

Günde Tek Bir Adet Sigara İçmek ile Bir şey Olmaz mı?

- ✓ Sigara içenler kendi aralarında gruplandırılabilir.
- ✓ Ağır içici, tiryakisi olanlar. Bedava bulduğunda içenler. Kahve çay ile birlikte içenler.
- ✓ Günde yalnız bir sigara içerek kendilerini ödüllendirdiğini düşünenler
- ✓ Önemli tıp dergisi BMJ' de bu konu ile ilgili çok önemli bir makale yayınlandı
- ✓ Bu çalışmaya göre günde tek bir adet sigara içenlerin kalp hastalığı ve stroke riski %40 -50 oranında artıyor
- ✓ Bu çalışmaya göre düzenli bir adet /gün içenlerin, sigaranın zararlı etkisi 20 adet/gün sigara içenlere yakın bulunmuş.

Sonuç: Tek veya az sigara içmek, içmeyenlere göre zararlı ve bu zararlı etkisi nerdeyse düzenli sigara içenlere yakın

Kaynak

Smoking Just One Cigarette a Day Raises MI, Stroke Risk

Any level of exposure to cigarette smoke is risky

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Smokers who light up just once a day have a significantly increased risk for heart disease and stroke, equivalent to about half the excess risk seen in heavy smokers, researchers report.

Their meta-analysis of 141 prospective cohort studies conducted in 21 countries found that smoking a single cigarette a day was associated with a 48%-74% higher risk for heart disease in men and a 57%-119% higher risk in women.

Smoking one cigarette a day was associated with 40-50% of the increased heart disease and stroke risk as the excess risk associated with smoking 20 cigarettes per day, the investigators found.

The study findings, published in *The BMJ*, should serve as a wake-up call for smokers who believe light smoking carries little or no risk, Allan Hackshaw, PhD, of University College London, and colleagues wrote.

"Smoking only one to five cigarettes per day is associated with a risk of coronary heart disease and stroke that is substantially higher than many health professionals or smokers recognize (as much as half the risk of smoking 20 per day). We show clearly that no safe level of smoking exists for cardiovascular disease at which a light smoker can assume that continuing to smoke does not lead to harm."

The prospective cohort studies included in the analysis all had at least 50 cardiovascular disease events, and were conducted between 1946 and the spring of 2015. All studies reported hazard ratios or relative risks compared with never smokers or age-specific incidence in relation to risk of coronary heart disease or stroke.

For each study, the relative risk was estimated for smoking one, five, or 20 cigarettes each day using regression modeling between risk and cigarette consumption.

Relative risks were adjusted for age in all calculations and additional confounders in some, and the relative risks for one, five, and 20 cigarettes per day were pooled across all studies in a random effects meta-analysis.

The meta-analysis included 55 publications, reporting on 141 individual studies, and showed the following:

- In men, the pooled relative risk for coronary heart disease was 1.48 for smoking one cigarette per day and 2.04 for 20 cigarettes per day, using all studies; the risk was 1.74 and 2.27 among studies in which the relative risk had been adjusted for multiple confounders
- Among women, the pooled relative risks were 1.57 and 2.84 for one and 20 cigarettes per day, respectively (or 2.19 and 3.95 using relative risks adjusted for multiple factors)
- Men who smoked one cigarette per day had 46% of the excess relative risk for smoking 20 cigarettes per day (53% using relative risks adjusted for multiple factors), and women had 31% of the excess risk (38% using relative risks adjusted for multiple factors)
- For stroke, the pooled relative risks for men were 1.25 and 1.64 for smoking one or 20 cigarettes per day (1.30 and 1.56 using relative risks adjusted for multiple factors), and in women, the pooled relative risks were 1.31 and 2.16 for smoking one or 20 cigarettes per day (1.46 and 2.42 using relative risks adjusted for multiple factors)
- The excess risk for stroke associated with one cigarette per day (in relation to 20 cigarettes per day) was 41% for men and 34% for women (or 64% and 36% using relative risks adjusted for multiple factors)

In an accompanying [editorial](#), Kenneth C. Johnson, PhD, of the University of Ottawa, wrote that the study findings have major public health implications: "Light smoking, occasional smoking, and smoking fewer cigarettes all carry substantial risk of cardiovascular disease. Only complete cessation is protective and should be emphasized by all prevention measures and policies."

He added that the findings also have implications for the regulation and sale of new tobacco products, such as electronic cigarettes and heat-not-burn nicotine-delivery devices, given that these products "may carry a substantial risk for heart disease and stroke."

The FDA is currently considering Philip Morris International's application to market its heat-not-burn product IQOS in the U.S. as a "reduced-risk" tobacco product.

The FDA's Tobacco Products Scientific Advisory Committee is holding hearings on the application this week, and the expert panel is expected to make its recommendation to the agency soon.

In his editorial, Johnson argued that e-cigarettes and heat-not-burn products should not be promoted for harm reduction if one of the arguments is that they lead smokers to smoke less.

"The take-home message for smokers is that any exposure to cigarette smoke is too much. The message for regulators dealing with newly marketed 'reduced risk' products is that any suggestion of seriously reduced coronary heart disease and stroke risk is premature."