made the plastic hard enough that you could rip the end off and put your shells in them..."

This discourse, not found on the written presentation, between the BAT marketing and product development personnel was obviously not meant for public consumption, nor is it new information that the tobacco industry targets the developing world. A patent search in the UK resulted in no individually heat sealed cigarette applications. What is of great interest to those of us who spend our time searching through pages of internal tobacco industry documents is the significant difference between what is written and what is said. David Schechter, the former BAT lawyer, recently explained the "mental copy rule" to the US Department of Justice, which assumed that anything one would write could end up being used publicly or legally against the company. This leads to the obvious question: Are we overlooking important research tools in the form of non-written material?

References

Comparisons of Eclipse mainstream smoke constituent yields to the yields of very low yielding ultra low “tar” cigarettes (Now Box and Carlton Soft Pack) obtained by machine smoking do not change the fact that Eclipse cigarettes may present smokers with less risk of certain smoking related diseases than other cigarettes. RJRT scientists have recently demonstrated Eclipse is significantly less mutagenic on a per mg “tar” basis than either Carlton Soft Pack or Now Box over a wide range of machine smoking conditions. On a per cigarette basis, Eclipse was less mutagenic than Carlton Soft Pack under all machine smoking conditions tested and was less mutagenic than Now Box when evaluated using the machine smoking conditions mandated by both the Massachusetts Department of Health and the Canadian federal government. In addition, Eclipse was significantly less cytotoxic on both a per mg “tar” basis and a per cigarette basis under the same range of machine smoking conditions.

As noted by Slade et al., smokers typically take larger and more frequent puffs than those specified by the US Federal Trade Commission puffing regimen and they typically smoke Eclipse differently than their usual “usual” brands.

Author’s reply

Swauger argues that based on the weight of the evidence, Eclipse, compared to other cigarettes, may present smokers with less risk of cancer and other smoking-related diseases. He bases this conclusion on “weighing” the scientific research RJ Reynolds Tobacco (RJRT) has conducted on Eclipse. Our study drew the opposite conclusion.

Seasonality in cigarette sales: patterns and implications for tobacco control

Cigarette smoking is the leading public health problem in the USA, contributing to over 400,000 deaths a year. Given its importance, the tobacco control community should be aware of all significant patterns in the consumption of cigarettes and the time of year they occur.

In this letter, monthly data for cigarette sales at the state level for the USA are analysed to test for the presence of seasonality and to characterise the phenomenon. The results reveal a seasonal pattern that is significant both in the statistical sense and in magnitude. This includes a significant drop in the winter months of January and February, and an increase during the summer months of June, July, and August. Because seasonality in sales does not reflect seasonality in production, it must be inferred that the seasonality is driven by wholesale and retail phenomena, including consumption.

The data used in this study are monthly figures for sales of cigarettes by wholesalers aggregated at the state level between January 1983 and July 2000. Until December 1997, the Tobacco Institute was responsible for their collection. For the period following this, the firm Orzechowski and Walker produced the data.

Reference

1 Slade J, Connolly GN, Lymeris D. Eclipse: does it live up to its health claims? Tobacco Control 2002;11:suppl II:i64–70.


Author’s reply

Swauger argues that based on the weight of the evidence, Eclipse, compared to other cigarettes, may present smokers with less risk of cancer and other smoking-related diseases. He bases this conclusion on “weighing” the scientific research RJ Reynolds Tobacco (RJRT) has conducted on Eclipse. Our study drew the opposite conclusion. Our analysis of the Eclipse research suggests that Eclipse is as toxic or more toxic than a number of conventional cigarette brands.

RJRT claims “there is no cigarette like Eclipse” based on a comparison of the smoke chemistry of Eclipse with a typical ultralight, Merit. We tested Eclipse against two other ultralight cigarettes, Now and Carlton, and found the smoke concentrations of four major carcinogens to be similar or lower. This includes a significant drop in the winter months of January and February, and an increase during the summer months of June, July, and August. Because seasonality in sales does not reflect seasonality in production, it must be inferred that the seasonality is driven by wholesale and retail phenomena, including consumption.

