

THE HISTORY
OF DRUGS

Nicotine

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**THE HISTORY
OF DRUGS**

Nicotine

Emma Carlson-Berne, Book Editor

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**THE HISTORY
OF DRUGS**

CHAPTER 3

Government Efforts
to Prevent Nicotine
Addiction, 1960–2000

The U.S. Surgeon General's First Report on Smoking

Michael Housman

In the following selection Michael Housman argues that the U.S. surgeon general's report on smoking in 1964 was a turning point in the antismoking movement. In the report Surgeon General Luther Terry stated unequivocally that smoking causes cancer and other health problems. The document had a lasting and profound effect on smoking in America, causing cigarette sales to drop to a level from which they have yet to recover. Housman explains that three factors converged to cause this decline in sales: the influence of the surgeon general, the scientific legitimacy of the report's findings, and the widespread media campaign that accompanied the report. Michael Housman is a doctoral student at the University of Pennsylvania.

On Saturday, January 11, 1964, the U.S. Surgeon General Luther Terry approached the podium of the State Department auditorium to deliver the results of an exhaustive literature review through a 387-page report entitled "Smoking and Health: Report of the Advisory Committee to the Surgeon General of the Public Health Service." There, the government sealed off 200 reporters and the ten members of the Surgeon General's Advisory Committee on Smoking and Health from the rest of the world. Inside the auditorium, Terry offered a two-hour exegesis [explanation] on the report, which amplified the one paramount judgment that "cigarette smoking is a health hazard of sufficient importance in the United States to warrant appropriate remedial action." The committee's report made front-page headlines throughout the country and was

Michael Housman, "Smoking and Health: The 1964 U.S. Surgeon General's Report as a Turning Point in the Antismoking Movement," *Harvard Health Policy Review*, vol. 1, Spring 2001, pp. 118–26. Copyright © 2001 by *Harvard Health Policy Review*. Reproduced by permission of the publisher and the author.

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featured prominently on news broadcasts. Nevertheless, the press almost uniformly predicted that while smoking rates might decline in the immediate future, the smoking habit would inevitably prevail and the American public would not permanently change their use of tobacco products. More than thirty years later, smoking rates of American adults have been cut almost in half from 46% to 25% and it appears inevitable that this decline will continue. What caused the media to make such erroneous predictions? What separated this report from the numerous other reports and studies that had been written long before it?

Three major explanations emerge to distinguish this striking phenomenon: (1) the legitimacy, authority, and objectivity of the Surgeon General; (2) the meticulous accumulation and aggregation of scientific evidence that characterized the study; and (3) the widespread campaign that publicized the findings of the report. As a result, despite its rather predictable conclusions, Luther Terry's famous announcement marked an important turning point in the anti-smoking movement, precipitating a decline in smoking that has lasted to the present day.

History and Substance of the Report

In May of 1962, President John F. Kennedy spoke at the very same podium in the State Department auditorium. In response to a question about health hazards attributed to smoking, he responded, "That matter is sensitive enough and the stock market is in sufficient difficulty without my giving you an answer that is not based on complete information, which I don't have." A few weeks later, after examining material gathered by the Public Health Service, Kennedy instructed Terry to go ahead with a plan he had proposed in April to appoint an Advisory Committee on Smoking and Health. After consulting with the tobacco industry, private health organizations, and several federal agencies, Terry picked ten distinguished scientists (who had not taken public positions on the health effects

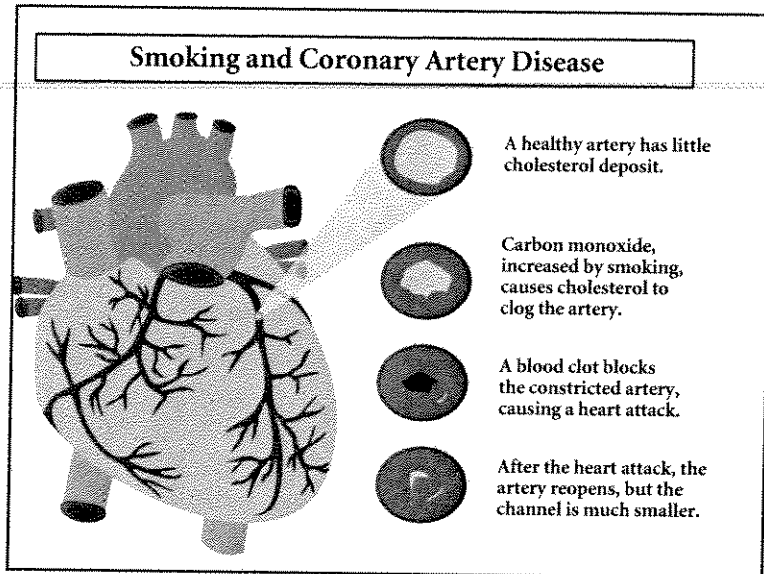
of smoking) to hold nine meetings between November 1962 and December 1963. They reviewed more than 7,000 articles, including 3,000 research reports, and reported its findings two months after Kennedy's assassination.

