

# Policy Statement 2.2.4 – Community Oral Health Promotion: Tobacco

## Position Summary

Programs to stop smoking should be integrated into dental practices. Governments should legislate to increase taxation on tobacco products and should appropriately fund nicotine replacement therapies and other programs to stop smoking.

### 1. Background

- 1.1. In Australia smoking is the most common mode of tobacco use and is most prevalent amongst Australians with low socio-economic status.
- 1.2. Tobacco use significantly reduces the general health of an individual to the extent that it is the single most preventable cause of disease and premature death. There is no safe level of smoking.
- 1.3. Smoking amongst pregnant women has negative impacts on fetal development and children are particularly susceptible to the effects of secondhand smoke.
- 1.4. Tobacco use is a major cause of cancer of the mouth and throat and other systemic diseases.
- 1.5. Tobacco use is a significant risk factor in the development and extent of periodontal disease.
- 1.6. Tobacco use contributes to tooth loss and failure of dental implants.
- 1.7. Tobacco use may contribute to dry mouth, tooth wear, staining of teeth and fillings, and bad breath.
- 1.8. Tobacco use delays oral wound healing.
- 1.9. Quitting tobacco use will usually result in improved oral and general health.
- 1.10. There is sound research supporting nicotine replacement therapies.

### 2. Position

- 2.1. No one should use tobacco products.
- 2.2. Suitable programs for stopping tobacco use should be integrated into dental practices.
- 2.3. Public awareness campaigns on the health issues related to tobacco use should be encouraged and maintained.
- 2.4. Funding Agencies should support the role of dentists in assisting patients to stop using tobacco products.
- 2.5. While the sale of tobacco products remains legal, governments should increase taxation on their sale, continue to restrict smoking in public areas and stop the marketing of such products.
- 2.6. Governments should ensure appropriate funding and access to nicotine replacement therapies and other quit smoking programs.
- 2.7. Governments should consider the evidence base and cost-effectiveness for preventive strategies when making decisions about public funding.
- 2.8. Health professionals should not smoke in public when they are identifiable in their occupational role.

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#### **Policy Statement 2.2.4**

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