The data used in this study are monthly figures for sales of cigarettes by wholesalers aggregated at the state level between January 1983 and July 2000. Until December 1997, the Tobacco Institute was responsible for their collection. For the period following this, the firm Orzechowski and Walker produced the data.
Two methods were used to examine seasonality. The first was spectral analysis, which identifies cyclical patterns in the data. If a cycle of a particular length is revealed to be important, then a systematic phenomenon is identified. The second was Bartlett’s test for seasonality (p value for Bartlett’s test).

Using the seasonality analysis, a number of indicators were generated. The values in table 1, column 3 correspond to the number of indicators were generated. The p value for Bartlett’s test was highly significant for all states. At a significance level of 5%, the null hypothesis of no stable seasonality in the data would be statistically different from that produced by a white noise or random process (table 1, column 2).

Next, to identify the months for which sales were significantly different from that produced by a uniform random process (table 1, column 2).

In percentage terms, the seasonal effect is large—column 4 shows, the mean annual range (difference between high and low factors) across the 17 years is about 30%. To put this in perspective, assuming a price elasticity of −0.4, a 30% drop in sales would require a 75% increase in cigarette prices!

The following is an example of some of the results:

<table>
<thead>
<tr>
<th>State</th>
<th>Spectral analysis (p value for Bartlett’s test)</th>
<th>Stable seasonality test (p value)</th>
<th>Seasonal factor range</th>
<th>Months with extreme seasonal effects (month name and number of times the month is a high-2 or low-2 seasonal factor)</th>
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</table>

*All 34 (17×2) possible occurrences of “high-2” or “low-2” months are represented by the two trial “most frequent” months.
†This was confirmed by parallel analyses of production data and discussions with an expert on the production of tobacco.
sales, and June, July, and August, a “high” season.
Possible causes of seasonality include the effect of climate on smoking (low in cold weather and high in mild weather, especially in view of now widespread indoor smoking restrictions across the USA), the timing of tax changes (December-January or June-July), the timing of the new fiscal year (June-July), the timing of school year (August-June), and the timing of quitting efforts tied to New Year’s resolutions (December-January). In the obvious extension to this research, the determinants of this potentially important statistical phenomenon will be analysed in detail.

The present findings demonstrate that sales of cigarettes in the USA have a strong seasonal component. This has potential implications for the timing of cessation initiatives and other time dependent policies. The phenomenon of seasonality could hold the key to significant advances in tobacco control and in the management of a leading public health problem.

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Acknowledgments

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References

3 Orzechowski W, Walker RC. Monthly state-level data on tax-paid cigarette sales. Electronic file provided to Frank Chaloupka. (See also, for example, Orzechowski W, and Walker RC. The tax burden on tobacco: historical compilation, 1999. Arlington, Virginia: Orzechowski and Walker.)

Way-out developments at BATCO

Working in tobacco control, it is easy to get the impression that the tobacco industry is a united front, with all parties carefully avoiding internal divisions that might undermine the greater struggle against the “antis”. However, tobacco industry documents that have been made public as a result of litigation in the USA frequently reveal ruthless competition for market share, as well as intense suspicion about competitors’ activities. This was brought home to us recently when reading a 1977 document on “developments in the scientific field” by Dr Sydney J Green, then British American Tobacco’s (BAT’s) senior scientist for research and development.1 After several pages of unremarkable reports on industry and external research on low tar cigarettes and smoking and health, Green informed his readers about two “way-out” developments at BAT:

• Way-out development 1: “A way-out development is that of compounds (such as etorphine) which are 10,000 times as effective as analgesics [such as morphine and which are very addictive. It is theoretically possible (if politically unthinkable) to add analytically undetectable quantities of such materials to cigarettes to create brand allegiance. But this thought may suggest the possibility of such compounds occurring naturally.”

We are grateful to Dr Green for clarifying what “brand allegiance” really means for the tobacco industry.

• Way-out development 2: “Another way-out development, which arises from work done in a quite different area, is that it would now be quite feasible and quite inexpensive to produce an unacceptable off-taste in cigarettes from some factories for a prolonged period without approaching nearer than half to one mile.”

