that give similar effects of the nicotine as smoking³.

Snuff: finely ground or shredded tobacco leaves that are packaged into tins or pouches. A pinch of the product is then placed the mouth between the lower lip and gum. Dry forms of the product can also be sniffed up the nose¹

Snus: a newer product that is stuck between the upper lip and gum. It is not spit out or smoked but discarded after about half an hour of use¹.

Data Sources:

- 1. National Institute on Drug Abuse (NIDA). "Smokeless Tobacco December 2009. A Research Update from the National Institute on Drug Abuse." Available online at: http://www.drugabuse.gov/sites/default/files/smokeless.pdf
- Mayo Foundation for Medical Education and Research (MFMER). "Chewing tobacco: Not a safe alternative to cigarettes." October 29, 2011. By Mayo Clinic Staff. Available online at: http://www.mayoclinic.com/health/chewing-tobacco/CA00019
- 3. U.S. Department of Health and Human Services. *Preventing Tobacco Use Among Youth and Youth Adults: A Report of the Surgeon General*. Rockville, MD: 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, 2012
- 4. 2011 Georgia Behavioral Risk Factor Surveillance System (BRFSS)
- 5. 2011 Georgia Youth Risk Behavior Survey (YRBS)
- 6. 2003, 2005, 2007, & 2009 Georgia Youth Risk Behavior Survey (YRBS)
- 7. 2006-2010 Georgia Comprehensive Cancer Registry (GCCR)
- 8. 2006-2010 National Cancer Institute (NCI)
- 9. 2006-2010 National Center for Health Statistics (NCHS)
- 10. 2010 Deaths and Georgia Hospital Inpatient Deduplicated Discharge Data; Online Analytical Statistical Information System (OASIS) (http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx)

QUITTING TAKES PRACTICE!

The Georgia Tobacco Quit Line is available for all Georgians 13 years of age and older who want to quit using tobacco. To receive free counseling, support, and referral services c

1-877-270-STOP (English)	
1-877-2NO-FUME (Spanish)	
1-877-777-6534 (Hearing Impaired)	
http://www.livehealthygeorgia.org/quitline.shtml	