
EDITORIAL

Helping Pregnant Women to Stop Smoking

One of the significant public information efforts of my administration as Secretary of Health and Human Services was begun during the past summer—a major and continuing effort by some eight Public Health Service agencies aimed at encouraging and helping pregnant women to stop smoking.

I announced this special initiative in March 1985 as part of the Department-wide attempt to reach the 1990 goal of reducing infant mortality. There is increasing evidence that smoking by pregnant women is one of the most important preventable determinants of low birth weight, and low birth weight is one of the principal contributors to natal and neonatal mortality.

Our national goal is no more than 9 infant deaths per 1,000 live births by the year 1990. If we can reduce cigarette smoking among pregnant women, we will have taken a giant step toward achieving that goal. Women who smoke during pregnancy have lower weight babies at full term than do nonsmokers, they suffer more often from the complications of pregnancy, they more often have premature babies, and their babies have a greater risk of neonatal death.

The encouraging thing about this effort is that success is possible. About 20 to 25 percent of women who smoke at the beginning of pregnancy quit on their own at some time during the 9 months, and studies suggest that aggressive intervention programs can encourage up to 30 percent more to stop. These are good results when compared with the smoking cessation efforts with other populations, and particularly good in view of the generally high levels of smoking today among girls and young women.

The first phase of our special initiative took place during the summer, beginning with a letter to the members of the American College of Obstetrics and Gynecology and to 10,000 maternal and child health centers, clinics, and other providers of prenatal care, asking their help and making available to them material for distribution and display in their offices and clinics. This was coupled at the time with public

service advertising on radio and television and in public transportation.

The second phase, which began this fall and is continuing, consists of three programs that carry on the thrust of the summer's activity. One is a Healthy Mothers, Healthy Babies Coalition all-media campaign in key States. Another is "EPIC," the Effective Pregnancy and Infant Care Initiative of the Health Resources and Services Administration. The third is the program of the Office on Smoking and Health calling further public attention to the new Surgeon General's warning which now appears on cigarette packages. It reads, "Smoking by Pregnant Women May Result in Fetal Injury, Premature Birth, and Low Birth Weight."

Although the primary goal of this effort is to safeguard the health of the newborn, there is a secondary goal which justifies the participation of everyone concerned with public health. As we persuade young women to give up smoking during their pregnancy, we are also working to reduce future heart disease, chronic lung disease, and cancer. The significance is most striking in the case of cancer. In the last 20 years, death rates from lung cancer among women have doubled, making it the leading cause of cancer deaths among women.

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