In the same spirit of scientific curiosity which no doubt motivated the BATCO researchers, we would be very interested to know the formula for this substance. On a more serious note, while we were not able to come up with any plausible candidates for a substance that could make way-out development 2 feasible, we are concerned that Green was right about the feasibility of adding etorphine or some other addictive substance to cigarettes.

Green’s report followed an earlier memo from Kieh D Kilburn to CI Ayres,3 expressing
concern about what BATCO’s competitors might be doing to their “low delivery ciga-
rrettes” (that is, low machine measured tar and nicotine yield cigarettes) in order to create brand allegiance. Kilburn proposed that a regular etorphine dose of as little as 0.2 g per day would be sufficient to create an addictive craving for the source. He also claimed that the required delivery of around 7 ng per cigarette (or around half the delivery of benzo[a]pyrene) would be analytically difficult to measure.

Etorphine is a powerful drug with heroin-like effects, which include respiratory failure in the case of overdose. It may be more familiar to the public as the "elephant juice"—a veterinary drug with such high potency that a tiny quantity injected from a dart can immobilise an elephant.

The dangers of etorphine to humains have been dramatically demonstrated in incidents during veterinary use, as there have been fatal overdoses to veterinarians attempting to dart large unruly animals. Reputedly, a mere scratch from an etorphine dart has been sufficient in some cases to provide a fatal overdose. As a consequence of these fatalities, veterinarians who are registered to use etorphine must now have an assistant standing by with a dose of an etorphine antagonist in hand.

These observations on the dangers of etorphine underscore Green’s and Kilburn’s essential point: very low concentrations of certain psychoactive substances may be sufficient to produce important effects, including addiction. Fortunately, etorphine has become much more readily detectable in recent years than Green and Kilburn suggested was the case. Because forensic toxicologists have put considerable effort into developing highly sensitive detection methods. However, in a world market with minimal regulation of cigarette additives and limited testing capacity outside the industry’s own laboratories, we should remain concerned about what the tobacco industry might be willing to do in order to create ‘brand allegiance’.

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How to critique consultancy reports?
The recent proposals for smoke-free legislation in many countries have spawned a multitude of studies which attempt to predict the financial impact of such legislation. As described by Scoll et al. in this issue of Tobacco Control, many of these studies fail to achieve basic quality standards and this is more likely when the tobacco industry funds the study. However, findings from such flawed studies can influence policy makers and it is essential that public health advocates have strategies to counter their impact.

In Hong Kong in 2001, the government proposed to make all workplaces, including catering venues, smoke-free. A consultancy report for the catering industry, funded by the tobacco industry, was published shortly after and concluded that the legislation would cause catering industries revenues to drop by 10.6% leading to job losses. This report was based on a survey of customers to catering venues, self reported spend on eating and drinking out, and self predicted changes in the event that catering venues were made smoke-free. Since the methods used were not made clear in the report, we had to attempt to validate or refuse the report mainly by an assessment of its findings. We found the following questions useful:

1. Was the sample used for the consultant’s survey representative of the population being studied (customers of catering venues)? Since we could not access the sample selection was done properly, we had to look at sample characteristics. The prevalence of smokers was much higher than in other survey data indicating a bias in the sample.

2. Did the data, when extrapolated/aggregated, agree with other standard data sources—for example, government statistics? Much of the basic data collected by the consultants was not disclosed in their report but, if any of these prevalence of smokers was more than in other survey data indicating a bias in the sample.

3. Could the consultant’s findings be reproduced to shed light on the methods used? Using a new set of data based on random sampling, we tried to recreate the consultant’s findings by deliberately introducing biases and incorrect aggregations which we suspected were present in the consultant’s methods. In this way we were able to produce an almost identical set of results from the new data. On the other hand, when we analysed the new data in an appropriate fashion, we predicted a rise of 5% rather than a drop of nearly 11% in catering revenues. The best means of influencing policy on smoke-free catering venues is to use objective outcome measures and data collected both before and after the intervention, as recommended by Siegel. Using data from consultation reports, the study we were able to refute would have failed Siegel’s quality criteria. However, since much of the lobbying against smoke-free legislation is done before such policies are put in place, local objective, before and after data are inevitably not available. In our case, presenting our rebuttal of the consultant’s findings along with the evidence accumulated from overseas studies that smoke-free policies do not harm catering industry revenues, greatly reduced the harm that the consultant’s report could have done to the proposed legislative process. Our approach may be helpful to policy makers faced with a similar situation in their own locality.

