

## Behavioral Health & Tobacco Use

### Behavioral Health and Tobacco Use Rates

- It is estimated that 35% of cigarette smokers have a behavioral health disorder and account for 38% of all U.S. adult cigarette consumption.<sup>1</sup>
- Despite the national cigarette smoking rate being 14% overall among adults, it is 23% for individuals with a behavioral health disorder.<sup>1</sup>
- The nicotine dependency rate for individuals with behavioral health disorders is 2-3 times higher than the general population.<sup>2</sup>

### Tobacco and Mental Health

- Lifetime smoking rates are higher in patients who are diagnosed with major depression disorder (59%), bipolar disorder (83%), or schizophrenia and other psychotic disorders (90%)<sup>3</sup> compared to 32% among adults with no mental illness.<sup>4</sup>
- Individuals with schizophrenia are addicted to nicotine at rates that are up to three times greater than the general population.<sup>5</sup>
- 70 to 85% of individuals with schizophrenia use tobacco.<sup>6</sup>
- Individuals with a diagnosis of post-traumatic stress disorder (PTSD) are about 22% more likely to be current smokers than individuals without PTSD.<sup>7</sup>
- Among current smokers with a lifetime history of depression, anxiety, anxiety with depression or major depression, they smoke more cigarettes, smoke more frequently and have a higher level of dependence.<sup>8</sup>
- Individuals with social anxiety are more likely to engage in heavy smoking and are less likely to successfully quit in comparison to individuals without social anxiety, depression, and other substance use disorders.<sup>9</sup>
- The presence or history of depression is associated with greater smoking severity and poorer smoking outcomes.<sup>10</sup>
- Major depressive disorders are associated with an earlier age of cigarette smoking, greater dependence on nicotine, higher nicotine withdrawal scores, greater cravings, and higher Carbon Monoxide levels during cessation treatment.<sup>10</sup>

## Morbidity and Mortality

- Smokers with serious mental illness have increased risk of dying from cancer, lung disease, and cardiovascular disease<sup>11</sup> and account for more than 200,000 of the 520,000 tobacco-related deaths each year.<sup>12</sup>
- Individuals with serious mental illness die about 15 years earlier than individuals without serious mental illness who never smoke.<sup>13</sup>
- About half of deaths among those hospitalized for schizophrenia, depression, or bipolar disorder are from causes linked to smoking.<sup>12</sup>

## Tobacco and Substance Use

- More than 80% of youth with substance use disorders report current tobacco use, most report daily smoking, and many become highly dependent, long-term tobacco users.<sup>14</sup>
- Individuals with alcohol use disorders smoke at rates between 34 and 80%; people with other substance use disorders smoke at between 49 and 98%.<sup>15</sup>
- Addiction to nicotine is the most common form of substance use in people with schizophrenia.<sup>16</sup>
- Current cigarette smokers in the past month were more likely than those who were not nicotine dependent to have engaged in alcohol use (62% vs. 54%), binge alcohol use (43% vs. 22%), and heavy alcohol use (15% vs. 5%) in the past month.<sup>17</sup>

## Morbidity and Mortality

- Tobacco use causes more deaths among individuals receiving substance use treatment than alcohol or other substance use.<sup>18</sup>
- 51% of deaths were the result of tobacco-related causes, which is double the rate found in the general population.<sup>19</sup>
- One study found that most deaths among those with a history of opioid-related disorders were from tobacco or alcohol-related causes and not directly caused by drug use.<sup>20</sup>

## Recovery

- 70 to 80% of individuals receiving substance use disorder treatment have expressed an interest in tobacco cessation.<sup>21</sup>
- Participation in smoking cessation efforts while engaged in substance use treatment has been associated with a 25% greater likelihood of long-term abstinence.<sup>22</sup>

## References

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