:: MOST ADOLESCENTS ARE LIGHT SMOKERS

Light smoking, generally defined as smokers who consume fewer than 10 cigarettes per day, is common among adolescents. Data from the Youth Risk Behavior Survey (YRBS) indicate that 92.2% of all adolescent smokers in grades 9-12 smoke ≤ 10 cigarettes per day. Girls are more likely than boys to consume ≤ 10 cigarettes per day regardless of racial/ethnic group. However, 50% of current adolescent smokers have tried to quit with no success.2

:: LIGHT SMOKING IS HARMFUL

Adolescents may perceive that smoking a few cigarettes per day is okay, but no level of cigarette smoking is safe.3 Like any other smoker, light smokers are still exposed to nicotine, the addictive component in tobacco. Light smoking places many adolescents at risk for heavier smoking.4 Furthermore, smokers have an increased risk of cancer compared to non-smokers.5 A longitudinal study found that death risk of ischemic heart disease increased among men and women who smoked one to four cigarettes per day.6

:: RECOMMENDATIONS FOR PROVIDERS

Light smokers who want to quit experience difficulty doing so,7 and are less likely to receive treatment.8 Youth are a particularly important target for smoking cessation interventions, since quitting smoking before age 30 produces the greatest impact on tobacco-related morbidity and mortality.9 The 2008 Public Health Service Clinical Practice Guideline, Treating Tobacco Use and Dependence,10 for the first time recommends that light smokers should be:

- identified,
- strongly urged to quit, and
- provided with counseling cessation services.

Specific Recommendations

- Health care providers should routinely assess adolescent tobacco use at every encounter.

- If the adolescent does not smoke, providers should reinforce abstinence from tobacco by clearly communicating the health benefits of staying tobacco-free.

- If the adolescent smokes, providers should advise them to quit smoking irrespective of the number of cigarettes consumed per day.

- All adolescent smokers should be offered counseling services even if they smoke a few cigarettes per day.

- For patients who are not ready to make a quit attempt, clinicians may adapt motivational interventions provided in the Guideline.

- It is important for providers to intervene with adolescents in a manner that respects confidentiality and privacy (e.g., interviewing adolescents without parental presence).

- Providers should talk to all smokers about the harms of secondhand smoke exposure.

REFERENCES