References

How to critique consultancy reports?

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Interest in nicotine replacement therapy among pregnant smokers

In the UK nicotine replacement therapy (NRT) may now be considered for those pregnant women who cannot otherwise stop smoking. However, very little research has been carried out with NRT during pregnancy and the level of interest in using NRT is not known. This letter reports the results of a survey to assess the level of interest in using NRT among pregnant smokers. Across a seven month period pregnant smokers were identified using the patient administration system of a large district general hospital in south west London. Ethical approval was obtained and participants gave verbal consent via the reception. Identified as smokers at their first antenatal booking visit were telephoned within one week of this visit and invited to take part in the survey. The interview took place during the initial telephone call or during a further call within 48 hours of the initial call. All statistical tests were two tailed.

Demographic information was obtained from patient records. All the women were asked “Can I just check, are you still smoking at the moment?” (“yes” or “no”). Those still smoking were asked “About how many a day would you say you are smoking at the moment?”, “Are you thinking at all about stopping?” ("yes" or "no"). Those expressing an interest in stopping were asked “Do you think you might want to stop in the next month, or might you prefer to try a bit later on” and “Would you be interested in receiving some help from the hospital with stopping?” (“yes” or “no”). Women stating an interest in receiving help were asked “Some forms of nicotine replacement therapy (NRT) can now be used by pregnant smokers who feel they wouldn’t be able to stop without it. Would you choose to use NRT to help you to stop smoking?” (“yes” or “no”). Of the 207 smokers interviewed (fig 1 the large majority were not in professional/managerial occupations (85.0%, 176/207), were white (75.8%, 157/207), and attended managerial occupations (85.0%, 176/207), and attended large majority of those women reporting that they were thinking about stopping smoking 44.7% (67/ 150) expressed an interest in using NRT. Interest in NRT was higher among women who reported smoking more cigarettes per day (analysis of variance (ANOVA): F = 7.6, 120, 2001, 2002. URL www.tobaccocontrol.bmj.com/ Tob Control: first published as 10.1136/tc.12.1.108-a on 1 March 2003. Downloaded from http://tobaccocontrol.bmj.com/ by guest. Protected by copyright.
The distinction between a cigarette and a cigar has important legal and financial implications. Since the wrapper of a cigar contains tobacco, cigars are taxed at the same rate as small cigars. In 2002, the US federal tax rate for small cigars was 4 cents per pack of 20, while the rate for cigarettes was 39 cents per pack of 20.4 While all 50 states impose a tax on cigarettes, only 45 states impose a tax on cigars,5 which are lower than their cigarette tax.1 If Voodoo cigars are taxed at the rate of cigars, the lower federal and state taxes means a higher profit margin for the merchant and/or lower prices for consumers.

In addition to tax differences, labelling the Voodoo product as a cigar has important consequences for their regulation. Several states have expanded their definition of tobacco products to include bids, making sales to minors illegal. Illinois, Vermont, and West Virginia banned the sale of bids completely.6 More recently, California passed a bill prohibiting the sale, distribution or importation of bids except by businesses that prohibit minors, such as bars and casinos.6 Also, federal legislation to halt the importation of bids into the USA was introduced in 2001.7 By being sold as a cigar product, Voodoo cigars would get around the ban on bidia sales in some states.

This new product emerges at a time when bidia sales are vulnerable to increased regulation at the state, and possibly the federal level, as well as higher cigarette excise taxes in 19 states in 2002.8 The Voodoo cigar may be a clever way for the tobacco industry to circumvent the regulations and restrictions imposed on bids. Voodoo cigars should be reliably tested to determine if manufacturers and vendors are in compliance with federal and state laws.

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References
Smoking in children’s picture books

The other day, one of the authors went to a public library with his 3 year old daughter to read some picture books to her. Various picture books, from classic to newly published, were available. Classic books are her favourite. First, she chose a book portraying adventures of a naughty monkey named Curious George (by HA Rey). He came to an industrialised country with a man in a yellow hat. My daughter pointed to a picture of the man holding a pipe between his lips. A smoking scene in a picture book for small children!

