

---

# Keynote Address

Smokeless tobacco use is increasing throughout the United States, especially among the most vulnerable of our citizens—the children.

With more than 30,000 new cases of oral cancer reported in 1991 for the United States alone, it is time that use of smokeless tobacco take its rightful place next to cigarette smoking, in National and world consciousness, as a serious health risk that must be stopped.

As many of you recall, smokeless tobacco use as a health issue first became a subject of focus in the United States about 6 years ago. The media reported extensively at that time on the tragic consequences of smokeless tobacco use—particularly on cases of oral cancer among young men.

In 1986, the Surgeon General released a report, *The Health Consequences of Using Smokeless Tobacco*, which concluded that oral use of smokeless tobacco represents a significant health risk, is not a safe substitute for cigarette smoking, can cause cancer and a number of noncancerous oral conditions, and can lead to nicotine addiction and dependence. Also, Congress passed the Comprehensive Smokeless Tobacco Act of 1986, which banned smokeless tobacco advertising on television and radio and required that three health warnings be rotated on smokeless tobacco packages and in advertisements.

Regrettably, the subsequent downturn in sales of smokeless tobacco products was not sustained. Statistics from the 1991 Federal Trade Commission Report to Congress on smokeless tobacco sales and advertising expenditures paint a grim picture: The weight of smokeless tobacco products sold overall rose by more than 2 million pounds in 1989, to 117.5 million pounds, following a 3-year decline. In 1990, sales increased by 5 million pounds, to 122.5, and in 1991, sales again rose by almost 3 million pounds, to 125.1 million. Three companies—U.S. Tobacco, Conwood, and Pinkerton—together control over 80 percent of the smokeless tobacco market share in the United States.

The most disturbing trend is in sales of moist snuff, now the most popular—and the most dangerous—form of smokeless tobacco. While oral cancer has been shown to occur several times more frequently among snuff users than among non-users, for some cancer sites in the mouth, the disease may occur as much as 50 times more frequently among long-term snuff users.

Sales of moist snuff have risen steadily in recent years, while sales of other forms of smokeless tobacco have fluctuated or have declined. Sales of moist snuff climbed to 45.0 million pounds in 1989, a 25 percent increase

---

Based on HHS Secretary Sullivan's keynote address to the First International Conference on Smokeless Tobacco, Columbus, Ohio, April 10-13, 1991.

over the 35.9 million pounds sold in 1986. In 1990 and 1991, sales reached 52.9 million pounds, a 47 percent increase over 1986 (Figure 1). The *U.S. Distribution Journal* reported that the volume of moist snuff sales has risen 70 percent in the last 10 years.

Our most recent surveys of smokeless tobacco use nationwide revealed that in 1988, 25.8 percent of males between the ages of 12 and 17 had tried some form of smokeless tobacco, and 6.6 percent had used smokeless tobacco in the preceding month.

Newer evidence suggests the problem is becoming much more serious. For example, according to a 1991 survey by the Illinois Department of Public Health, nearly half of all high school-aged males across the state have tried smokeless tobacco in some form. About 16 percent of Illinois high school juniors are regular users, and in rural communities, the figure rises to 28 percent. Some children begin ST use as early as the second, third, or fourth grade!

The culture of smokeless tobacco use in the United States has to a large extent centered on sports, particularly baseball. When impressionable youngsters see their heroes openly using smokeless tobacco on the playing field, there is a powerful incentive to try it. These young people also begin to correlate smokeless tobacco use with athletic excellence.

