IPHA History
Smoking and Health - Fifty Years Later

By Dr. Ronald Eckoff

Dr. J.J. Kellogg says: “A few months ago I had all the nicotine removed from a cigarette, making a solution out of it. I injected half the quantity into a frog, with the effect that the frog died almost instantly. The rest was administered to another frog with like effect. Both frogs were full grown, and of average size. The conclusion is evident that a single cigarette contains poison enough to kill two frogs. A boy who smokes twenty cigarettes a day has inhaled enough poison to kill forty frogs. Why does the poison not kill the boy? It does kill him. If not immediately, he will die sooner or later of a weak heart, Bright’s disease, or some other malady which scientific physicians everywhere now recognize as a natural result of chronic nicotine poisoning.” Thirteenth Biennial Report of the Iowa State Board of Health – 1906

In 1964 Public Health Service Publication No. 1103 titled, “Smoking and Health: Report of the Advisory Committee to the Surgeon of the Public Health Service” was released. (I always thought it was the Surgeon General’s Report, but it was a report to the Surgeon General.) The committee reviewed over 6,000 papers.

The report is almost 400 pages and has great detail on many aspects. The report also briefly covers history from the 16th century to the present. “In the early part of the 16th century, soon after the introduction of tobacco into Spain and England by explorers returning from the New World, controversy developed from differing opinions as to the effects of the human use of the leaf and products derived from it by combustion or other means. Pipe-smoking, chewing, and snuffing of tobacco were praised for pleasurable and reputed medicinal actions. At the same time, smoking was condemned as a foul-smelling, loathsome custom, harmful to the brain and lungs.”

The committee was very cautious in reaching conclusions. They required strong evidence. A few of the major conclusions:

- Cigarette smoking is associated with a 70 percent increase in the age-specific death rates of males.
- Cigarette smoking is causally related to lung cancer in men: the magnitude of the effect of cigarette smoking far outweighs all other factors. The data for women, though less extensive, point in the same direction.
- Cigarette smoking is the most important of the causes of chronic bronchitis in the United States, and increases the risk of dying from chronic bronchitis and emphysema.
- It is established that male cigarette smokers have a higher death rate from coronary artery disease than non-smoking males. Although the causative role of cigarette smoking in deaths from coronary disease is not proven, the Committee considers it more prudent from a public health viewpoint to assume that the established association has a causative meaning than to suspend judgment until no uncertainty remains.
- Pipe smoking appears to be causally related to lip cancer.
- Women who smoke cigarettes during pregnancy tend to have babies of lower birth weight.
- Smoking is associated with accidental deaths from fires in the home.

What happened after the report came out?

At the Iowa Public Health Association Annual Meeting on May 8, 1964, Dr. Addison Brown of Des Moines, President of the Iowa Division of the American Cancer Society presented “Cigarette Smoking and Health.”

I came to Iowa in the Heart Disease Control Program of the US Public Health Service in 1965 and worked in heart disease, cancer and chronic illness (three categorical federal funding programs). We started antismoking activities, but it was hard to see any impact for the first fifteen years. We contracted with a man who had had his larynx removed due to cancer to do school presentations. At the 1966 Iowa State Fair I filled wheelbarrow with cigarette butts for the display. I had read that a pack a day smoker would produce enough cigarette butts to fill a certain size wheelbarrow. It was pretty easy to collect the cigarette butts, since ash trays were everywhere in the Lucas Building. We did a simple lung function test in conjunction with the wheelbarrow display.

The voluntary health agencies were also doing activities to try to reduce smoking. However I remember going to Cancer Society meetings and a significant number of people would smoke during the meetings. Smoking was common at the lunch or banquet of the Iowa Public Health Association. I particularly remember an IPHA luncheon speaker in the 1970s getting up and flossing his teeth before speaking. He said his wife told him it wasn’t polite to do that in public, but he said it was a healthy activity. People in the audience were doing an unhealthy activity, smoking, which was socially acceptable.

Sometime in the late 1970s or possibly the early 1980s, sorry I don’t know the date, smoking was banned in the Iowa Department of Public Health offices and meeting rooms. This was well before smoking was banned in most public places.

I know we are sometimes discouraged by the slow progress and new challenges regarding tobacco and e-cigarettes. But smoking was so ingrained in society (look at an old movie) that I think looking forward from 1964 it would have been hard to imagine we would have made as much progress as we have. We should celebrate the progress. Then we should dream about what might be accomplished in the next fifty years.