

TOBACCO FREE KANSAS

COALITION

February 2, 2012
Written Testimony in Support of
Substitute for HB 2340
Senate Federal and State Affairs Committee

Dear Senator Brungardt and Members of the Committee,

As a practicing physician and president of the Tobacco Free Kansas Coalition, I commend the Kansas legislature for its commitment to protect Kansans through adoption of the 2010 clean indoor air law. <u>I see the difference in my patients</u> because of this smokefree air law. My patients as well as other Kansans now enjoy working, eating, drinking and enjoying recreational activities because they are no longer exposed to secondhand smoke toxins in the workplace. It is an accepted scientific fact that there is no safe level of exposure to secondhand smoke. In addition, the industry association for heating and ventilation professionals, ASHRAE, insists that <u>no ventilation system can eliminate secondhand smoke pollution</u>, no matter the amount of tonnage or the cost of the equipment.

In 2011, a major poll revealed that 77% of Kansas supported the clean indoor air law. This year that percentage is probably even higher. Kansans like the smokefree law. They do not want it weakened. But many want it strengthened to remove areas exempted in the 2010 legislation. Removing exemptions in that law, including the casino floor exemption, is a priority for the 200 partners, coalitions, health organizations and individuals of the Tobacco Free Kansas Coalition. Currently, 19 other states have already passed 100% smokefree gaming policies.

This improvement would protect hundreds of workers and many thousands of casino patrons from the known toxins in secondhand smoke. This past year, one of my patients, who had given up smoking after recovering from a smoking-related heart attack, died of a heart attack while at a casino. Kansas should continue its public health campaign to reduce the death and disease caused by smoking and secondhand smoke in our state and thus reduce these health costs in Kansas. Peer-reviewed studies continue to show reductions in cardiac events after clean indoor air laws are adopted.

Casinos provide opportunities for new revenue for the state, recreation for customers and jobs for workers. How ironic that the secondhand smoke in these facilities starts an illness process leading to illness, increased medical costs and death. Secondhand smoke exposes workers to air-borne toxins as a condition of employment and that is a trade-off no worker should have to endure. We encourage the committee to expand smokefree provisions in the Kansas Clean Indoor Act of 2010 and resist any efforts to weaken the law's provisions.

Sincerely.

James D. Gardner, MD

Primary Care Physicians, Manhattan, KS

Chairman, Tobacco Free Kansas Coalition, Inc.

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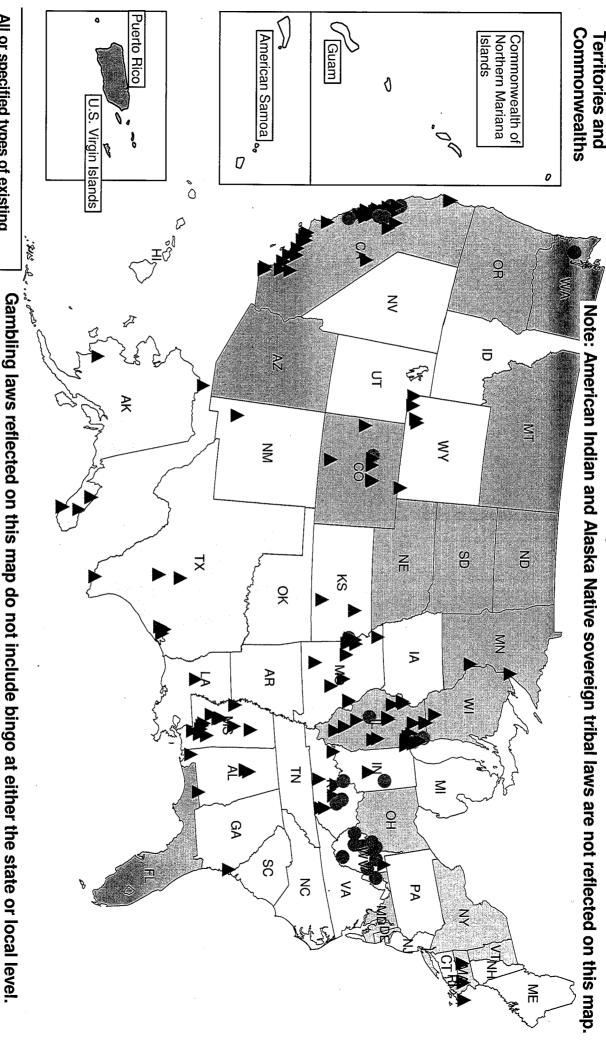
Sn Fed & State Attachment 5

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2-2-12

American Nonsmokers' Rights Foundation U.S. 100% Smoketree Gambling

As of January 2, 2012



All or specified types of existing Gambling facilities within the local iction are 100% smokefree. **Locality Type**

County

100% Smokefree in all State-Regulated Gambling State and Commonwealth/Territory Law Type

State-Regulated Gambling not 100% Smokefree, or none exists

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American Society of Heating, Refrigerating and Air-Conditioning Engineers, Inc.

