

Chewing remains popular despite health risks

By Scott Maben
Of the Emerald

"Thou weed, who art so lovely fair and smell'st so sweet."

— Shakespeare, on tobacco

"It is critical that our society prevent the use of this health hazard and avoid the tragic mistake of replacing the ashtray with the spittoon."

— C. Everett Koop, M.D., U.S. Surgeon General

People who chew tobacco are learning that a pinch between the cheek and gum may produce more than a light buzz.

Adverse effects on the oral cavity may result from consuming smokeless tobacco products, according to a current article in the Massachusetts Medical Society's Morbidity and Mortality Weekly Report.

According to the article, studies consistently link mouth and gum cancer with use of moist snuff, finely ground smokeless tobacco packaged in round tins under brand-name giants like Copenhagen and Skoal.

Such studies are discouraging many tobacco consumers.

"I felt a lot of pressure from friends to quit chewing," says 22-year-old University student Mike Clark.

About three months ago Clark kicked a chewing habit that he says began when he gave up smoking cigarettes. Publicity about the possible health risks contributed considerably to his recent decision to quit chewing, he says.

Despite this popular response, use of smokeless tobacco in the United States is increasing among young males.

More than 135 million pounds of smokeless tobacco were manufactured in 1985, while more than 12 million people "dipped and chewed." Half of these people did so on a regular basis.

Between 1978 and 1984, while cigarette sales were down, reports show a 55 percent gain in the smokeless tobacco market.

Only a couple of Clark's 10 best friends chew, "and they're trying to quit," he says.

"I would say use of chew is probably down here on campus," Clark says, "but that's just a bleak generalization based on the growing concern for health awareness."

In fact, use may be up this school year.

An employee of Eugene's 7-Eleven convenience store on Alder Street and 13th Avenue says December sales of smokeless tobacco products were up from December of 1985.

Located on the edge of campus in an active retail area heavily traveled by students, the store reports selling more than 360 cans per week at \$1.60 each. Other nearby stores and markets report increased sales, vending between 40 and 60 cans per week.

Increased sales come despite a new law that bans electronic media advertising of smokeless tobacco.

Called the Comprehensive Smokeless Tobacco Health Education Act, the law prohibits the tobacco industry from airing marketing campaigns on television and radio, and



Photo by Scott Maben

resembles the 1971 restriction on cigarette ads. Beginning next month, the act also will require that smokeless tobacco products and print advertisements bear health warnings.

Clark says the new law is responsible because it might discourage potential younger users.

The American Medical Association supported passage of the new law partly because of a study conducted in India that showed smokeless tobacco users are six times as likely to develop cancer of the nasal cavity, pharynx, larynx or esophagus as non-users.

Similar studies persuaded the Advisory Committee to the surgeon general to conclude that oral use of smokeless tobacco represents a significant health risk.

Smokeless tobacco contains potent carcinogens that "act as irritants to the cheek and gum tissues," says James Jackson, director of the University Student Health Center.

"Over a period of several years (a user) can run into oral problems, but because damage usually occurs after a number of years of use, like smoking, it's not something common at the University level," Jackson says.

In the eight years he's directed the center, Jackson says he hasn't run across any students with oral cancer. But he has seen some with symptoms of leukoplakia, a mutation of oral tissue cells, which is precancerous.

Last January, an inspector general's survey found that 39 percent of regular chewers reported presence of a white, wrinkled patch of skin in their mouths, a characteristic of leukoplakia. As many as half of these are likely to become malignant, the survey said.

"The thing so devastating (about leukoplakia) is there's no room for manipulation. It's hard to detect, and after diagnosis it's too late," says Debra George, the health center's registered dental hygienist. "The result is very disfiguring."

Case in point is the story of Sean Marsee, an Oklahoma teen-ager who died after a six-year chewing habit resulted in irreversible cancer.

Before dying in his senior year of high school, Marsee, once voted most valuable athlete of his class, lost chunks of his tongue, jaw and throat.

Medical experts are using Marsee's rare case as a manifestation that today's smokeless tobacco users, especially those developing leukoplakia, are the conclusive case studies for the future.

"It's a long-term issue," Jackson says.

George says in previous practice she saw signs of gingival recession, a condition that exposes the roots of the teeth after steadfast use of chew or snuff eventually deteriorates the skin lining the gums.

"People who have that often complain to their dentists of

sensitivity in that area," George says. "The area of recession becomes sensitive to air, sweets and citrus."

Chewing is also more addictive than smoking, and the habit may be much more difficult to break because the drug is applied directly to the mucous membrane, George says. The level of nicotine in the blood has clinically been found to be higher in chewers than in smokers.

Additionally, nicotine intake from tobacco consumption has long been assumed to contribute to peripheral vascular disease, slowed reaction time, hypertension, peptic ulcers, and fetal morbidity and mortality.

"Anyone who thinks he can start chewing then quit just as easily is deceiving himself," George says.

During an interview with the Oregon Daily Emerald in mid-December, University junior Mike Finley, a 20-year-old fraternity member, vowed to stop chewing for the new year.

Finley said he chewed from two to three cans of Kodiak snuff each week since his freshman year here, when a friend first introduced him to it.

"He chewed, and I tried it and kept going," said Finley, adding he no longer receives the slight buzz snuff used to give him.

"I chew it now because I like

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