
Smoking and mental health: myths, misconceptions and neglect

Mark Ragg & Tanya Ahmed
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Issues to consider

1. Scope of term “mental illness”:

- Those with psychotic element – < 5%
- Those with DSM or ICD diagnosis – > 30%

2. International comparisons

3. Quality of the literature

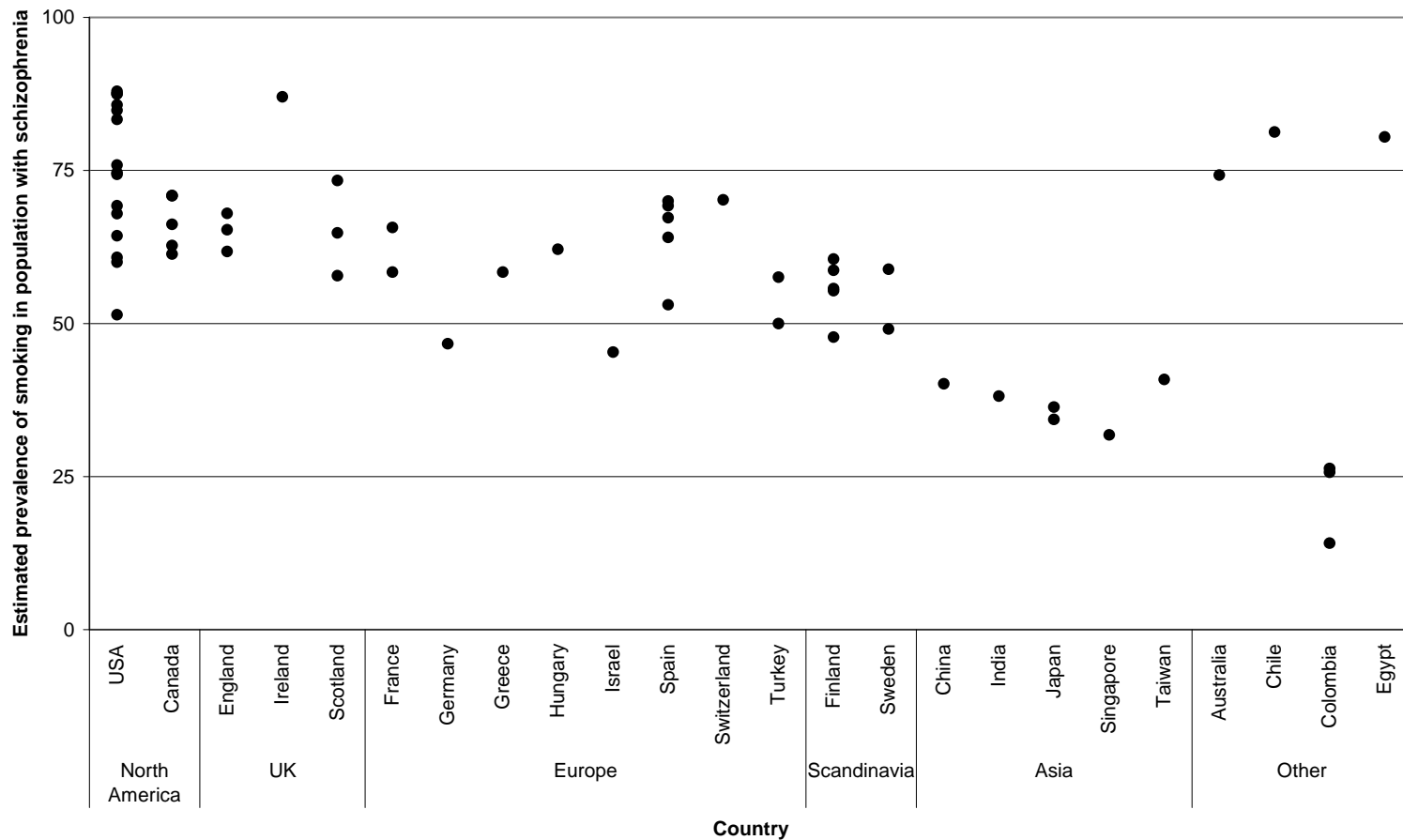
Literature review

- Commissioned by Cancer Council NSW
- 9000 papers
- Six months

Prevalence

- **Varies by country**
- **Varies by illnesses**
- **Varies by severity of illness**
- **Varies by settings**
- **Varies by gender**
- **Varies with nation and region (eg. schizophrenia)**

Prevalence in people with schizophrenia



Do people smoke to self-medicate?

- No
- People who smoke have worse symptoms than people who don't smoke

Smoking and side effects of medication

- Probably very little link
- Most studies show little effect
- Some show some effect, but variable

Do people with mental illness want to quit?

- Yes
- Very similar results to general population
- Same reasons for quitting
- Usually not asked

Can people with mental illness quit?

- Yes
- Most do
- Most do so on their own
- Just about as hard as for others

What happens when people with mental illness quit?

- Withdrawal like anybody else
- Evidence that no increased risk of exacerbation
- Difficulty telling withdrawal symptoms from exacerbation

Impact of smoking

- Leading cause of death in people with mental illness
- Terrible financial impact on impoverished people
- Significant cost to staff and hospitals in terms of time and energy

Culture of smoking

- Smoking still a norm for mental health
- Smoking still a norm in prisons
- Elsewhere, smoking seen as aberrant
- Mental health 20 years behind

What works?

- Research and evidence drawn from the very ill
- Same approaches as for people without mental illness:
 - some need help
 - some need intense help
 - some fail repeatedly
 - most succeed alone.
- We need to change the culture

Inevitability ...

The very high prevalence of smoking in schizophrenia is not an inevitable feature of the illness, but is a behaviour that could be significantly influenced by economic and social factors. ... [The importance of this fact is that] if one deems smoking is an unavoidable neurochemical consequence of the illness, attempts at controlling the harmful behaviour will not be sure-footed.

TN Srinivasan & R Thara
Schizophrenia Research 56(1-2):67-74, 2002

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