

workers from exposure to tobacco smoke.

Method

First, we conducted in-dept interviews with ten employers about the policies that are in place to protect their employees from secondhand smoke. In collaboration with the Fight Against Cancer, the unions, and employer organization, we searched and analyzed company policies and good examples from other EU countries related to tobacco smoke exposure. Second, we developed and tested guidelines and a toolkit with communication and education materials.

Results

We analyzed 25 company policies and five good practices from other EU countries. There are many good practices/examples. But there is a big difference between corporations. Most companies do not have any policy that protects employees from tobacco smoke exposure. Employers expressed the need for customer awareness, education for employees, and policy guidelines for employers. Together with the partners, we developed and tested guidelines and a toolkit to help employers to raise awareness among costumers, install a smoke-free policy and educate and empower employees.

Conclusion

A lot of corporations do not have any policy to protect their employees against tobacco smoke. The guidelines and toolkit provide to their needs and encourages them to take action.

Tob. Prev. Cessation 2020;6(Supplement):A14

DOI: 10.18332/tpc/128299

Burden of disease from exposure to secondhand smoke in children in Europe

Giulia Carreras¹, Alessio Lachi¹, Barbara Cortini¹, Silvano Gallus², Maria José López^{3,4,5}, Ángel López Nicolás⁶, Alessandra Lugo², Maria Teresa Pastor⁷, Joan B. Soriano⁷, Esteve Fernandez^{8,9,10,11}, Giuseppe Gorini¹

¹Study, Prevention & Oncologic Network Institute (ISPRO), Florence, Italy

²Mario Negri Institute for Pharmacological Research, Milan, Italy

³Public Health Agency of Barcelona, Barcelona, Spain

⁴CIBER Epidemiologia y Salud Pública, Barcelona, Spain

⁵IIB Sant Pau, Barcelona, Spain

⁶Polytechnic University of Cartagena, Cartagena, Spain

⁷Hospital Universitario La Princesa, Madrid, Spain

⁸Catalan Institute of Oncology, L'Hopitalet de Llobregat, Barcelona, Spain

⁹Bellvitge Biomedical Research Institute, L'Hopitalet de Llobregat, Barcelona, Spain

¹⁰University of Barcelona, Barcelona, Spain

¹¹Consortium for Biomedical Research in Respiratory Diseases, Barcelona, Spain

g.carreras@ispro.toscana.it

Background

Second-hand smoke (SHS) exposure at home is a major cause of disease among children. The widely spread of smoking bans in public places in the last decades favored the adoption of voluntary smoking bans in homes.

Objectives

To quantify the health consequences of such voluntary smoking bans in European Union (EU) countries, we analysed the burden

of diseases from low birth weight, lower respiratory infections, asthma, otitis media and sudden infant death syndrome due to SHS exposure in children and pregnant women in the period 2006-2017.

Methods

We used the Comparative Risk Assessment method and we estimated the prevalence of household SHS exposure in children and the SHS exposure in pregnant women using a multiple imputation procedure based on the Eurobarometer surveys. Data on mortality and disability adjusted life years (DALYs) were collected using official statistics data and estimates from the Global Burden of Disease study.

Results

In EU countries SHS exposure in children and in pregnant women stalled in the period 2006-2017, as well as their attributable burden. In 2017 the proportion of deaths and DALYs (on total) attributable to SHS exposure in EU countries was respectively 1.4% and 0.7%, mainly from low birth weight. The highest proportions were estimated in Eastern EU countries, and the lowest in Northern.

Conclusions

This study suggests that comprehensive smoking ban legislations are able to reduce SHS exposure in homes and its burden in children a few years after the adoption of the legislation. However, in 2017 the burden from SHS exposure in children is still not negligible.

Tob. Prev. Cessation 2020;6(Supplement):A15

DOI: 10.18332/tpc/128300

Burden of disease from breast cancer attributable to smoking and secondhand smoke exposure in Europe

Giulia Carreras¹, Alessio Lachi¹, Luke Clancy², Silvano Gallus³, Esteve Fernandez^{4,5,6}, Maria José López^{7,8,9}, Joan B. Soriano¹⁰, Ángel López Nicolás¹¹, Sean Semple¹², Giuseppe Gorini¹,

¹Study, Prevention & Oncologic Network Institute (ISPRO), Florence, Italy

²TobaccoFree Research Institute Ireland, Dublin, Ireland

³Mario Negri Institute for Pharmacological Research, Milan, Italy

⁴Catalan Institute of Oncology, L'Hopitalet de Llobregat, Barcelona, Spain

⁵Bellvitge Biomedical Research Institute, L'Hopitalet de Llobregat, Barcelona, Spain

⁶University of Barcelona, Barcelona, Spain

⁷Public Health Agency of Barcelona, Barcelona, Spain

⁸CIBER Epidemiologia y Salud Pública, Barcelona, Spain

⁹IIB Sant Pau, Barcelona, Spain

¹⁰Hospital Universitario La Princesa, Madrid, Spain

¹¹Polytechnic University of Cartagena, Cartagena, Spain

¹²Faculty of Health Sciences and Sport, University of Stirling, Stirling, United Kingdom

g.carreras@ispro.toscana.it

Background

Tobacco smoke is the most important human carcinogen and breast cancer is the leading cause of cancer among women, accounting in 2018 for nearly one in four of all female new cancer diagnoses worldwide, and around 15% of female cancer deaths. Numerous studies have been conducted to evaluate the association between