The Announcement

On Saturday, January 11, 1964, [according to journalist Marjorie Hunter] newsmen, government workers, and tobacco industry spokesmen “puffed self-consciously on cigarettes” in the lobby and corridors outside the State Department auditorium after nine “no smoking” signs had been fastened to the walls inside. Meanwhile, Terry delivered the conclusions of the project for which the principal finding was as follows:

Cigarette smoking is associated with a 70% increase in the age-specific death rates of males. The total number of excess deaths causally related to cigarette smoking in the U.S. population cannot be accurately estimated. In view of the continuing and mounting evidence from many sources, it is the judgment of the Committee that cigarette smoking contributes substantially to mortality from certain specific diseases and to the overall death rate.

The committee also found that “cigarette smoking is causally related to lung cancer in men; the magnitude of the effect of cigarette smoking far outweighs all other factors. In comparison with non-smokers, average male smokers of cigarettes have approximately a 9- to 10-fold risk of developing lung cancer and heavy smokers at least a 20-fold risk.” Additionally, the committee concluded that “cigarette smoking is the most important of the causes of chronic bronchitis in the United States, and increases the risk of dying from chronic bronchitis and emphysema.” Furthermore, it “established that male cigarette smokers have a higher death rate from coronary artery disease than non-smoking males.” It even went on to state that while the causative role of cigarette smoking in deaths from coronary artery disease had not yet been proven, “the



committee considers it more prudent from the public health viewpoint to assume that the established association has causative meaning than to suspend judgment until no uncertainty remains." This statement revealed the rather liberal nature of the committee, which chose to assume a causative role in the absence of more evidence rather than taking a wait-and-see stance. In doing so, the committee implicated cigarette smoking as a leading cause of heart attacks, which was the nation's number one killer at the time (577,000 deaths in 1962). Overall, the report indicted cigarette smoking on a number of different offenses and constituted very bad news for the more than seventy million regular smokers in the U.S. . . .

This Report Was Different

It is clear that the 1964 Surgeon General's report signified some sort of departure from previous work in the field as evidenced by the permanent declines in smoking behavior observed in the decades following its release. While the report alone did not accomplish all of this, it marked the beginning

of the most concerted, sustained, and successful effort in history to discourage the use of tobacco. What allowed this report to play such a pivotal role was the convergence of three factors, including the legitimacy and authority of the Surgeon General's office, the meticulous accumulation and aggregation of scientific evidence characterizing the report that resulted in the claim that a "causal" relationship existed, and the widespread campaign that publicized the findings of the report.

While thousands of other studies had been published by individual researchers or partisan organizations such as the American Cancer Society or Council for Tobacco Research (formerly the Tobacco Industry Research Committee), none had the authority, legitimacy or unbiased nature of the U.S. Surgeon General. At the time, few medical authorities were as well respected as the Surgeon General, and Luther Terry's announcement gave the message significant legitimacy by putting the weight of the federal government behind it. . . .

Additionally, a sizeable majority of the reports on smoking and health that were available at the time had either been conducted or funded by openly partisan organizations and the results of such experiments often correlated strongly with the organization that had initiated them. The issue of trust emerged as an obstacle to the ability of Americans to believe how severe the health risks of smoking actually were. However, Luther Terry quite effectively quelled this concern by allowing the creation of the committee to be an open process. [According to the U.S. Public Health Service] the participants "compiled a list of more than 150 scientists and physicians working in the fields of biology and medicine" and "during the next month, these lists were screened by representatives of organizations present at the July 27 [1962] meeting. Any organization could veto any of the names on the list, no reasons being required." Among the representatives in attendance at the July 27 meeting were individuals from all of the major tobacco companies, relevant cancer-related organizations, and

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government officials. As a result, when the findings from the committee had been published, very few individuals chose to criticize them and even the tobacco companies focused instead upon endorsing Terry's call for "not less but more research." All of these factors allowed the Surgeon General's report to differentiate itself from other studies by establishing the credibility of the source from which the controversial message had come.

