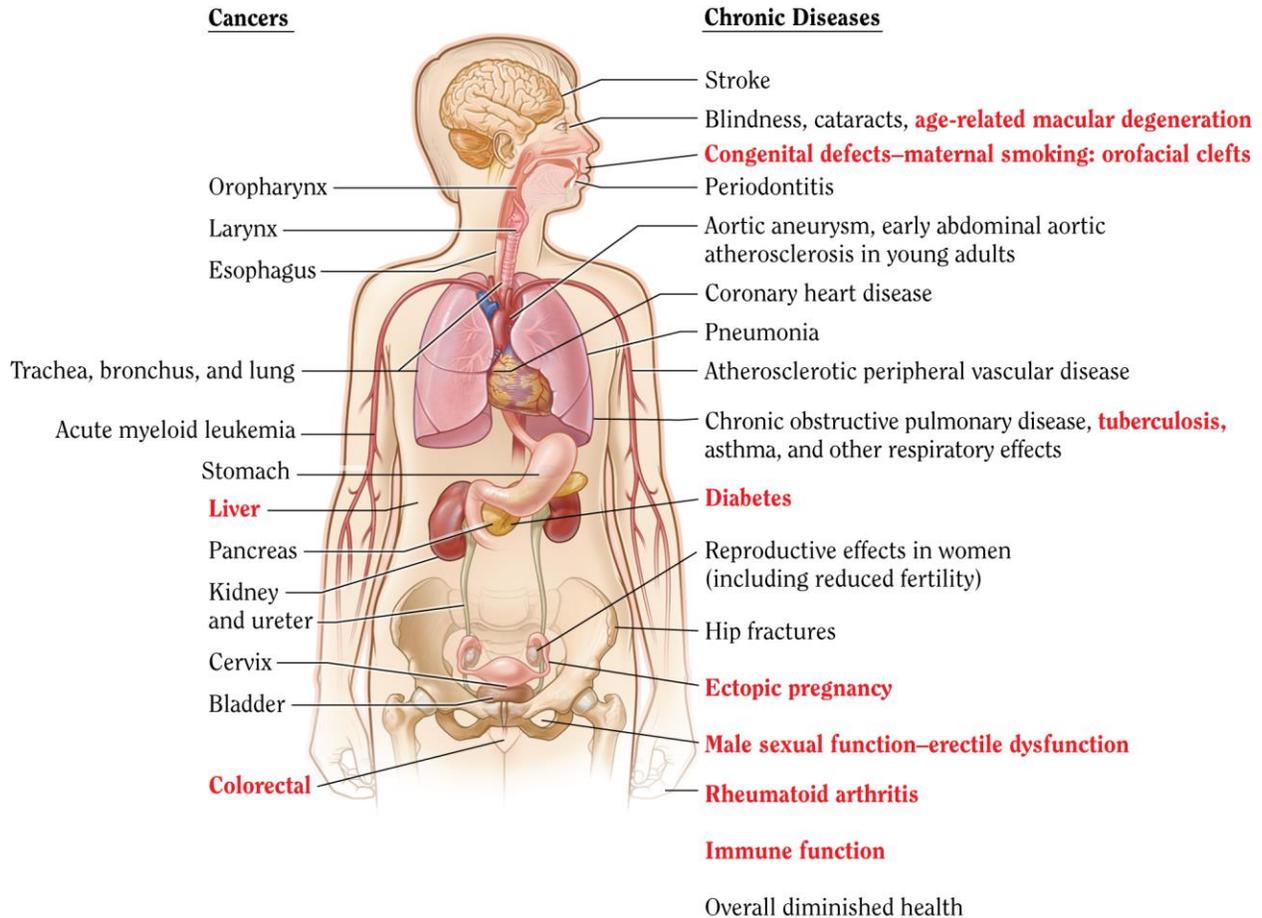


**So, you want to try smoking ? This is what you'll achieve.**  
**It's definitely NOT COOL !**

[http://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/health\\_effects/effects\\_cig\\_smoking/](http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/)





So, what are your chances of dying, prematurely and painfully, from smoking ? it can't happen to me, you think? Do you want to end up being eaten by cancer inside out ?

