

April 29, 2013

Jeffery Gold M.D.
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RE: Testimony in Support of SB 444

Chair Greenlick and Members of the Committee,

For the record, my name is Dr. Jeffery Gold and I serve as the Director for Pulmonary Critical Care Program and the Associate Director of the Adult Cystic Fibrosis Center at Oregon Health and Sciences University. I'm here on behalf of OHSU and the Knight Cancer Institute to support Senate Bill 444.

As you know, SB 444 would prohibit smoking in cars where minors are present. It is clear that exposing children to second hand tobacco smoke causes serious health risks. There is no safe level of exposure to smoke and we must do all we can to protect Oregon's children from the hazards of second hand smoke or SHS.

SHS can cause asthma in children who have not previously shown any symptoms. In addition, children who have asthma feel worse symptoms and have an increased number of attacks.

Moreover, secondhand smoke can aggravate sinusitis, rhinitis, cystic fibrosis, and chronic respiratory problems such as cough and postnasal drip. It also increases the number of children's colds and sore throats. In children under two, SHS exposure increases the likelihood of bronchitis and pneumonia.

In children aged 18 months or younger, second hand smoke exposure is responsible for an estimated 150,000-300,000 new cases of bronchitis and pneumonia annually and approximately 7,500-15,000 hospitalizations annually in the United States. Secondhand smoke increases the risk of Sudden Infant Death Syndrome (SIDS). Infants who die from SIDS tend to have higher concentration of nicotine in their lungs.

Furthermore, second-hand smoke exposure can severely worsen the symptoms of cystic fibrosis. Many studies have found that people with cystic fibrosis who are exposed to second-hand smoke suffer from more frequent and more severe lung infections. A 2008 John's Hopkins University study found that people with cystic fibrosis who are exposed to SHS have lung functions 10% lower than those who are not exposed.

There appears to be a direct adverse effect of SHS in motor vehicles as well. One study demonstrated that among 13-14 year old children, SHS in cars was associated with increased risk of wheezing, allergic symptoms, while another study demonstrated increased risk of bronchitis among children ages 12-19. A third demonstrated biological evidence of increased inflammation in non-smoking adults who are exposed to SHS, with levels directly correlating to the amount of nicotine exposure as documented by serum cotinine.

SB 444 is an important step in protecting Oregon's children from the negative, sometimes lifelong impacts of second hand smoke. Thank you for your time and consideration of this important legislation and I encourage your support for Senate Bill 444. I'm happy to answer any questions.