As child healthcare specialists, of course we also are all in the prevention business in a major way. Recently published data highlight that cigarette smoking is the largest health hazard that is entirely preventable. Because smokers so often take up the habit in their teens, it is imperative that we pediatric practitioners do as much as possible to highlight for our patients and their parents just how serious a health threat smoking is.

One of the most startling medical statistics I have seen in many years is this: smokers lose at least 1 decade of life expectancy, as compared with those who have never smoked. Another way to look at the same data is that the mortality of current smokers of both sexes from ages 25 to 79 years was three times that of those who never smoked. This kind of information also should be made readily available in pediatric office waiting rooms.

Some good news has also emerged from these survey data: for all age groups there are dramatic benefits of quitting smoking with greater life expectancy compared to continuing smokers. Quitting at ages 25 to 34 years adds an average of 10 years; quitting between the ages 35 to 44 years adds 9 years; quitting at 45 to 54 years adds 6 years; and quitting at 55 to 64 years can add 4 years to the average life expectancy. Therefore, we have opportunities to impact both children and their parents by emphasizing the importance of smoking cessation.

SMOKING-RELATED MORBIDITIES

In a related epidemiologic study, mortality trends for the periods 1959 to 1965, 1982 to 1988, and 2000 to 2010 were assessed to compare risks by gender and smoking status. The findings here are also very sobering and striking. The relative risks of lung cancer deaths among current women smokers increased by almost tenfold, 2.73, 12.65, and 25.66, respectively, in the three time periods when compared with “never-smokers.” Comparable risks in men doubled over time: 12.22, 23.81, and 24.97. Clearly, women have caught up to men in this regard over the past 50 years. In the most recent time period, similar relative risks for current smokers of both genders were also observed for chronic obstructive lung disease, ischemic heart disease, stroke, and all-cause mortality. Over the time periods studied, risk of death from smoking among women continued to increase and is now very similar to that of men, compared with those who never smoked.

Bottom line: smoking is the single most important health hazard, and it is preventable. We have to do our part.

DEVELOPMENTS IN PEDIATRIC MENTAL HEALTH

This month’s issue focuses on mental health in pediatric and adolescent populations. It is a timely collection of articles given that next month the American Psychiatric Association will release its Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5). Because there are so few psychiatrists specializing in mental health for children and adolescents (approximately 7,500 according to the American Academy of Child and Adolescent Psychiatry), general office pediatricians are often the ones to treat common mental disorders in these populations, so anticipating and understanding the changes in the DSM-5 is essential.

Pediatric Annals board member
Robert J. Hilt, MD, FAAP is both a pediatrician and a psychiatrist. In this issue, as guest editor of our CME materials, Dr. Hilt and his colleagues offer readers an eclectic, but important, review of aspects of mental health in children and teens: bullying, neglect, Munchausen syndrome by proxy, and the proper use of SSRIs in children. Dr. Hilt is also our new monthly Ask the Expert columnist. This month, Dr. Hilt reviews the upcoming changes in the DSM-5 expected to impact pediatricians.

THIS MONTH’S STAMPS

One hundred or more countries have issued stamps with an anti-smoking theme over the years. This represents an essential free publicity mechanism for a country to send a message to its entire population about the hazards of smoking. I have chosen six of the most inventive stamps from my collection to illustrate this column.

From the defunct South African Bantustan Bophuthatswana, is the not-so-subtle cross of cigarette butts, issued in 1980. In the same year, France posed the simple choice: Tobacco or Health. The pink stamp issued by Brunei in 1994 honors that year’s World No-Tobacco Day, showing a cigarette burning a hole through the heart, apparently of a pregnant woman. Also from 1980, the West African nation of Mali cleverly showed a revolver shooting cigarettes at the pulmonary target.

In 1993, Slovenia delivered the message by showing a cigarette snuffing out a person in an ashtray! One of my all-time favorites is the 1980 stamp from Cape Verde showing the equation lungs plus cigarettes, cigars, and pipes equals lung cancer, with a cancerous lung graphically pictured in fairly anatomically correct fashion.

REFERENCES