**“up to two-thirds of deaths in current smokers can be attributed to smoking”**

Research article <http://bmcmmedicine.biomedcentral.com/articles/10.1186/s12916-015-0281-z>

**Tobacco smoking and all-cause mortality in a large Australian cohort study: findings from a mature epidemic with current low smoking prevalence**

BMC Medicine 2015 13:38 DOI: 10.1186/s12916-015-0281-z © Banks et al.; licensee BioMed Central. 2015 Received: 5 November 2014 Accepted: 20 January 2015 Published: 24 February 2015

**Abstract** The smoking epidemic in Australia is characterised by historic levels of prolonged smoking, heavy smoking, very high levels of long-term cessation, and low current smoking prevalence, with 13% of adults reporting that they smoked daily in 2013. Large-scale quantitative evidence on the relationship of tobacco smoking to mortality in Australia is not available despite the potential to provide independent international evidence about the contemporary risks of smoking.

**Methods** This is a prospective study of 204,953 individuals aged  $\geq 45$  years sampled from the general population of New South Wales, Australia, who joined the 45 and Up Study from 2006–2009, with linked questionnaire, hospitalisation, and mortality data to mid-2012 and with no history of cancer (other than melanoma and non-melanoma skin cancer), heart disease, stroke, or thrombosis. Hazard ratios (described here as relative risks, RRs) for all-cause mortality among current and past smokers compared to never-smokers were estimated, adjusting for age, education, income, region of residence, alcohol, and body mass index.

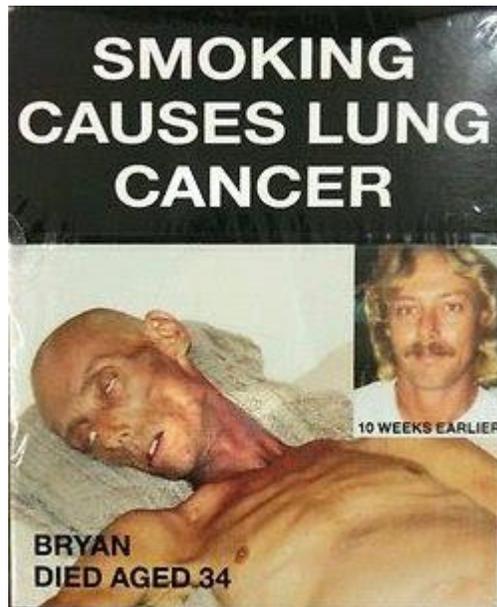
**Results** Overall, 5,593 deaths accrued during follow-up (874,120 person-years; mean: 4.26 years); 7.7% of participants were current smokers and 34.1% past smokers at baseline. Compared to never-smokers, the adjusted RR (95% CI) of mortality was 2.96 (2.69–3.25) in current smokers and was similar in men (2.82 (2.49–3.19)) and women (3.08 (2.63–3.60)) and according to birth cohort. Mortality RRs increased with increasing smoking intensity, with around two- and four-fold increases in mortality in current smokers of  $\leq 14$  (mean 10/day) and  $\geq 25$  cigarettes/day, respectively, compared to never-smokers. Among past smokers, mortality diminished gradually with increasing time since cessation and did not differ significantly from never-smokers in those quitting prior to age 45. Current smokers are estimated to die an average of 10 years earlier than non-smokers.

**Conclusions** In Australia, up to two-thirds of deaths in current smokers can be attributed to smoking. Cessation reduces mortality compared with continuing to smoke, with cessation earlier in life resulting in greater reductions.

**Keywords** Cohort Mortality Smoking

<http://tinyurl.com/ohwluag> ‘The Independent’ Newspaper, UK <http://tinyurl.com/k3bygkf>

QUOTE: “Lead scientist Professor Emily Banks said, [according to the BBC](#): “Even with the very low rates of smoking that we have in Australia, we found that smokers have around threefold the risk of premature death of those who have never smoked. “We also found smokers will die an estimated 10 years earlier than non-smokers.”



- Smoking is directly responsible for approximately 90 percent of lung cancer deaths. Which lung is from the smoker?



