Marty Otañez, PhD

Dr. Otañez began his work with the Center in 2004 as a Postdoctoral Scholar. Over the course of his four year tenure at the Center, Dr. Otañez has cast the light on a slew of issues relating to the tobacco industry’s presence in Malawi: child labor in Malawi’s tobacco growing area, tobacco companies’ efforts to use Malawi to undermine global health policy, and the tobacco industry video imagery of farm culture in Malawi, which shows tobacco farming as a source of jobs as well as a family and a national tradition to be protected instead of regulated and denormalized.

Dr. Otañez is leaving the Center to start a professorial position in political ecology in the Anthropology Department at the University of Colorado, Denver. He will continue his research on tobacco industry videos on tobacco farming and develop research projects on internet images of environmentally friendly tobacco industry schemes to build public faith and conceal the ecological costs of tobacco. In addition, Dr. Otañez will teach undergraduate and graduate student courses in political ecology, applied anthropology, and visual anthropology.

Anna Song, PhD

Dr. Song began her work at the Center in 2006 as a postdoctoral scholar. Her main research focus has been on adolescent and young adult decision-making regarding tobacco use. This includes work with her mentor, Dr. Bonnie Halpern-Felsher, examining the role perceptions of health risks, perceptions of social benefits, and perceptions secondhand smoke risks play in adolescents’ decisions regarding tobacco. This also includes work with Drs. Stanton Glantz and Pamela Ling on the influence of smoking in the movies on young adult smoking. Over the course of her fellowship, Dr. Song published three papers, with a fourth currently submitted, edited a book on the practice of community psychology, and submitted two fellowship grant proposals.

Dr. Song has been hired as an assistant professor of health psychology/behavioral medicine at the University of California, Merced in the Psychological Sciences section of the School of Social Sciences, Humanities, and Arts. She will continue to focus on the adolescent and young adult decision-making process surrounding tobacco use and other risk behaviors.

It’s About a Billion Lives: Symposium a Success

The CTCRE would like to extend its thanks to everyone who participated in the five year anniversary celebratory symposium: It’s About a Billion Lives: Advances in Tobacco Control. The symposium was well attended by folks across the spectrum of tobacco specialties. Keynote speaker Dr. Elmer Huerta, President of the American Cancer Society and Director of the Cancer Preventorium at the Washington Cancer Institute at Washington Hospital Center, opened the day on a global note with a presentation about social and economic determinants of smoking in rich and poor countries and reverse health disparities related to tobacco use in poor countries. Many arenas of tobacco research were discussed throughout the morning, from tobacco marketing, adolescent psychology, and the FCTC, to secondhand smoke and obstructive lung disease. Dr. A. Eugene Washington, Executive Vice Chancellor and Provost, provided closing remarks, describing the Center as an exemplification of one of UCSF’s core values: “The Center epitomizes the kind of collaborative, multidisciplinary environment that is essential for successful translational research.”
The Center for Tobacco Control Research and Education, UCSF Global Health Sciences, and the Federal University of Rio de Janeiro have been awarded a contract by the World Health Organization to collaborate with the City Health Department of Rio de Janeiro on an innovative research project to test the efficacy of smoking cessation for patients who are undergoing treatment for Tuberculosis (TB). This disease causes an estimated two million deaths per year worldwide, disproportionately in low– and middle-income countries such as Brazil, and more commonly among people who smoke. The spread of TB in households with smokers is almost ten times as common as that in households without smokers. Thus, TB and smoking make a deadly combination for public health.

In Brazil, nicotine replacement therapy and behavioral modification interventions are approved and recommended for smoking cessation. However, cessation programs have been tested there in only a few clinical settings and not specifically among TB patients. An estimated 51% of people with TB are current smokers in Brazil, compared with only 23% in the general population. Thus, TB and smoking make a deadly combination for public health.

The lack of such research makes this project very relevant to global health, as smoking increases the risk of TB mortality, reduces TB treatment success, and may lead to increased household spread in homes with TB patients who smoke. Indeed, the implications for this study are far-reaching, as the addition of smoking cessation treatment to TB treatment will likely improve the health of TB patients in general, reduce treatment failures, and reduce overall mortality and morbidity due to TB among smokers. This pilot study might lead to a larger, multi-center clinical trial of smoking cessation in TB clinics in different international settings. TB is increasing worldwide, and thus even small changes in the disease associated with smoking cessation could have enormous impacts on the global burden of TB.

Smokefree movies take Manhattan, jump the pond to Liverpool

The battle to clear smoking from kid-rated films struck home this Spring when the New York State’s health department and its commissioner, Richard F. Daines, MD, demanded action from media conglomerates that own Hollywood’s major film studios. Four of these firms — News Corp., Time Warner, Sony, and Viacom — are headquartered in mid-town Manhattan.

