

Lifelines

from the National Cancer Institute



A Look at Smoking among Hispanic Americans

By the National Cancer Institute

Smoking causes more preventable deaths (from lung cancer, heart and lung disease, other cancers, and chronic illness) than any other single behavioral factor—an estimated 443,000 deaths each year in the United States. The most recent data estimates that about 8,400 Hispanic-Americans were expected to be diagnosed with lung cancer in 2009, with the vast majority of these cases caused by smoking.

[Lung cancer](#) can be treated, but rarely cured. Lung cancer is the leading cause of cancer death in Hispanic men and—after breast cancer—the second-leading cause of cancer death in Hispanic women. Hispanics are less likely to develop or die from lung cancer than non-Hispanic whites—but when they are diagnosed they are more likely to be diagnosed with a more serious advanced stage disease.

In 2010, almost 13 percent of Hispanics were current cigarette smokers, compared to 21 percent of non-Hispanic whites. Men are more likely to smoke (almost 16 percent) than women (9 percent). Smoking rates are higher among Hispanic high school students (18 percent) than Hispanic adults—a worrisome finding for future lung cancer trends in Hispanics.

Immigrant generation may affect cigarette smoking—nearly 17 percent of Hispanics who were born in the United States smoke, whereas only about 11 percent of Hispanic immigrants are smokers. Other patterns of smoking show that Hispanic subgroups have different smoking rates.

Smoking harms nearly every organ of the body and diminishes a person's overall health. Millions of Americans have health problems caused by smoking, a leading cause of cancer and death from cancer. Smoking causes many types of cancer, including [cancer of the lung](#), esophagus, larynx, mouth, throat, kidney, bladder, pancreas, stomach, and cervix, as well as acute myeloid leukemia. Smoking also causes heart disease, stroke, aortic aneurysm (a balloon-like bulge in an artery in the chest), chronic obstructive pulmonary disease, asthma, hip fractures, and cataracts.

Trying To Quit

Regardless of their age, people who quit smoking are less likely to die from illnesses caused by smoking than those who continue smoking. Studies show that smokers who quit at about age 30 reduce their chance of dying prematurely from smoking-caused diseases by more than 90 percent. The risk of dying is cut in half for those who stop smoking at age 50, and even people who quit at about age 60 or older live longer and have healthier lives than those who continue to smoke.

The nicotine in tobacco is addictive and makes it very difficult to quit. Nicotine dependence is the most common form of addiction in the country. Seventy percent of the 45 million current U.S. smokers report they want to quit completely, and the vast majority of these have tried to quit smoking at least once. The majority of Hispanic smokers want to quit smoking and almost 10 percent of Hispanic smokers report quitting smoking in the past year.

Smoking Quitline

Talk with an NCI smoking cessation counselor for help quitting and to get answers to smoking-related questions in English or Spanish. Call 1-877-44U-QUIT (1-877-448-7848) toll free within the United States, Monday through Friday, 8:00 a.m. to 8:00 p.m. Eastern Time. Many resources are also available on NCI's web site, smokefree.gov.

NCI leads the National Cancer Program and the NIH effort to dramatically reduce the burden of cancer and improve the lives of cancer patients and their families, through research into prevention and cancer biology, the development of new interventions, and the training and mentoring of new researchers. Resources and more information about cancer and smoking are available, please visit the NCI [web site](http://www.cancer.gov) at www.cancer.gov or call NCI's Cancer Information Service at 1-800-4-CANCER (1-800-422-6237). More articles and videos in the culturally relevant Lifelines series are available at www.cancer.gov/lifelines.