Smokeless Tobacco – December 2009

A Research Update from the National Institute on Drug Abuse

What is Smokeless Tobacco? There are two types—snuff and chewing tobacco. Snuff, a finely ground or shredded tobacco, is packaged dry, moist, or in porous tea bag–like pouches. Typically, the user places a pinch or dip between the cheek and gum. Chewing tobacco is available in loose leaf, plug, or twist forms, with the user putting a wad of tobacco inside the cheek. Smokeless tobacco is sometimes called "spit" or "spitting" tobacco because people spit out the juices and saliva that build up in the mouth*.

Is Smokeless Tobacco Addictive? Yes, all tobacco, including smokeless tobacco, contains nicotine, which is addictive. The amount of nicotine absorbed from smokeless tobacco is 3-4 times that delivered by a cigarette, and while nicotine is absorbed more slowly from smokeless tobacco, more nicotine per dose is absorbed and stays in the bloodstream for longer. Furthermore, when a smokeless tobacco user tries to quit, they can experience an array of withdrawal symptoms, including craving, irritability and depressed mood, which can cause them to resume their use*.

Who Uses Smokeless Tobacco Products? Americans spent $2.6 billion dollars on smokeless tobacco products in 2005 compared to $82 billion on cigarettes, and while cigarette sales are recently declining, smokeless tobacco sales continue to grow, tripling between 1986-2005i, ii.

- 8.7 million Americans (3.5% of the population) aged 12 and older were current (past month) users of smokeless tobacco products in 2008, most commonly young adults ages 18 to 25.iii
- Men are more than 10 times more likely than women to report using smokeless tobacco in the past month: 6.8% of men age 12 and older compared to 0.4% of women.iii
- While there have been declines in cigarette smoking among teens since the mid-1990s, the use of smokeless tobacco has been mostly unchanged for the past five years, with increases seen among 10th graders between 2008 and 2009.iv
- 13.4% of high school boys (and 2.3% of girls) are current users of smokeless products; among high school seniors who ever used smokeless tobacco products, almost 75% began by the 9th grade.v
- There was a 47% increase in the number of new smokeless tobacco users between 2002-2008.v
  - 73% of the 1.4 million new smokeless tobacco users in 2008 were male, and a little more than half (52.5 percent) were under age 18 when they first used. v

What is the Relationship between Smokeless Tobacco and cigarette use?
- Overall, 85.8% of past month smokeless tobacco users also smoked cigarettes at some time in their lives; 38.8% used cigarettes in the past month.vi
• 31.8% of those using both smokeless tobacco and cigarettes in their lifetime began using smokeless tobacco first; 65.5% used cigarettes first and 2.7% initiated use of both products at the same time.\(^{vi}\)


<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total Cigarette Use</th>
<th>Past Month Cigarette Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>85.80%</td>
<td>84.10%</td>
</tr>
<tr>
<td>Aged 26 or older</td>
<td>29.30%</td>
<td>66.90%</td>
</tr>
<tr>
<td>Aged 18 to 25</td>
<td>52.80%</td>
<td>92.20%</td>
</tr>
<tr>
<td>Aged 12 to 17</td>
<td>84.90%</td>
<td></td>
</tr>
</tbody>
</table>

### Why is Smokeless Tobacco Bad for your Health?*

- Chewing tobacco and snuff contain 28 carcinogens (cancer-causing agents).
- Smokeless tobacco increases the risk for cancer of the oral cavity, which can include cancer of the lip, tongue, cheeks, gums, and the floor and roof of the mouth.
- Other effects include oral leukoplakia (white mouth lesions that can become cancerous), gum disease, and gum recession (when the gum pulls away from the teeth).
- Possible increased risks for heart disease, diabetes, and reproductive problems are being studied.

### Can smokeless tobacco products be used to quit smoking cigarettes?

No. All tobacco use causes disease and addiction and thus should be avoided or discontinued. An average of 400,000 Americans switch from cigarettes to smokeless tobacco products each year, many in an effort to quit smoking. However, almost 90% of daily smokers who initiated smokeless tobacco use as a means to quit smoking were still smoking daily 6 months later.\(^{vi}\)

### How to Quit

There are several effective smoking cessation treatments, including pharmacotherapies such as nicotine replacement therapy (including nicotine gum, patches or lozenges), buproprion SR (Zyban), Varenicline (Chantix), as well as individual and group counseling, which may also prove useful for people trying to quit smokeless tobacco. In addition, the U.S. Department of Health and Human Services has established a national telephone quit-line, 1-800-QUIT-NOW (1-800-784-8669), to assist users of tobacco seeking information and assistance in quitting and a new website (www.smokefree.gov) which offers online advice and downloadable information to make cessation easier.

---


\(^3\) SAMHSA. 2008 *National Survey on Drug Use and Health: National Findings*. DHHS NSDUH, Office of Applied Studies. Available on line: [http://www.oas.samhsa.gov/2k8nsduh/2k8Results.pdf](http://www.oas.samhsa.gov/2k8nsduh/2k8Results.pdf)


For further information please visit NIDA on the web at www.drugabuse.gov or contact:
Public Information and Liaison Branch Office of Science Policy and Communications Phone 301-443-1124/Fax 301-443-7397 information@nida.nih.gov