First a frank letter from Dr. Daines was published full-page in the *New York Times* and *Wall Street Journal*. NYDOH then surrounded media headquarters with street and bus posters and ran more ads with clip-and-mail messages targeting the company CEOs.

To date, Dr. Daines is the highest-ranking U.S. public health official to publicly call for R-rating tobacco. A welcome endorsement from the American Public Health Association this Spring should encourage other officials to join endorsers, like L.A. County’s Jonathan Fielding, MD, most familiar with the media industry.

In the UK, meanwhile, Liverpool has needed no encouragement to mount an over-ride of Britain’s industry-controlled film ratings. Famed for spearheading smoke-free measures in England, Liverpool’s public agencies and NGO groups are gearing up to adult-rate smoking in a key Hollywood export market, pressing the U.S. film industry to recalculate the costs of serving the tobacco industry worldwide.

Europe’s 2008 “City of Culture,” Liverpool hosted the first international conference on smoke-free movies in late February, attracting delegates from North America, the European Union, and WHO. Other UK cities are considering Liverpool’s example, which exploits a local over-ride option codified into the national film-rating system.

UK rating language already declares that imagery posing a danger should be adult-rated. Liverpool is asking why tobacco gets exceptional treatment when the danger of on-screen smoking has been proven on multiple continents.

**Int’l Tobacco Program at CTCRE awarded WHO contract to study TB/Smoking Cessation in Brazil**

The Center for Tobacco Control Research and Education, UCSF Global Health Sciences, and the Federal University of Rio de Janeiro have been awarded a contract by the World Health Organization to collaborate with the City Health Department of Rio de Janeiro on an innovative research project to test the efficacy of smoking cessation for patients who are undergoing treatment for Tuberculosis (TB). This disease causes an estimated two million deaths per year worldwide, disproportionately in low– and middle-income countries such as Brazil, and more commonly among people who smoke. The spread of TB in households with smokers is almost ten times as common as that in households without smokers. Thus, TB and smoking make a deadly combination for public health.

In Brazil, nicotine replacement therapy and behavioral modification interventions are approved and recommended for smoking cessation. However, cessation programs have been tested there in only a few clinical settings and not specifically among TB patients. An estimated 51% of people with TB are current smokers in Brazil, compared with only 23% in the general population. Thus, smoking cessation interventions in TB patients are really needed, and research on these programs has not yet been reported.

The lack of such research makes this project very relevant to global health, as smoking increases the risk of TB mortality, reduces TB treatment success, and may lead to increased household spread in homes with TB patients who smoke. Indeed, the implications for this study are far-reaching, as the addition of smoking cessation treatment to TB treatment will likely improve the health of TB patients in general, reduce treatment failures, and reduce overall mortality and morbidity due to TB among smokers. This pilot study might lead to a larger, multi-center clinical trial of smoking cessation in TB clinics in different international settings. TB is increasing worldwide, and thus even small changes in the disease associated with smoking cessation could have enormous impacts on the global burden of TB.
Updates from the Library

Web 2.0 comes to LTDL

The Legacy Tobacco Documents Library has added a new social bookmarking feature to the home page, the multimedia collection page, and every document PDF page. Social Bookmarking is a way for Internet users to store, organize, search, and manage links to favorite web pages. In a social bookmarking system, users save links to web pages, “tag” them with their own descriptive terms, and then share these pages with others. Bookmarks are usually public but they can also be saved privately or shared only with specified people or groups.

How do I use this in LTDL?
As you search for and view documents in LTDL, you will notice a new button at the top of every document PDF - This bookmark button allows you to save the document you are viewing to your del.icio.us, Facebook, Google Bookmarks, or Furl accounts (to name a few).
- Click on the Bookmark button for a list of bookmarking applications.
- Choose the one you use and the link to the document or web page is saved to your account.
- “Tag” the entry by typing in your own descriptive terms.
- Once you have bookmarked the document you can share it with others.

Why should you use this?
- You are able to “tag” the document with your own terms – this provides another way to organize and remember specific documents within bookmark lists.
- You can easily share the document with others - On many sites, coworkers and research groups can use a shared account, special tags, or a specially created network to collect and organize bookmarks that are relevant and useful to the entire group. Each social bookmarking application has its own ways of sharing - explore the many applications for one that suits your needs.
- You can discover other web pages with similar “tags”
- You can access your bookmarks from any computer at any time.

