Report Indicates E-Cigarettes May Have Benefits for Individuals but an Overall Negative Impact on Society

Marcus Plescia, MD, MPH, Association of State and Territorial Health Officials, January 2018

On Jan. 23, the National Academy of Sciences, Engineering, and Medicine released a report that has important implications for public health practice. The report is the first to systematically address a number of important scientific and health questions that have emerged as use of electronic cigarettes have become widespread. The report provides a number of important findings:

(1) There is evidence that e-cigarette vapor contains less toxins than combustible cigarette smoke.

Many of the toxic and carcinogenic products in cigarette smoke are a result of the combustion process. E-cigarettes, which do not burn tobacco, seem to be less harmful than combustible tobacco products. However, the report notes that the long-term implications of e-cigarette use on individuals’ morbidity and mortality are not yet clear.

Use of e-cigarettes by current adult smokers can help some individuals reduce consumption of combustible cigarettes and ultimately quit smoking. At this time, there is limited evidence to suggest that e-cigarettes are effective smoking cessation aids for the population as a whole.

(2) There is evidence that e-cigarettes are a gateway to more harmful health behaviors, particularly for youth and young adults.

The use of e-cigarettes results in nicotine addiction.

Youth who regularly use e-cigarettes are more likely to begin using combustible tobacco products, and are likely to use those products at a greater frequency and intensity.

To view the full article, follow this link: Report Indicates E-Cigarettes May Have Benefits for Individuals but an Overall Negative Impact on Society
Smoking and Brain Health

Lindsay Brieschke, Alzheimer’s Association Michigan Chapters, February 2018

There is strong evidence to suggest that current smoking increases the risk of cognitive decline while moderate, but growing, evidence suggests current smoking increases the risk of dementia. Further, evidence shows that quitting smoking may reduce the associated risk to levels comparable to those who have not smoked. In the 2015 Michigan Behavioral Risk Factor Surveillance System, 12.1 percent—one in eight—of adults aged 45 and over reported they are experiencing confusion or memory loss that is happening more often or is getting worse (“subjective cognitive decline” or SCD).

Among Michiganders with SCD, 22.2% currently smoke and 17.5% report a history of cancer. Michiganders with SCD also had high rates of chronic conditions, such as hypertension and diabetes, that put people at greater risk for cognitive decline. The Healthy Brain Initiative: The Public Health Road Map for State and National Partnerships, 2013-2018, calls on public health to increase public awareness that it is possible to reduce risk for cognitive decline. For example, incorporating brain health messages into a quit-smoking campaign would enable brain health messages to reach current smokers.

This new information has the potential to refresh heath education initiatives and provide smokers with new motivation to try a quit attempt. Among the groups that have reviewed the evidence about current smoking, cognitive decline, and dementia are: World Health Organization, Lancet Commission, and the Alzheimer’s Association.

American Cancer Society Cancer Action Network (ACS CAN) Update

Andrew Schepers, January 2018

- ACS CAN is working with its coalition members to determine next steps for Oral Chemotherapy Fairness.
- ACS CAN will be working with partners to help ensure continued operation of programs such as the Michigan Tobacco Quitline—a service that many Michigan residents access including cancer survivors.
- ACS CAN’s annual Day at the Capitol is on April 25th. Contact Andrew Schepers (andrew.schepers@cancer.org) for more information.

Program Opportunity-Someone You Love: The HPV Epidemic Film Screenings

The documentary, Someone You Love: The HPV Epidemic is now available for MCC members and partners to screen. This award-winning film looks into the lives of five brave women affected by HPV and their stories. Any organization that would like to host a screening of the film and facilitate a panel discussion should contact Courtney Cole with the Michigan Department of Health and Human Services (MDHHS). For more information follow this link: Someone You Love: The HPV Epidemic.
Several common chronic diseases together account for more than a fifth of new cancer cases and more than a third of cancer deaths, finds a study published by The BMJ today.

The findings show that the cancer risks from common chronic diseases, such as heart disease and diabetes, are as important as those from five major lifestyle factors combined.

However, the authors point out that chronic diseases are not targeted in current cancer prevention strategies -- and say their findings have important implications for developing new strategies that target chronic diseases.

Studies have shown that certain chronic diseases may predispose to cancer, but these studies generally assessed chronic diseases or disease markers individually.

Yet chronic diseases tend to be clustered together, so there is a need to understand more about their joint impact on cancer risk.

A team of researchers based in the US and Taiwan therefore set out to investigate the combined effect of eight common chronic diseases or disease markers (for example, high blood pressure as a marker of heart disease) on cancer risk compared with lifestyle factors.

They also explored whether physical activity could reduce the cancer risk associated with chronic diseases and disease markers.

The study involved 405,878 men and women in Taiwan with no history of cancer who completed a questionnaire on medical history, lifestyle, and demographic information and underwent a series of medical tests between 1996 and 2007. Weekly leisure time physical activity was also measured.

Eight common chronic diseases and markers were evaluated, including cardiovascular disease markers, diabetes, chronic kidney disease markers, pulmonary disease, and gouty arthritis marker were individually associated with risk of developing cancer or cancer death.

Higher chronic disease risk scores based on these diseases or markers were linked with an increased risk of developing cancer and cancer death, with the highest level associated with a more than twofold increase in risk of developing cancer and a fourfold increase in risk of cancer death.

High chronic disease risk scores were also associated with substantial reduction in life span. The highest scores were associated with 13.3 years of life lost in men and 15.9 years of life lost in women.

Together, these chronic diseases and markers accounted for more than one fifth of all new cancers and more than one third of all cancer deaths in this study population, which was similar to the contribution of five major lifestyle risk factors combined -- smoking, insufficient physical activity, insufficient fruit and vegetable intake, alcohol consumption, and obesity. The researchers also found that physical activity was associated with a nearly 40% reduction in the excess risks of cancer and cancer death associated with chronic diseases and markers.

The study findings are based on a large prospective cohort with long-term follow-up. However, this is an observational study, so no firm conclusions can be drawn about cause and effect, and the authors cannot not rule out the possibility that some of the observed cancer risk may be due to other unmeasured factors.

Strengths included prospective evaluation, ability to measure the joint effects of several major chronic diseases on cancer risk simultaneously, and adjust for major shared risk factors.

To view the full article follow this link: Substantial impact of chronic diseases on cancer risk
2018 MCC Meetings

Board Meetings (12 pm- 3 pm):
Wed, March 28
Wed, June 27
Wed, September 26

Annual Meeting (Lansing):
Wednesday, November 7

For more information: 877-588-6224

MCC Website
Be sure to visit the MCC website to find provider and patient resources

Health Equity Corner

OMH Director Dr. Matthew Lin announces 2018 theme for National Minority Health Month
#NMHM18

Partnering for Health Equity

The HHS Office of Minority Health (OMH) Director Dr. Mathew Lin today announced the theme of National Minority Health for April 2018: Partnering for Health Equity. Partnerships at the national, state, tribal and local levels are vital to the work of reducing health disparities and advancing health equity.

During National Minority Health Month, beginning April 1, 2018, OMH will join with partners, health advocates and organizations in highlighting the role of partnerships in improving the health of people and communities across the country.

Visit the OMH website to learn more about National Minority Health Month, and sign up for the National Minority Health Month topic on our email list to be notified when we post new tools and resources to support your #NMHM18 events and programs!