Smoke-Free Workplace Policies Lead to Lower Blood Pressure

EHS Today December 5, 2018

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Length: 519 words

Byline: Ehs Today Staff

Body

Is your workplace smoke free? New research in the Journal of the American Heart Association says that could be good for your heart.

Smoke-free policies have been linked to lower systolic (top number) blood pressure readings among non-smokers, according to AHA researchers.

"We found that nonsmoking adults in the study who lived in areas with smoke-free laws in restaurants, bars or workplaces had lower systolic blood pressure by the end of the follow-up period compared to those who lived in areas without smoke-free laws," said Stephanie Mayne, Ph.D., study lead author and research scientist at PolicyLab and the Center for Pediatric Clinical Effectiveness at Children's Hospital of Philadelphia.

The study was conducted while Mayne was a postdoctoral fellow at Northwestern University's Feinberg School of Medicine.

Although laws that prohibit smoking in public places like bars and restaurants have been associated with reduced rates of hospitalization for heart disease, previous studies have not examined changes in blood pressure. In this new analysis, researchers linked data from the *Coronary Artery Risk Development in Young Adults* (CARDIA, 1995-2011) study to state, county and local smoke-free policies in restaurants, bars and workplaces.

"Smoke-free laws were associated with reduced systolic blood pressure, but surprisingly not with reductions in diastolic blood pressure or high blood pressure," Mayne explained. "It's not entirely certain why this was the case, but it's possible that we are detecting effects on systolic blood pressure that are below the threshold for hypertension."

Higher systolic blood pressure increases the risk of cardiovascular disease even when numbers are below the hypertension threshold; so. the reductions in systolic blood pressure seen in this study suggest a potentially meaningful effect on population-level risk, she added.

While the magnitude of associations was small at the individual level, researchers said the results point to a potential mechanism through which reductions in secondhand smoke due to smoke-free policies may improve population level heart health.

The <u>CARDIA study</u> enrolled 5,115 black and white adults (age 18 to 30) in 1985-86 from four U.S. cities: Birmingham, Alabama, Chicago, Minneapolis and Oakland, California.

Follow-up exams were conducted up to 30 years later. Researchers analyzed data drawn from years 10-25 (1995-2011) to align with the timing of smoke-free policies and excluded participants who didn't have at least two blood pressure readings during that period.

A total of 2,606 CARDIA participants were used for this study. At each exam, participants living in areas with smoke-free policies affecting public places had lower systolic blood pressure on average than those in areas without smoke-free policies, and the difference increased over time. By year 25, participants in smoke-free areas had systolic blood pressure values on average 1.14 mm Hg to 1.52 mm Hg lower than those in areas without smoke-free environments, depending on the locations covered by the law (restaurants, bars, or workplaces).

Classification

Language: ENGLISH

Publication-Type: Magazine

Subject: SMOKING (94%); SMOKING BANS (90%); EXPERIMENTATION & RESEARCH (90%); HEART DISEASE (90%); DISEASES & DISORDERS (89%); RESEARCH REPORTS (89%); HYPERTENSION (89%); CARDIOVASCULAR DISEASE (89%); ADULTS (89%); ENVIRONMENTAL ILLNESS (75%); TOBACCO & HEALTH (75%); SCIENCE & TECHNOLOGY (75%); PEDIATRICS (71%); GRADUATE & PROFESSIONAL SCHOOLS (71%); DEATH & DYING (67%); COUNTIES (63%)

Organization: AMERICAN HEART ASSOCIATION INC (84%); NORTHWESTERN UNIVERSITY (56%)

Industry: RESTAURANTS (90%); SMOKING BANS (90%); GRADUATE & PROFESSIONAL SCHOOLS (71%); PEDIATRICS (71%)

Geographic: CHICAGO, IL, USA (79%); SAN FRANCISCO BAY AREA, CA, USA (79%); BIRMINGHAM, AL, USA (65%); OAKLAND, CA, USA (50%); ALABAMA, USA (79%); CALIFORNIA, USA (79%); UNITED STATES (79%)

Load-Date: December 5, 2018