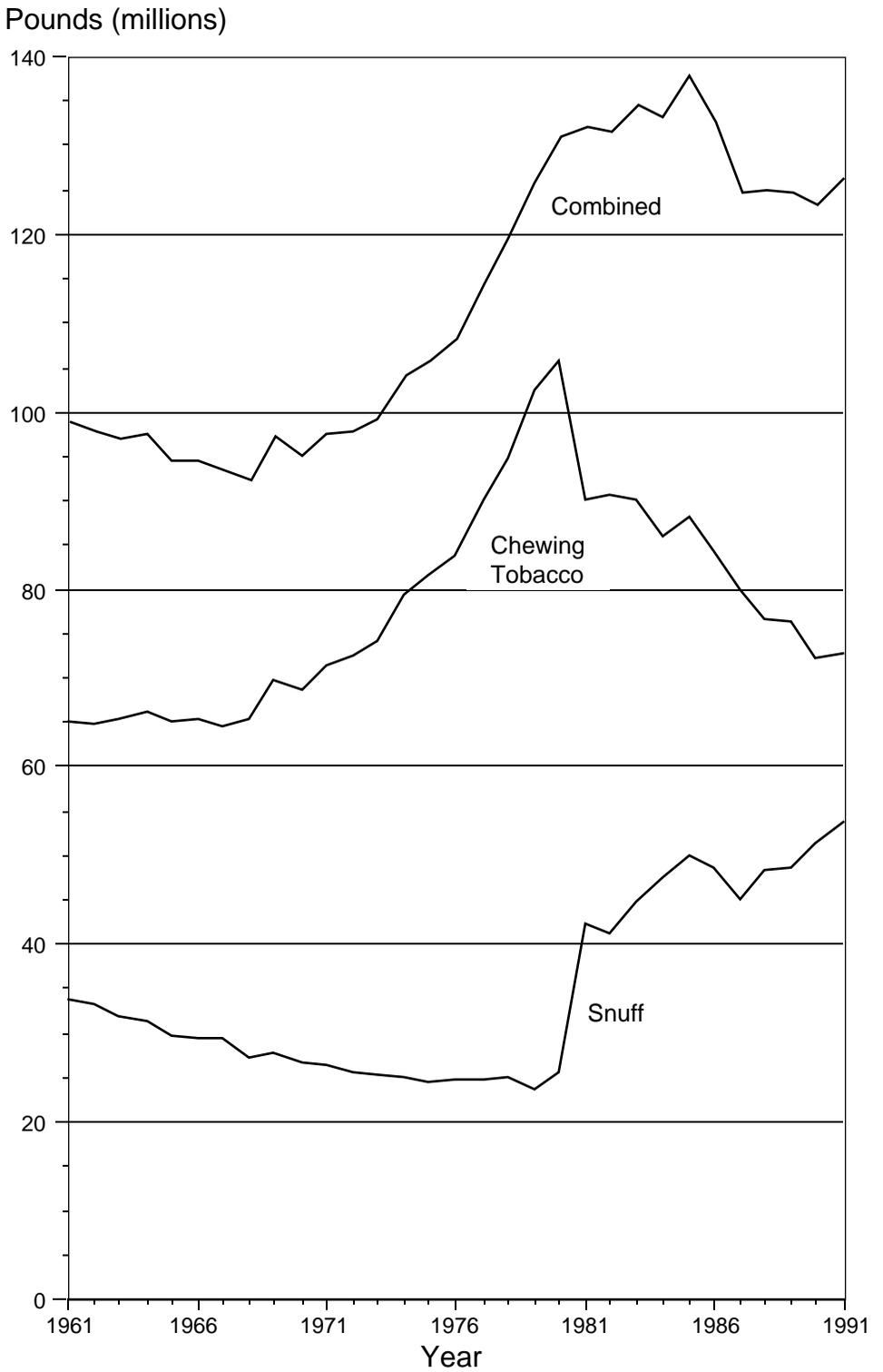
When I addressed the Major League Baseball team physicians and trainers in December of 1990, I suggested that no effort aimed at ending the use of smokeless tobacco in America would succeed without the support of the Major League Baseball community. I called upon baseball officials to develop a program with the goal of eventually eliminating smokeless tobacco use in professional baseball and in America as a whole.

I am pleased to report that the baseball community has responded positively and boldly. On March 7, 1991, as a first step in the effort to disassociate professional baseball from smokeless tobacco use, Baseball Commissioner Fay Vincent announced that the use of smokeless tobacco will be forbidden in four rookie and class A minor leagues—the levels at which most young men enter professional baseball.