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ASHRAE Position Document on

ENVIRONMENTAL TOBACCO SMOKE

Approved by ASHRAE Board of Directors October 22, 2010

Expires October 22, 2013

American Society of Heating, Refrigerating and Air-Conditioning Engineers, Inc.

Committee Roster

The ASHRAE Position Document on Environmental Tobacco Smoke was originally developed in 2004 by the Society's Environmental Tobacco Smoke Position Document Committee. Their current affiliations are listed below.

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Executive Summary

This position document has been written to provide the membership of the American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) and other interested persons with information on the health consequences of exposure of nonsmokers to tobacco smoke in indoor environments, and on the implications of this knowledge for the design, installation and operation of heating, ventilating, and air-conditioning (HVAC) systems. ASHRAE's sole objective is to advance the arts and sciences of heating, refrigeration, air conditioning and ventilation, and their allied arts and sciences and related human factors, for the benefit of the public. Therefore, the health effects of indoor exposure to emissions from cigarettes, cigars, pipes, and other tobacco products have long been relevant to ASHRAE.

For more than three decades, researchers have investigated the health and irritant effects among non-smokers exposed to tobacco smoke in indoor environments. The preponderance of credible evidence links passive smoking to specific diseases and other adverse health effects in people. A number of national and global review groups and agencies have concluded that exposure of nonsmokers to tobacco smoke causes adverse effects to human health. No cognizant authorities have identified an acceptable level of environmental tobacco smoke (ETS) exposure, nor is there any expectation that further research will identify such a level.

International experience has been gained over several decades with using various strategies to reduce ETS exposure, including separation of smokers from nonsmokers, ventilation, air cleaning and filtration, and smoking bans. Only the last provides the lowest achievable exposures for nonsmokers and is the only effective control method recognized by cognizant authorities (see *Findings of Cognizant Authorities* below). At the time of this writing, several nations^{1,2}, 30 states³ in the U.S. and hundreds of municipalities and other jurisdictions have banned tobacco smoking completely in all public buildings and workspaces. The U.S. government has banned smoking in its workplaces. Experience with such bans documents that they can be effective, practically eliminating ETS exposure of non-smokers. The benefits of bans, including exposure reduction and benefits to public health are well documented^{4,5}. While exposure is decreasing internationally because of these smoking bans in public and private buildings, and a decrease in the prevalence of smoking, substantial portions of the population are still regularly exposed in workplaces, homes and public places, such as entertainment venues.

ASHRAE concludes that:

- It is the consensus of the medical community and its cognizant authorities that ETS is a health risk, causing lung cancer and heart disease in adults, and exacerbation of asthma, lower respiratory illnesses and other adverse effects on the respiratory health of children.
- At present, the only means of effectively eliminating health risk associated with indoor exposure is to ban smoking activity.
- Although complete separation and isolation of smoking rooms can control ETS exposure in non-smoking spaces in the same building, adverse health effects for the occupants of the smoking room cannot be controlled by ventilation.

- No other engineering approaches, including current and advanced dilution ventilation or air cleaning technologies, have been demonstrated or should be relied upon to control health risks from ETS exposure in spaces where smoking occurs. Some engineering measures may reduce that exposure and the corresponding risk to some degree while also addressing to some extent the comfort issues of odor and some forms of irritation. However, the public now expects smoke-free air which cannot be accomplished with any engineering or other approaches.
- An increasing number of local, state, and national governments, as well as many private building owners, are adopting and implementing bans on indoor smoking.
- At a minimum, ASHRAE members must abide by local regulations and building codes and stay aware of changes in areas where they practice, and should educate and inform their clients of the substantial limitations and the available benefits of engineering controls.
- Because of ASHRAE's mission to act for the benefit of the public, it encourages elimination of smoking in the indoor environment as the optimal way to minimize ETS exposure.