**That becomes your insides  
when you smoke.**

## Nicotine Addiction

<http://www1.umn.edu/perio/tobacco/nicaddct.html>

### Drug Addiction Includes the Following:

<ul style="list-style-type: none"> <li>• <b>Physiological dependence:</b></li> </ul>	<ul style="list-style-type: none"> <li>• Tolerance</li> <li>• Dependence</li> <li>• Withdrawal symptoms</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Psychological dependence:</b></li> </ul>	<p>Smokers continue to smoke for a number of psychological reasons:</p> <ul style="list-style-type: none"> <li>• Stimulation</li> <li>• Handling</li> <li>• Pleasurable relaxation</li> <li>• Tension reduction</li> <li>• Habit</li> <li>• Craving</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Sociocultural Factors:</b></li> </ul>	<ul style="list-style-type: none"> <li>• Social activity</li> <li>• Numerous daily rituals</li> <li>• Family origin and cultural practices</li> </ul>

Human genetics, early family experiences, environmental factors and societal influences appear to work together in complex ways, to set the addictive cycle in motion. At times tobacco can act as a *stimulant* and at other times it may produce *tranquilizing effects*.

Nicotine combines with a number of neurotransmitters in the brain and may contribute to the following effects:

<b>Dopamine:</b>	Pleasure, suppress appetite	<b>Norepinephrine:</b>	Arousal, suppress appetite
<b>Acetylcholine:</b>	Arousal, cognitive enhancement	<b>Vasopressin:</b>	Memory improvement
<b>Serotonin:</b>	Mood modulation, suppress appetite	<b>Beta-endorphin:</b>	Reduce anxiety / tension

**Tobacco is as addictive as heroin (as a mood & behavior altering agent).**

- **Nicotine is:**
  - **1000 X more potent than alcohol**
  - **10-100 X more potent than barbiturates**
  - **5-10 X more potent than cocaine or morphine**
- A 1-2 pack per day smoker takes 200-400 hits daily for years. This constant intake of a fast acting drug (which affects mood, concentration & performance).. eventually produces dependence.

Pressures to relapse are both **behaviorally** & **pharmacologically** triggered. Quitting involves a significantly serious psychological loss... a serious life style change.

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### **Possible withdrawal symptoms (after stopping tobacco use):**

- Irritability, anger, hostility, anxiety, nervousness, panic, poor concentration, disorientation, lightheadedness, sleep disturbances, constipation, mouth ulcers, dry mouth, sore throat-gums- or tongue, pain in limbs, sweating, depression, fatigue, fearfulness, sense of loss, craving tobacco, hunger, and coughing (body getting rid of the mucus clogging the lungs).
- Symptoms may last from a few weeks to several months. After withdrawal subsides... urges for nicotine (for the effects of the drug) occur in response to all kinds of cues to smoke or chew.

### **And how long has Big Tobacco known this ?**

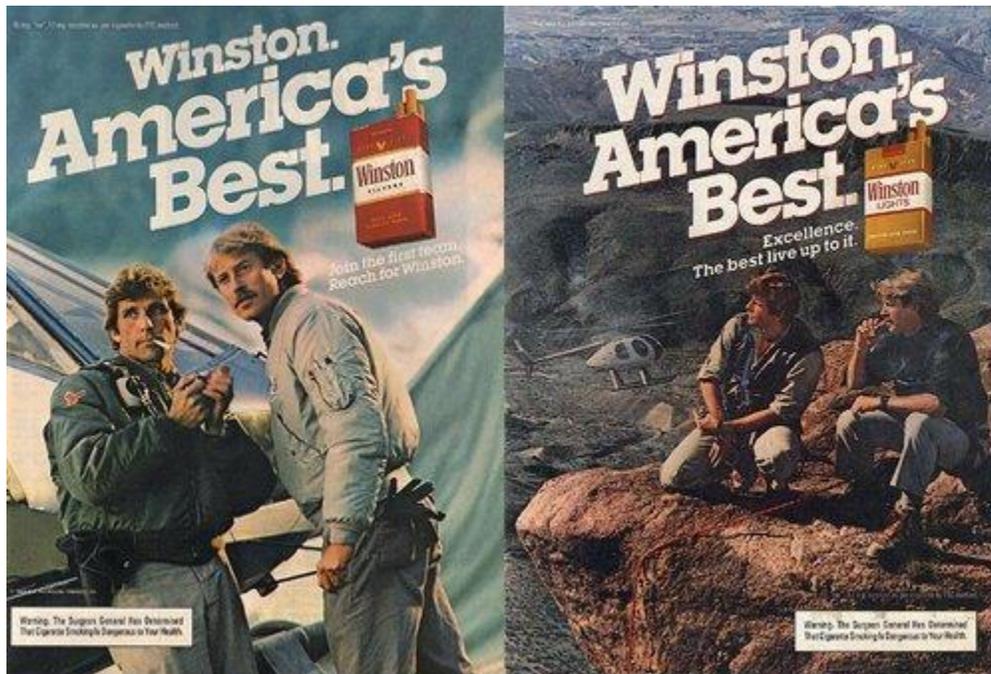
<https://www.tobaccofreekids.org/research/factsheets/pdf/0009.pdf>

