This fact sheet provides basic information only. It must not take the place of medical advice, diagnosis or treatment. Always talk to a health care professional about any concerns you have, and before you make any changes to your diet, lifestyle or treatment.

Smoking is the primary cause of premature, avoidable death and disease in Ontario. Over 13,000 Ontarians die each year as a result of tobacco use. In Canada, tobacco-attributed deaths account for approximately 17% of all deaths.

The first U.S. Surgeon General’s report that described the link between smoking and disease was published in 1964. The recent Surgeon General’s report from 2004 provides the most up-to-date information on the health effects of smoking and identifies several new diseases for which smoking is a cause. Most of the information in this fact sheet is from this report.

Smoking harms every organ in the body and causes many different types of cancer, cardiovascular diseases, respiratory diseases, reproductive effects and several other diseases and conditions.

**Cancer**

- Lung cancer is the leading cause of cancer death. Compared to non-smokers, men who smoke are about 23 times more likely to develop lung cancer and women who smoke are about 13 times more likely to develop lung cancer. Smoking causes about 90 per cent of lung cancer deaths in men and almost 80 per cent in women. Lung cancer is lethal, with a 5-year survival rate of only about 15 per cent.

- Smoking also causes many other cancers, including:
  - Pancreatic cancer
  - Stomach cancer
  - Bladder cancer
  - Kidney cancer
  - Cervical cancer
  - Esophageal cancer
  - Laryngeal cancer
  - Oral cancer
  - Leukemia

**Cardiovascular disease**

- Smoking is an important cause of heart disease, stroke, and diseases of the vascular system. Smoking-related cardiovascular disease is responsible for over 4000 deaths in Ontario annually.

- Smoking cigarettes contributes to the development of atherosclerosis. Atherosclerosis is a progressive hardening of the arteries caused by the deposit of fatty plaques and the scarring and thickening of the artery wall. Inflammation of the artery wall and the development of blood clots can obstruct blood flow and cause heart attacks or strokes.

**Respiratory disease**

- Chronic obstructive pulmonary disease, which includes emphysema and chronic bronchitis, is the third leading cause of adult smoking-related death in Canada.

- Smoking is related to chronic coughing and wheezing among adults.

- Smokers are more likely than non-smokers to have upper and lower respiratory tract infections.

- Smoking by children and adolescents is related to impaired lung growth, chronic coughing, and wheezing.

- Women’s smoking during pregnancy reduces their babies’ lung function.

**Reproductive effects**

- Smoking harms many aspects and every phase of reproduction.
• Studies have shown that smoking makes it more difficult for women to become pregnant.

• Research also has shown that smoking during pregnancy causes health problems for both mothers and babies, such as pregnancy complications, premature birth, low birth-weight infants, stillbirth, and Sudden Infant Death Syndrome (SIDS).

Other diseases and conditions

• Smoking reduces bone density among post-menopausal women.

• Smoking is causally related to an increased risk for hip fractures in men and women.

• Smokers have two to three times the risk of developing cataracts as non-smokers. Cataracts are the leading cause of blindness worldwide.

• Smoking causes peptic ulcer disease.

• Smoking causes diminished health status (e.g., decreased productivity, increased use of medical services, difficulty healing after surgery)

Benefits of quitting smoking

Quitting smoking results in immediate and significant health benefits for smokers and non-smokers.

• Smoking cessation decreases the risk of lung cancer, other cancers, heart attack, stroke, and chronic lung disease.

• One year after quitting smoking, the excess risk of having a heart attack is cut by 50 per cent, relative to those who continue to smoke.

• Women who stop smoking before pregnancy or during the first 3 to 4 months of pregnancy reduce their risk of having a low birth-weight baby to that of women who never smoked.

• Smoking cessation decreases the excess risk of many diseases related to second-hand smoke in children, such as respiratory diseases (e.g., asthma) and ear infections.

References


