



Testimony to House Ways and Means Committee on:

House Bill 2085 by Shelton
House Bill 2547 by Zerwas
House Bill 2548 by Zerwas

House Bill 2599 by Ritter
House Bill 2600 by Ritter
House Bill 2602 by Alvarado

Presented by: Philip P. Huang, MD, MPH
March 21, 2011

This written testimony is presented on behalf of the Texas Medical Association (TMA) and the Texas Pediatric Society (TPS), which represents 45,000 physicians and medical students. My name is Philip P. Huang, MD, MPH. I am a family physician, and the health authority and medical director for the Austin/Travis County Health and Human Services Department. I formerly was medical director for chronic disease services for the Texas Department of State Health Services.

I am here today in support of House Bill 2085, HB 2547, HB 2548, HB 2599, HB 2600, and HB 2602. We believe each of these bills help to address our top priorities, which are these:

- **Reduce tobacco use and preventable illness and deaths in Texas, and**
- **Ensure access to tobacco cessation and prevention programs.**

Texas needs to reduce tobacco use and preventable illness and deaths.

Tobacco is the No. 1 agent that causes preventable illness and death in our state. This year 24,500 Texans will die from tobacco-related illnesses. This is more than deaths from AIDS, crack, heroin, cocaine, alcohol, car accidents, fire, murder, and suicide — COMBINED. And for each of these Texans, another 490,000 will be sick from a tobacco-related illness.

We've known for decades about the terrible health effects of cigarettes and secondhand smoke. This is something my colleagues and I witness every day. Physicians constantly advise our patients to stop smoking for themselves and for their families. We know there is no safe level of exposure to tobacco smoke. Anyone who inhales cigarette smoke, whether directly or secondhand, is exposed to thousands of chemicals — many of which cause cancer.

Tobacco smoke has both acute and chronic effects. Acute effects to secondhand smoke are seen in children and adults. Children who are exposed to secondhand smoke often suffer from asthma attacks. And in adults, even short-term exposure to tobacco smoke has an effect on platelets and coronary arteries that cause heart attacks. Thousands of Texans experience the chronic effects of tobacco-smoke pollution, which include coronary artery disease and the

carcinogens that cause cancers. These cancers include lung cancer, the No. 1 cancer killer of men and women.

TMA and TPS believe a comprehensive approach is needed to reduce tobacco use. This includes advertising limitations on tobacco companies, limitations on the sale of tobacco products and tobacco substitutes, tobacco cessation programs, and a smoke-free environment. Physicians also are united in our support of HB 670 by Rep. Myra Crownover and stand behind our lawmakers who endorse the measure as well. We believe this statewide smoking ban in all public and workplaces would protect individuals from exposure to secondhand smoke in their workplaces.

We need to fund tobacco prevention and cessation efforts.

We support tax increases on tobacco products, which is a proven method to reduce the number of people who smoke and the amount of tobacco people smoke. It also, of course, brings in revenue to the state, something desperately needed this particular session especially in programs impacted by the costs of tobacco use in Article II. Additionally, it has long been TMA's policy that tobacco-related revenue be directed to tobacco cessation and prevention efforts. We are especially pleased to see that HB 2602 directs funding for state tobacco cessation programs. HB 1 eliminated funding for the state's evidence-based tobacco cessation program, which has been effective in reducing tobacco use. The Department of State Health Services reports that spending \$3 per capita for comprehensive tobacco control would result in more than 160,000 Texans not smoking.

In 2010, an international group of experts appointed by the World Health Organization determined tobacco pricing and tobacco taxes were effective in cancer prevention. Numerous studies have demonstrated a strong relationship between cigarette prices and cigarette use, regardless of the level of income of an individual. In the United States, this applies for all tobacco products.

An increase in the tax will first have the greatest impact on young people, especially teenagers, many of whom have limited incomes. For example, a 10-percent increase in the price of a tobacco product will result in an almost 7-percent decrease in tobacco use by minors. Keep in mind each year more than 30,000 minors in Texas start to smoke.

In closing, I thank you for considering my comments today on protecting Texans from harmful tobacco and in support of revenue-generating efforts that also reduce tobacco use. The Texas Legislature has demonstrated support by helping Texas become a national leader in the fight against cancer. This fight must continue even during a statewide budget shortfall. These bills will help ensure that many Texans will not start smoking. And reducing tobacco use could mean financial savings for Texas by reducing the medical costs associated with tobacco. For those who choose to smoke, support will be available to help them when they are ready to quit.

Texas can no longer afford to indulge the smoking habits of a few at the cost of Texas taxpayers.