You or a member of your family is concerned about smoking and its effects. Interventional radiologists treat the damage smoking causes your body on a daily basis. This brochure will answer questions you may have about how smoking is affecting your health.

For more information on interventional radiology, please contact the Society of Interventional Radiology at 703-691-1805 or visit www.SIRweb.org.
Questions and Answers about Smoking

Q. Why all the fuss about cigarettes?  People have been smoking for centuries.

A. It wasn’t until 1964, when the Surgeon General of the United States issued the first reports on the dangers of cigarette smoking, that there was clear, convincing evidence that smoking is dangerous. New studies continually add to the evidence, so today it can be said without question that smoking kills. Cigarettes alone kill more than 400,000 Americans each year—more than alcohol, heroin, crack, automobile and airplane accidents, murders, suicides and AIDS combined.

Q. How does tobacco actually hurt my body?

A. More than 4,000 chemicals are emitted by a lit cigarette—43 of them are known to cause cancer. The three most dangerous chemicals from smoke are: • tar, which is capable of causing cancer in tissues it comes in contact with; • nicotine, a highly addictive drug that is absorbed by the lungs and affects the nervous system; and • carbon monoxide, a deadly gas that reduces the ability of your blood to carry oxygen throughout your body.

When you smoke, you increase the rate of your heartbeat and encourage the growth of plaque—a sticky substance that builds up in the arteries and causes hardening of the arteries which contributes to heart disease.

Cigarette smoke also destroys the tiny hairs that line the airways to your lungs, which leads to being more susceptible to lung infections and irritation.

The cancers that are most likely to result from smoking occur because the chemicals in the smoke come into direct contact with your tissues. For example, inhaling smoke brings the chemicals in contact with your mouth, throat and lungs. Smokers swallow a certain amount of smoke exposing the esophagus and digestive tract to the chemicals. The chemicals also are absorbed into the bloodstream and cleaned from the blood in the bladder. Cancers in all of these organs happen anywhere from twice as often to 14 times as often in smokers as in nonsmokers.

Q. Smoking is my business. Why should anyone else care what I do?

A. Your smoking is a danger to innocent people, especially children. Second-hand smoke causes 150,000 to 300,000 lower respiratory tract infections, such as bronchitis and pneumonia, in young children each year. Of these, between 7,500 and 15,000 result in hospitalization. Plus, a pregnant woman can harm or kill her unborn child by smoking.

Q. Am I safe having only three or four cigarettes a day?

A. Smoking in any form and in any amount is harmful to you. For example, smoking just two cigarettes a day doubles your risk of lung cancer.

The number of cigarettes you smoke, the amount of smoke you take into your lungs and the length of time you smoke all count against you.

Q. Seriously, what are the chances that I’m going to die from smoking?

A. One in five Americans die each year from tobacco. Smoking accounts for two of every 10 deaths from coronary heart disease or stroke, three of every 10 cancer deaths, and more than eight of every 10 deaths from chronic lung diseases such as emphysema and chronic bronchitis.

Even if it doesn’t kill you, smoking will complicate your life. If you smoke, you are more likely to have blockages of blood vessels to the kidneys, legs and brain. These blockages can lead to high blood pressure, pain with walking and stroke. You are also more likely to have complications from birth control pills, more likely to have a miscarriage, more likely to have coughs and colds, and more likely to have osteoporosis—a weakening of your bones.

Q. If I quit now, will it improve my health?

A. Quitting does reduce the risk. Within five years your risk is cut in half; after 15 years, the risk has practically disappeared. That’s why we recommend you quit. Now.

Q. What is an interventional radiologist?

A. Interventional radiologists are doctors who specialize in minimally invasive, targeted treatments performed using imaging for guidance. They use their expertise in reading X-rays, ultrasound, MRI and other diagnostic imaging equipment to guide tiny instruments, such as catheters, through blood vessels or through the skin to treat diseases without surgery. Interventional radiologists are board-certified and fellowship trained in minimally invasive interventions using imaging guidance. Their specialized training is certified by the American Board of Medical Specialties.

Many illnesses caused by smoking are treated by interventional radiologists.

Some of the diseases and conditions that are directly linked to smoking are:


Pregnant women who smoke endanger their unborn children, who can suffer from the following conditions:

- congenital malformations, damage to the placenta, damage to umbilical blood vessels, enlarged placenta, fetal and infant mortality, increased incidence of premature birth, low birthweight, neonatal deaths, spinal malformation, spontaneous abortion, stillbirth, sudden infant death syndrome, tubal pregnancy, urogenital abnormalities

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- allergy, asthma, bronchitis, cleft lip, cleft palate, congenital heart disease, coughs, cystic fibrosis, dizziness, ear diseases, headaches, hernia, hoarseness, itching, nose, lower height, phlegm, pneumo-