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Mr. Garfield Mahood, Director  
Canadian Campaign for Justice on Tobacco Fraud

Dear Gar: Thank you for seeking my comment on *Michael's Essay: Exploding the myth that second-hand smoke causes cancer* [<http://www.cbc.ca/thesundavedition/essays/2014/01/15/the-myth-about-second-hand-smoke/>].

I found it to be an appalling display of willful ignorance by a prominent radio commentator who should know better. It is difficult to imagine that Mr. Michael Enright read past the misleading headline of the JNCI news article *No Clear Link Between Passive Smoking and Lung Cancer*, By Judy Peres [JNCI Vol. 105, Issue 24, News, 1844 | December 18, 2013], on which he based his unfounded opinion. Ms. Peres, a science writer for JNCI, reported on a conference presentation by a Stanford medical student, concerning a large prospective cohort study of 76,000 women on active and passive smoking and lung cancer. For nonsmokers living in the same house with a smoker for 30 years or more, the increased risk of lung cancer mortality was 61%. An actual reading of the abstract presented at the meeting states that: "*passive exposure as an adult at home for  $\geq 30$  years was associated with increased risk, of borderline significance (HR 1.61, 95% CI 1.00-2.58),*" indicating the lung cancer risk increase could be as high as 158%

<http://meetinglibrary.asco.org/abstractbycategory/2013%20ASCO%20Annual%20Meeting/194>.

Importantly, the study has not been peer-reviewed, nor has it been published.

In an interview with Heather Wakelee, MD, associate professor of medicine and oncology at Stanford and one of the study's senior investigators, Dr. Wakelee stated "**It's hard to say anything conclusive with such small numbers, ... this analysis doesn't tell us what the risk is, or even if there is a risk.**" Asked whether a waitress who spent 15 years working in a smoky bar should feel reassured, Wakelee said, "**Certainly, if you look just at this study and ignore other data. But you can't really ignore all the other data or ignore all the health risks linked to that exposure.**" Further, Dr. Debbie Winn, deputy director of the Division of Cancer Control and Population Sciences at the National Cancer Institute, said the International Agency for Research on Cancer (as well as the NCI) stated unequivocally that passive smoking is a cause of lung cancer. "**You shouldn't conclude from this study that it isn't.**"

So, in the words of the study's senior author, the study is "not conclusive." Yet Mr. Enright concludes categorically, based his willful misunderstanding of this news report, "I have to ask why anti-smoking activists don't simply stick to the facts instead of alarming everybody with the assertion that passive smoke causes lung cancer when it clearly doesn't." Mr. Enright clearly avoided the plain English statements in this clearly written article. Moreover, Mr. Enright, whose column celebrates the 50<sup>th</sup> Anniversary of the 1964 Surgeon General's Report,

unaccountably fails to report the conclusion of the just-issued 2014 Surgeon General's Report, which reached the following major conclusion: "**Exposure to secondhand tobacco smoke has been causally linked to cancer, respiratory, and cardiovascular diseases, and to adverse effects on the health of infants and children.**" The 2006 Surgeon General's Report, *The Health Consequences of Involuntary Exposure to Tobacco Smoke*, stated the issue in more detail on page 439:

"Twenty years after secondhand smoke was first classified as a cause of lung cancer in lifetime nonsmokers, the evidence supporting causation continues to mount. **More than 50 epidemiologic studies** have addressed the association between secondhand smoke exposure and the risk of lung cancer among lifetime nonsmokers. These studies included men and women of diverse racial and ethnic backgrounds and were conducted using heterogeneous study designs in some 20 countries of North America, Europe, and Asia. **An increased risk of lung cancer associated with secondhand smoke exposure was found in most of the studies, with few exceptions** A consistent association obtained in different populations under diverse circumstances strengthens a causal interpretation because different patterns of potential bias and confounding would be expected across different populations. " <http://www.surgeongeneral.gov/library/reports/secondhandsmoke/fullreport.pdf>.

So, who is it that doesn't stick to the facts, the researchers who authored the study, the Surgeon General, the NCI, or is it Mr. Enright? Mr. Enright's article is naïve at best, and disingenuous at worst.

Sincerely,

A handwritten signature in cursive script that reads "James L. Repace". The signature is written in black ink and includes a horizontal line at the end.

James Repace