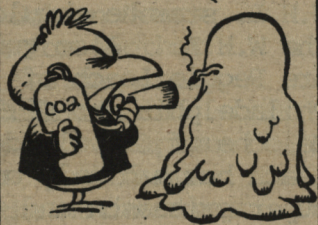


BE WRONG

prohibit smoking in his/her waiting area. Encourage your physician to support no-smoking regulations in health care facilities. In hospitals always request a room free from tobacco smoke. At work, encourage consideration for the non-smoker. Post signs in your office or work area. Urge management to provide smoke-free facilities for non-smokers. If tobacco smoke affects your health, bolster your position with a note from your physician. At meetings propose a "no-smoking motion."

THE BYRDS

AREN'T YOU NON-SMOKERS GETTING A TOUCH REACTIONARY?



If this is not practical, suggest a smoke break in another area. Patronize smoke-free stores and commend the management on their no-smoking policies. Write letters to those places where you find that smoke is affecting you as an individual. Write letters to the editor, etc. And remember that non-smokers are the majority, even among adults.

"Want to give me some more reasons for joining the majority?"

"Sure, emphysema, chronic bronchitis, and lung cancer."

"Common, not all smokers get those. Besides, my uncle smoked two packs a day and lived to 85. And what about those miners who get cancer and never smoked at all?"

"Smoking increases the risk of developing these conditions. All heavy smokers after a period of time, develop emphysema to some extent. Emphysema impairs the lungs' capacity for oxygen absorption, so the oxygen from the air just doesn't make it into your bloodstream as well as it once did. This means the lungs and circulatory system have to work harder with less oxygen to keep the body running, especially notable during periods of physical exertion - but as the condition worsens, it

impairs normal non-strenuous activities as well.

Chronic bronchitis is an irritation of the bronchial tubes, the airways to the lungs, that once it appears, doesn't usually go away without the removal of the primary irritant in many cases, cigarette smoking. Both of these conditions can result from exposure to irritants and smoke that are not a direct result of the individual's own smoking, but emphysema and chronic bronchitis are most frequently seen in heavy smokers. Exposure to tobacco smoke worsens these conditions even when they are not caused by personal cigarette smoking.

Primary lung cancer, that is, a cancer that starts in the lungs as opposed to one that metastasizes, or spreads, from another original site, is often the result of ingesting air-borne carcinogens. (The relationship between smoking and cancer is still under active investigation.) Most often, the air-laden carcinogens are derived from tobacco smoke, while industrial wastes dumped into the air can also result in lung cancers, smokers are even more susceptible to these cancer causing agents; for example: most people who die of lung cancer result from exposure to radon daughter gases are smokers just as it is true that not all people exposed to the working conditions in the asbestos mines develop lung cancer, not all smokers develop lung cancer. Some are lucky, or some develop bladder cancer instead. Nine out of ten people who are found to have cancer die within five years of the discovery of their

"When you say smoking, you mean just cigarettes, don't you?"

"Primarily cigarettes, but not only. Pipes and cigars are included, to some extent, in all my statements. Pipe and cigar smokers tend to ingest less smoke, partly because they use less tobacco and partly because they inhale less deeply, so only a smaller portion of the more potent smoke gets into the lungs. Cigar and pipe smokers have a higher incidence of lip and buccal (mouth) cancer than non-smokers though. But there is a bright side to it...those cancers are frequently curable with a minimum of disfigurement. All or most pipe and cigar smokers state that they don't "inhale", meaning that the smoke isn't carried into their lungs but rather contained wholly in their mouths. Anyone who's been in a room with a pipe or cigar fiend will have noticed the irritation caused by the smoke to some people's lungs and/or bronchia. You haven't? What about the people who were coughing?"

"Oh ya, them."

"So that if the smoke is in the ambient air, and the non-smokers are inhaling, so are the smokers. Also, it's nigh unto impossible to keep all the smoke in the mouth while inhaling it. Technically, it isn't possible because the pressure to inhale has to come from somewhere and the air (& smoke) being inhaled have to go somewhere. So far the body hasn't developed a way of filtering out all the smoke before it gets to the lungs. It tries though. Nasal hair and trachial cilia (the minute hair-like structures on the

result of the lack of smoking during the night that has allowed the cilia to at least partially reactivate and start clearing the pulmonary system of contaminants and mucus.

There's also injection without the burning of tobacco, snuff and chewing tobacco: The nicotine in these two substances still enters the blood stream through the buccal and nasal linings, so that the deleterious effects of nicotine are still in evidence, such as constriction of the peripheral blood vessels." "What?"

"The blood supply to your extremities, feet and hands is lessened. Wrinkles appear at an earlier age for some reason in persons who ingest tobacco in some manner. Also, the incidence of heart and related diseases is greater among nicotine addicts, as are the number of tiny blue veins that appear just under the skin at an earlier age, in smoke ingesters. All of the effects of tobacco seem to be greater the more it is used."

"OK so far we've talked about tobacco. Is that all you think people smoke or is it just that that's all people smoke with harmful results."

"Nope. Here comes the dope talk. Marijuana smoke treats the lungs more harshly than does cigarette smoke but is often used in a much smaller amount than tobacco. Also the THC otherwise known as tetrahydrocannabinol the critical ingredient in hash, marijuana, tai stick, or anything else from cannabis sativa, is a bronchio dilator, which means it expands the bronchial tubes. Normally these airways contract when their owner is exposed to some irritants or fearful. When certain irritants produce extreme contraction of the bronchial tubes this is called an asthma attack. THC is a long acting antiasthmatic agent that can be used in minute quantities, so that the effect of dope smoking seems to be less irritating in some ways, than it actually is. Dope is hard on the lungs, but as said before this smoke is rarely ingested at the same rate as tobacco smoke is. "So you're encouraging me to smoke dope instead of cigarettes."

"I didn't say that."



cancer, 50% die within six months. This compares to 50% 5 years survival rate for breast cancer and an almost 100% 5 year survival rate for skin cancer.

So you may not get lung cancer but if you do, it's most likely to be gone over by the time it's diagnosed.

Bladder cancer is another nasty with a low survival rate once it's been diagnosed.

cells lining the air passages) are supposed to filter out some of the air-laden pollutants but their action on the particles in tobacco smoke is impaired by the smoke itself, because it contains substances which curtail the action of the cilia, which ordinarily move rhythmically to kick the hunk and mucus out of the lungs and airways. The smoker's morning cough is partially a