

# There is strong community support for smokefree public places.

## Under Queensland's tobacco laws, the following places are smokefree:

- Inside public venues, such as workplaces, offices, hotels, clubs and restaurants.
- Commercial outdoor eating or drinking venues.
- Within 10 metres of children's playground equipment.
- Within four metres of non-residential building entrances.
- Between the flags on patrolled beaches.
- At major sporting stadiums.
- In cars carrying children under the age of 16 years.

For further information on Queensland's tobacco laws, visit the [Queensland Health website www.health.qld.gov.au/tobaccolaws](http://www.health.qld.gov.au/tobaccolaws) or call the [Queensland Government Call Centre on 13 13 04](http://www.health.qld.gov.au/tobaccolaws).

### Reference:

1. U.S. Department of Health and Human Services. The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006

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## How to quit

Quitting smoking is the best way to eliminate passive smoking from the lives of your family and friends. To improve your chance of quitting smoking for good, it is a good idea to plan ahead. You may find these tips useful:

- **Get support:** Call Quitline 13 QUIT (13 7848) for free information, practical assistance and support. Quitline's trained counsellors are available seven days a week to help you get through the process of quitting.
- **Talk to your health professional:** Discuss quitting smoking with a general practitioner, pharmacist or community health worker, and plan your quitting strategy together.
- **Consider using pharmacotherapy:** Different products are available to help you quit smoking. Nicotine Replacement Therapy (NRT) includes patches, gum, lozenges, sublingual tablets and inhalers. The aim of NRT products is to replace some of the nicotine from cigarettes without the harmful chemicals found in tobacco smoke, thus reducing withdrawal symptoms such as cravings and anxiety. Bupropion Hcl and Varenicline are non-nicotine medications, that are also effective in helping smokers to quit.
- **When the urge to smoke strikes, remember the '4Ds':**
  - Delay:** Delay for at least five minutes and the urge will pass.
  - Deep breathe:** Breathe slowly and deeply.
  - Drink water:** Take 'time out' and sip water slowly.
  - Do something else:** Ring a friend or go for a walk.



### Further information:

[www.quitnow.info.au](http://www.quitnow.info.au) • [www.cancerqld.org.au](http://www.cancerqld.org.au)  
[www.health.qld.gov.au/quitsmoking](http://www.health.qld.gov.au/quitsmoking)  
Cancer Council Helpline 13 11 20

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# Passive smoking



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**Smokers not only put themselves at risk of serious health problems, they also put the people around them at risk to the toxic chemicals in tobacco smoke.**

**Passive smoking is a proven health hazard, with more than 600 published medical reports linking passive smoking to diseases.**

## What is passive smoking?

The process of smoking produces three different types of tobacco smoke:

- 1. Mainstream smoke:** Smoke directly inhaled by the smoker through a burning cigarette.
- 2. Exhaled mainstream smoke:** Smoke breathed out by the smoker.
- 3. Sidestream smoke:** Smoke which drifts from the burning end of a cigarette.

Passive smoking, sometimes referred to as second-hand smoke, is the inhalation of exhaled mainstream smoke and sidestream smoke.

## What are the health effects of passive smoking?

Tobacco smoke contains more than 4,000 chemicals and at least 69 of these are known to cause cancer. Non-smokers with long term exposure to tobacco smoke have up to a 20 per cent higher risk of developing lung cancer when compared to non-smokers who have not been exposed.

The more time non-smokers spend exposed to tobacco smoke, the worse the risk to their overall health.

Evidence about the dangers of passive smoking continues to mount, with a recent U.S. Surgeon General's report confirming that there is no safe level of exposure to tobacco smoke, and that passive smoking is related to many adverse health effects<sup>(1)</sup>.

Passive smoking causes lung cancer and coronary heart disease in adults. It has also been suggested that passive smoking may cause:

- Breast cancer.
- Nasal sinus cancer.
- Stroke.
- Acute and chronic respiratory symptoms.
- Onset of asthma and worsening of asthma.
- Respiratory symptoms such as coughing and wheezing.
- Pre-term delivery.

In addition, some effects of passive smoking are immediate, including:

- Eye and nose irritation.
- Sore throat.
- Cough.

## What about passive smoking and children?

Smoking around a pregnant woman can harm her unborn baby. Nicotine, carbon monoxide and other toxic chemicals from tobacco smoke are absorbed into the woman's bloodstream and can pass to the unborn baby. As a result, the baby is at increased risk of having a lower birthweight. The risk of sudden infant death syndrome (SIDS) also increases if the mother is exposed to tobacco smoke during pregnancy.

Young children are very susceptible to tobacco smoke because their lungs and immune systems are still developing.

Babies and children exposed to tobacco smoke are at serious risk of:

- Sudden infant death syndrome (SIDS).
- Bronchitis, pneumonia and other lung or airway infections.
- Worsening of asthma.
- Respiratory symptoms such as coughing and wheezing.
- Middle ear disease ('glue ear').

## What about smoking in the home?

The risk of a non-smoker developing a disease related to passive smoking rises with the number of smoking household members and their overall exposure to tobacco smoke. Smoking in another room of the house or opening a window does not eliminate the exposure of non-smokers to tobacco smoke.