Nicotine and Carcinogen Exposure with Smoking of Progressively Reduced Nicotine Content Cigarette

Neal L. Benowitz, Sharon M. Hall, Susan Stewart, Margaret Wilson, Delia Dempsey, and Peyton Jacob III

Cancer, Epidemiology, Biomarkers, and Prevention 2007; 16(11): 2479-85

Reducing the nicotine content of cigarettes to make them non-addictive has been widely discussed as a potential strategy for tobacco regulation. A major concern with nicotine reduction is that smokers will compensate for reduced nicotine by smoking more cigarettes and or smoking more intensively, thereby increasing their exposure to tobacco smoke toxins. This study examined whether gradual reduction in nicotine exposure increases exposure to tobacco smoke toxins.

A 10-week longitudinal study of 20 healthy smokers involved smoking their usual brand followed by different types of research cigarettes with progressively lower nicotine content, each smoked for 1 week. Subjects were followed for 4 weeks after returning to smoking their usual brand (or quitting). Smoking behaviors, chemical biomarkers of tobacco smoke exposure, and cardiovascular effect biomarkers were measured.

The researchers found that intake of nicotine declined progressively as the nicotine content of cigarettes was reduced, with little evidence of compensation. Cigarette consumption and markers of exposure to carbon monoxide and polycyclic aromatic hydrocarbons, as well as cardiovascular biomarkers remained stable, whereas urinary 4- (methylnitrosamino)-1-(3-pyridyl)-1-butanol excretion decreased. Twenty-five percent of participants had spontaneously quit smoking 4 weeks after completing the research cigarette taper.

These findings with reduced nicotine content cigarettes differ from those of commercial low yields for which compensatory smoking for lower nicotine delivery is substantial. The data suggest that the degree of nicotine dependence of smokers can be lowered without increasing their exposure to tobacco smoke toxins. Gradual reduction of nicotine content of cigarettes seems to be feasible and should be further evaluated as a national tobacco regulatory strategy.

“Gradual reduction of nicotine content of cigarettes seems to be feasible and should be further evaluated as a national tobacco regulatory strategy.”
Faculty Spotlights

Robin L. Corelli, PharmD  
Associate Professor of Clinical Pharmacy

Dr. Corelli is a pharmacist with a primary interest in tobacco cessation education and training. She has co-coordinated, with other Tobacco Center members (Drs. Hudmon and Kroon), an effort to develop, evaluate, and disseminate a comprehensive tobacco cessation training program, Rx for Change: Clinician-Assisted Tobacco Cessation, for students in the health professions.

Mark Eisner, MD, MPH  
Associate Professor of Medicine

A major focus of Dr. Eisner’s research program is cigarette smoking and secondhand tobacco smoke (SHS) exposure among adults with asthma. To study the effects of SHS exposure, Dr. Eisner has been using an approach that combines survey-based and direct personal exposure monitoring. He designed a survey instrument that measures recent SHS exposure in commonly encountered microenvironments. To validate this instrument, he used passive badge monitors that measure actual exposure to ambient nicotine in a cohort of 50 adults with asthma. Using this survey instrument, Dr. Eisner also showed that SHS exposure contributes to poor asthma control. Moreover, Dr. Eisner is also studying the impact of directly measured SHS exposure on longitudinal health outcomes in his Kaiser cohort of adults with severe asthma. In addition, he has designed and performed a series of epidemiologic studies that demonstrated the adverse impact of SHS exposure on asthma health outcomes, pulmonary function, and other respiratory health outcomes.

Suzanne Harris, RN, CTTS  
Co-Founder and Nurse Administrator  
UCSF Tobacco Education Center

Suzanne Harris is a Nurse and Certified Tobacco Treatment Specialist who, for nearly 25 years, has worked in medical settings helping smokers become smoke free. A former smoker, she is known for her compassionate and nonjudgmental approach in treating tobacco dependence. In addition to presenting information about tobacco’s impact on health and the neurobiology of nicotine dependence, she guides her patients in understanding, recognizing and developing effective self-motivation for behavior change.

Margaret Walsh, MA, MS, EdD  
Professor, Preventive and Restorative Dental Sciences

Dr. Walsh has conducted research on tobacco use and cessation since 1986. She has served as Principal Investigator (PI) for five large-scale, randomized-controlled tobacco cessation intervention trials funded by the NIH and the California Tobacco-Related Disease Research Program.

Did you know? The programs and activities of the CTCRE are supported by private gifts as well as government and foundation funds. Many critical and innovative programs of the CTCRE are made possible in part by gifts from individuals and family foundations. If you or your organization would like to find out more about a specific program or make a donation, please contact Karen Williams, Assistant Director, at 415-476-4683 or by email at karen.williams@ucsf.edu for more information.