The Commissioner also announced stepped-up efforts to educate players about the health risks of smokeless tobacco use and to help users quit. Major League Baseball and the National Cancer Institute have teamed up to produce “Beat the Smokeless Habit,” a guide for baseball players of all ages to learn about the dangers of smokeless tobacco use and how to quit. Copies of the guide have been distributed to every major and minor league player as well as to 40,000 college baseball players. I commend Commissioner Vincent for his actions and will be following the progress of his efforts with great interest.

Now we must urge officials and coaches at the college, high school, and youth league levels to ban the use of smokeless tobacco in baseball and in other sports activities under their jurisdictions.

Figure 1  
Annual consumption of spitting tobacco, United States, 1961-1991



This brings us to another significant element that serves to encourage young people to begin using smokeless tobacco—promotion and advertising by the tobacco companies.

I would like to note that expenditures by the tobacco companies to promote and advertise smokeless tobacco use rose sharply—by more than 19 percent—in 1989, according to the Federal Trade Commission. The largest single category of expenditure, nearly a quarter of total promotion and advertising expenditures for smokeless tobacco, was devoted to sports and sporting events. Another 18.5 percent was devoted to expenses involved in the insidious practice of distributing free samples.

The tobacco companies indeed play a major role in the promotion of sporting events. Philip Morris, known for its Virginia Slims Tennis Tournaments, is now the number one event sponsor in sports, according to *The Sporting News*, spending about \$100 million annually. RJR Nabisco spends about \$40 million. The tobacco product these two companies promote, of course, is cigarettes.

It is not surprising, therefore, that when *The Sporting News* last year compiled a list of who they believe to be the 100 most powerful people in sports in the United States, the marketing vice presidents of Philip Morris and RJR Nabisco were ranked 29th and 49th, respectively.

This represents a sad commentary on the state of sports in America. Without question, by sponsoring sporting events, the tobacco companies are trading on the prestige and image of the athletes to barter their deadly products. They are using the vigor and energy of these athletes as a subtle—but incorrect and dishonest—message that tobacco use is compatible with good health. And, all too often, that message is aimed at young people, women, minorities, and blue-collar workers.

We must question seriously the values that allow activities ostensibly representing the essence of fun, fitness, and health to be exploited to such a large degree by the merchants of suffering, disease, and death.

The time has come to end the association of tobacco and sports in this country and around the world. The time has come for promoters of and participants in sporting events to be held accountable for the fact that when they accept money from the tobacco companies, they are promoting not only fun and games—they are promoting disease and death.

It is immoral for civilized societies to condone the promotion and advertising of products that, when used as intended, cause disability and death.

I am all too aware that such activities are allowed under current law in the United States and elsewhere. And I am, quite frankly, disgusted that this remains the case. We react with horror and outrage when we hear of suffering and death overseas. Yet, at the same time, we not only allow our citizens to suffer and die from the poisonous chemicals contained in tobacco, we condone expenditures of vast amounts of money by the tobacco companies to encourage it!

In 1990, I urged the tobacco industry to voluntarily withdraw from direct sponsorship of sporting events. Obviously, my plea fell on indifferent ears.

If the tobacco companies will not adhere to this country's strong philosophy of voluntary corporate responsibility, then it is up to our citizens to provide the incentive. As individuals, Americans can send a message to the tobacco companies in the only language they appear to understand—the language of money. The message is that we will no longer financially support promoters of sporting events and others who would encourage our children to use addictive substances that will ruin their health and send them to an early grave. And I urge public and private institutions to refrain from allowing their facilities to be used for tobacco company-sponsored sporting events.

The disgraceful tradeoff in America between profits and good health must stop! But it will stop only when our citizens rise up and say, "Enough—no more!"

I urge individuals and organizations throughout the Nation and the world to join me in the expression of anger and resolve. Let this be the beginning of an all-out effort.

Make no mistake: the continuing battle against tobacco use will be long and difficult. But it is a battle that can be won, must be won, and will be won. Together, we will win it.

Louis W. Sullivan, M.D.  
Secretary  
Department of Health  
and Human Services