The Numbers Hit Home

The Surgeon General's report also involved a methodology that had not been employed before, at least within the United States. Rather than generating its own data, it provided a meticulous accumulation of scientific evidence that considered all points of view and generated a coherent and all-encompassing conclusion. With the help of over 144 consultants, the Surgeon General's Advisory Committee on Smoking and Health was charged with the task of reviewing the 7,000 articles and 3,000 reports that were available on the topic. It also considered statements and pertinent information that other interested parties, particularly the tobacco industry, had submitted to it. These studies had come to similar but nevertheless contradictory conclusions as to the extent of the health hazard that smoking posed. The Surgeon General's report accomplished what most other studies had not in that it synthesized the available literature on the topic and provided a "single, authoritative reading of the mounting evidence" [as scholar Allan M. Brandt writes]. The American people could now reliably state that smoking increased one's chances of dying in any given year by 70% rather than anywhere from 0 to 100% as individual studies may have contended. Additionally, by virtue of its study design, the committee was able to utilize the wide array of sources in order to establish a *causal* relationship between smoking and various illnesses, an association that no other study had been able to reliably accomplish. This

achievement was based upon the committee's recognition of the "multiple etiology of biological processes." . . .

Smoking Declines

Though the tobacco industry would continue to dispute this fact to the present day, the ability of the Surgeon General to declare that "cigarette smoking is *causally* related to lung cancer in men" marked an important departure from previous studies which had only been able to demonstrate a strong correlation. The simple use of the word "cause" gave anti-smoking advocates the ammunition they needed to target cigarettes and the tobacco companies as a public health hazard. As a result of this highly effective methodology, the Surgeon General's 1964 report gave the American public a single message equating cigarette smoking with death, thus contributing to the dramatic decline in smoking that was observed immediately after the report was released.

This decline was also the result of a prolonged and widespread publicity campaign that began the instant that the doors to the State Department auditorium were unlocked. As stated previously, the media seized upon this dramatic development that concerned an issue of national importance, and it proceeded to broadcast the words of Luther Terry to all corners of the nation more than it had ever done before. However, the greatest difference between this report and other studies was the fact that various parties made a concerted effort to widely disseminate its conclusions through the use of resources other than the media. One week after Terry's press conference, the Federal Trade Commission [FTC] announced that it planned to require health warnings on every cigarette package and advertisement. Congress superseded FTC action with the Cigarette Labeling and Advertising Act of 1965, which required the warning "Caution: Cigarette Smoking May Be Hazardous to Your Health" on all cigarette packages as of January 1, 1966. Smokers were constantly reminded of the

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consequences of their habits. Additionally, within a couple years, a major campaign began against smoking as advertisements were placed on billboards, television commercials, and magazines, making the information about the health effects of smoking widely available. As a result, “virtually no one growing up in America since the mid-20th century could seriously claim not to understand—or at least to have heard about—the health risks associated with smoking” [scholar Mark E. Lender notes]. The public had been fully informed of the risks of smoking and was allowed to make its own decision, which undoubtedly contributed to the decline in smoking observed in the decades following Luther Terry’s report.

Lasting Effects

Prior to Luther Terry’s announcement on the morning of January 11, 1964, almost anyone in the crowd could have guessed what the underlying theme of his speech would be. Ironically enough, once he was finished, almost no one accurately predicted its monumental effects on the smoking habits of Americans. Terry’s message was simple as he stated in plain English that “smoking causes cancer” in addition to other health problems. Consequently, cigarette consumption began an immediate and sustained decline which has lasted to the present day as the smoking rate has dropped from 46 to 25%. However, it was not the content of the message but rather its context that separated this report from all others that were available at the time. For the first time, this message was delivered by a well-respected and unbiased medical authority, who reviewed all the available literature on the subject to deliver an all-encompassing statement that was widely publicized to all men, women, and children living in the United States. In these three respects, the Surgeon General’s report constituted a remarkable shift from earlier studies and undoubtedly marked the turning point in the anti-smoking movement.

Government Efforts to Prevent Nicotine Addiction, 1960–2000

However, its impact upon smoking rates must be understood in a broader context. The importance of the Surgeon General's report on tobacco cannot be under-stated as a contributing factor in the emergence of a policy environment receptive to various tobacco control strategies. While strategies had existed long before the Surgeon General's report, no successful anti-cigarette campaign could be waged before the causal link between smoking and health problems had been established and accepted by the public. The Surgeon General's report filled this role and provided the impetus for a movement that resulted in dramatic changes in smoking and cancer incidence rates.