The next book she chose depicted an elephant named Babar (by Jean De Brunhoff) that fled from his country to Europe after his mother was killed by men. After coming back to his country with western technologies, he changed elephant society into Western-style society and became a king. Again, the King Babar was holding a pipe.

The third book was depicting a monster named Barbapapa living with François’ family (by Tison and Taylor). He had a mysterious ability to metamorphose into anything he desired. Unfortunately, in this attractive book, François’ father was always holding a pipe. Another supporting character was smoking a cigar. Smoking seems to be a symbol of manhood in these children’s picture books.

My daughter then opened books about Moominvalley (by Tove Jansson) and Tintin’s adventures (by Herge) in which some characters were smoking. Finally, I myself selected a book depicting Father Christmas (by Raymond Briggs). On Christmas Eve, Father Christmas delivered presents to children all over the world. After the labourious job, he took a rest smoking a cigar and a pipe.

Picture books reflect the norms or perceptions of our societies. These classic children’s books were first published in times when smoking was not widely acknowledged as harmful and a smoking male adult was one of the sex stereotypes. In addition, pipe smoking seems acceptable in such picture books compared with cigars or cigarettes which are seldom seen.

Caregivers frequently read picture books aloud to children at home, kindergartens, or daycare centres, which may have a considerable influence on preschool children. Young children receive strong messages from pictures. Seeing adult males smoking in picture books, they may take it as a desirable behaviour.

It would be unacceptable to remove smoking scenes from these classic books or eliminate the books themselves. What we can do is to become aware of the potential influence of these books and take a negative attitude to smoking when we read to children. Fortunately, the man in a yellow hat seems to have quit smoking in the new series of George’s adventures.

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Getting them while they’re young in China. Submitted by Professor TH Lam, Hong Kong.
**BOOK REVIEW**

**Smoke-filled rooms: a postmortem on the tobacco deal**


**Smoke and mirrors**

Cigarettes are a major cause of premature death. Cigarettes are addictive. Secondhand smoke can be annoying, but is really not enough of a health risk to justify banning smoking in indoor environments. Payments to states in the Master Settlement Agreement were unjustified since cigarettes are self-financing. States actually save money because smokers die young. Lawsuits against the tobacco industry are without merit, since smokers have long known about the health risks. Continuing efforts to warn the public about the health risks of smoking are unwar- ranted since public awareness of these risks is now universal. Filters and low tar technology have made cigarette smoking safer, but public awareness of these benefits is grossly uninformed. Much of this chapter reads like it was drawn from industry sponsored websites that have been designed to mislead. Viscusi's chapter on the factors involved in the decline of smoking in the USA is marred by his acknowledgement that he has served as an expert witness for the tobacco industry. He also admits that his current wave of edgy in your face counter-advertising campaigns ignorance the evidence that these programs are actually reducing cigarette consumption. Instead of continuing these effective public health campaigns, Viscusi recommends that the government refocus its efforts towards giving smokers information about the risks posed by different types of cigarettes in the hope that this would move smokers to use less toxic cigarettes.

Viscusi is correct in noting an important deficiency of the Master Settlement Agreement that has made it difficult for new tobacco companies to enter the market, thus dampening competition for the development of potentially safer tobacco products. However, his credibility on this subject is diminished by his acceptance of the view that a declining cigarette consumption in the USA since the 1960s corresponds directly to increased efforts to inform the public of the dangers of tobacco use. Viscusi's criticism of the current wave of edgy in your face counter-advertising campaigns ignorance the evidence that these programmes are actually reducing cigarette consumption. Instead of continuing these effective public health campaigns, Viscusi recommends that the government refocus its efforts towards giving smokers information about the risks posed by different types of cigarettes in the hope that this would move smokers to use less toxic cigarettes.

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In summary, *Smoke-filled rooms* reads more like a legal brief written by a team of tobacco industry lawyers instead of a thoughtful commentary on the legal, financial, and social consequences of smoking. As such this book is a must read for plaintiffs' attorneys, but for the rest of us we should stick with "smoke-free rooms".

**References**


K M Cummings
The lighter side

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