**“Moreover, *nicotine* is addictive. We are, then, in the business of selling *nicotine*, an addictive drug effective in the release of stress mechanisms.” July 17, 1963 report by then Brown & Williamson general counsel/vice president Addison Yeaman, Bates No. 1802.05**

**“We have, then, as our first premise, that the primary motivation for smoking is to obtain the pharmacological effect of nicotine.” 1969 Philip Morris draft report by Thomas Osdene, “Why One Smokes,” Bates No. 2046754810/4822**

### **Tobacco Explained - the truth about the tobacco industry ... in its own words**

[www.who.int/tobacco/media/en/TobaccoExplained.pdf](http://www.who.int/tobacco/media/en/TobaccoExplained.pdf)



The 'Winston Man' – actor/model David Goerlitz

<http://www.velvetgloveironfist.com/david-goerlitz-winston-man.php>

<https://www.youtube.com/playlist?list=PLC44F969AA1C9CB32>

David Goerlitz is a former actor and model from New York. Between 1982 and 1988 he was the 'Winston Man', appearing in 42 billboard advertisements - more than the Marlboro man. In 1988, he publicly denounced the tobacco industry and joined the emerging anti-smoking movement. He has spent the last years working in schools as a public speaker, encouraging kids not to start smoking

Quote: RJ Reynolds Tobacco Co Executive to David Goerlitz, the 'Winston Man' 1991:

**“We don't smoke that shit. We just sell it. We reserve the right to smoke for the Young, the Poor, the Black and Stupid.”**

**ASK YOURSELF, WHICH CATEGORY DO YOU FALL UNDER ?**

To the tobacco companies you are just considered as 'growth' and a replacement for natural attrition (dead smokers) – tobacco is the only consumer product which kills when used as advised by its manufacturers.

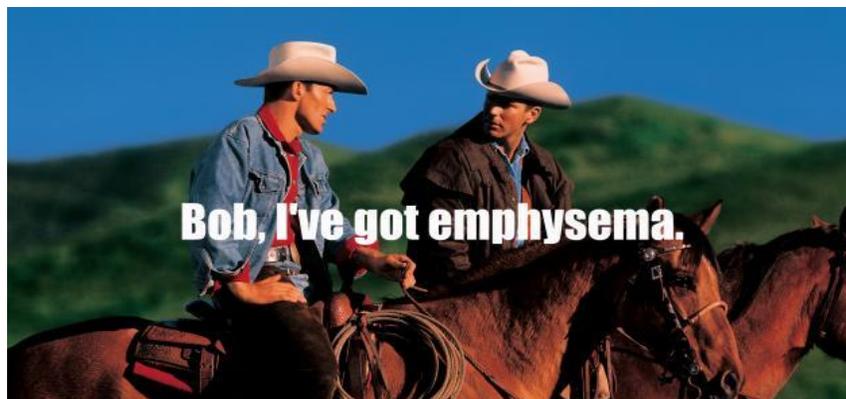
# At least four Marlboro Men have died of smoking-related diseases



**The Marlboro Man** Eric Lawson, pictured in an undated Marlboro advertisement provided by his wife, Susan, died earlier this month. He was the fourth Marlboro Man actor to die of a smoking-related disease. For the longest time, the Marlboro Man was synonymous with America's image of itself -- tough, self-sufficient, hard-working.

In one of the 20th century's [most famous ad campaigns](#), which began in the 1950s, he was a rugged but handsome man who did the jobs that needed to be done, and he almost always had a Marlboro cigarette in his mouth. Today, the reality about the Marlboro Man is darker: **At least four actors who have played him in ads have died of smoking-related diseases.**

The latest was Eric Lawson, 72, who appeared in Marlboro print ads from 1978 to 1981. He died in San Luis Obispo on Jan. 10. "He knew the cigarettes had a hold on him," his wife, Susan Lawson, told the Associated Press. "He knew, yet he still couldn't stop." She said he died of chronic obstructive pulmonary disease, (COPD) which is most frequently [caused by smoking](#). He took up the habit at age 14.



**WISE UP, BEFORE IT'S TOO LATE**