Legislation restricting where cigarettes can be smoked continues to proliferate throughout the country, with some states now banning smoking everywhere on hospital grounds. While the health risks associated with cigarette smoking are well documented, less attention is given to the potential negative consequences of a smoking ban. This report aims to provide information regarding the positive and negative effects of a total smoking ban on psychiatric inpatients.

Rates of Smoking in Psychiatric Units

Tobacco use is widespread among people with psychiatric disorders. The rate of tobacco consumption in psychiatric units is substantially higher than the general population. Whereas approximately 25 percent of the general population smokes, 35 to 54% of psychiatric unit patients are tobacco users. Moreover, between 80 and 90 percent of schizophrenic patients are smokers. Nearly one half of all the cigarettes sold in the United States are consumed by persons with a psychiatric disorder.

A survey of mental health patients conducted in 2001 found that cigarettes were self-reported as a “core need,” and were ranked higher than food in perceived importance.

Evidence in Favor of a Smoking Ban

Many organizations including The Health Foundation of Central Massachusetts agree that exposure to cigarette smoke is unhealthy for both hospital patients and staff. Smoking creates health complications for both psychiatric patients and employees. Long-term exposure to

5 New Smoking Laws Make Work Sites Equal, The Health Foundation of Central Massachusetts, Inc. http://www.hfcm.org/default.asp?id=223 viewed 03/10/05
cigarette smoke has been linked to an increased risk of heart attack and heart disease.\textsuperscript{6, 7} Smoking is also correlated with a development of anxiety disorders.\textsuperscript{8}

Studies suggest that psychiatric patients using antipsychotics should avoid smoking. Studies have found that smoking can reduce the blood levels of certain antipsychotics by up to 50%. To compensate for the lower absorption of antipsychotics, an increased dosage is necessary.\textsuperscript{9}

A study performed by the Department of Psychiatry at the University of California, San Francisco, found that a full smoking ban had no significant impact on the ward environment of a locked psychiatric unit. Although the staff of the psychiatric ward expected that the smoking ban would have negative consequences, the study found the rates of aggressive incidences remained unchanged after the ban was enacted. Also, patients’ negative attitudes towards the ban decreased over time.\textsuperscript{10}

Research performed by the Department of Psychiatry at the Beth Israel Medical Center in New York, NY validates the conclusions of the California study. The implementation of a smoking ban did not lead to an increase in disruptive behavior or have a negative effect on staff morale.\textsuperscript{11}

A two-year follow-up study done on the effects of banning smoking in an inpatient psychiatric service, performed by the Department of Psychiatry and Behavioral Sciences at the University of Louisville School of Medicine, KY, also showed no significant increases in long-term major behavioral disruptions.\textsuperscript{12}

\textsuperscript{6} New Study Shows Smoking Ban Reduces Heart Attacks. The Health Foundation of Central Massachusetts, Inc. “New-Month Public Smoking Ban Slashes Heart Attack Rate in Community” http://www.hfcm.org/default.asp?id=189


Evidence Against a Smoking Ban

There is evidence to suggest that cigarette smoking may play a role in controlling schizophrenic symptoms.\textsuperscript{13} A study published in the *American Journal of Psychiatry* correlated an exacerbation of schizophrenic symptoms to a decrease or cessation of cigarette smoking.\textsuperscript{14} That same study found that more than 25 percent of schizophrenic patients reported smoking in order to decrease their symptoms.\textsuperscript{15} Patients also report smoking in order to regulate side effects of their medication.\textsuperscript{16} Nicotine has been shown to facilitate the release of dopamine in the cortex of the brain, an effect that been shown to favorable effect schizophrenics.\textsuperscript{17} Other studies have shown nicotine to improve cognitive deficiencies in schizophrenics, including sensory gating and eye movement deficiencies.\textsuperscript{18} Finally, one study suggested that nicotine may have valuable properties in treating ADHD and depression.\textsuperscript{19}

Nicotine in the bloodstream is deleterious to the absorption of medication.\textsuperscript{20} In situations where patients are admitted for psychiatric disorders and then released, the introduction of nicotine outside a controlled hospital setting could render the prescription medication less effective; however, in the hospital setting access to nicotine is monitored.

The Louisville study cited earlier in this report also found a significant short-term increase in verbal assaults and PRN (pro re nata) medication prescriptions for anxiety when cigarettes were banned.\textsuperscript{21} The Psychiatric Patient Advocate Office in Ontario, Canada, an organization whose mission is to protect the civil rights of psychiatric patients, has come out against any smoking ban in hospitals, primarily on the basis of choice.\textsuperscript{22}


\textsuperscript{15} Ripoll, Nadege; Bronnec, Marie; Bourin, Michel. “Nicotinic Receptors and Schizophrenia.” *Current Medical Research and Opinion* 20(7):1057-1074, 2004. © 2004 Librapharm Limited

\textsuperscript{16} Smith, Cedric. Pristach, Cynthia. Cartagena, Maria. “Obligatory Cessation of Smoking by Psychiatric Inpatients.” http://ps.psychiatryonline.org/cgi/content/full/50/1/91 viewed 03/10/05.


Legislation in Other States

Maine

In 2001, Maine repealed the 1989 law that permitted smoking within psychiatric hospitals. The repeal does not ban smoking in psychiatric units, but allows hospitals to ban smoking at their own discretion.\(^{23}\) Title 22 Chapter 263, §1580-B had permitted smoking in psychiatric units as an exception to the hospital wide smoking bans.\(^{24}\) Since this ban Maine hospitals including St. Mary's Hospital and Southern Maine Medical Center have banned smoking.

Arkansas

On February 10\(^{th}\) of this year, Arkansas Senate passed House Bill 1193 by a 26-1 margin and banned smoking on hospital grounds.\(^{25}\) The bill, proposed by Representative Jay Bradford, D-White Hall, states that violation of the smoking ban can only be enforced if a hospital staff member requests the offender to cease smoking and the request is refused.\(^{26}\) The violation is treated as a Class C Misdemeanor and is punishable with a $100 fine. Psychiatric units and federal hospitals are exempt from the legislation.\(^{27}\) Also, doctors may permit patients with substance abuse problems to smoke on the grounds regardless of the ban. Prior to this legislation numerous Arkansas hospitals had banned smoking on hospital grounds but had difficulty enforcing the ban.\(^{28}\)

Wisconsin

Wisconsin’s Clean Indoor Air Act of 2004 (STAT. § 101.123) restricts smoking in inpatient health care facilities and hospitals. Hospitals that provide treatment for mental illness, alcoholism, or drug abuse are exempt from the legislation.\(^{29}\)

Grand Rapids, Michigan

On May 30, 2003 the hospitals in Grand Rapids, Michigan instituted the nation’s first citywide hospital-collaboration smoking ban. This smoking ban has generated national attention with the local hospitals having received inquiries regarding implementation procedures from 43 other


\(^{24}\) Title 22 Health and Welfare. [http://janus.state.me.us/legis/statutes/22/title22sec1580-B.html](http://janus.state.me.us/legis/statutes/22/title22sec1580-B.html) viewed 03/08/05.


\(^{29}\) American Lung Association “Clean Indoor Air” [http://slati.lungusa.org/state-teml.asp?id=49#CIA](http://slati.lungusa.org/state-teml.asp?id=49#CIA) viewed 03/08/05.
states. Under the ban, smoking was prohibited within the hospitals, as well as on the surrounding grounds and campuses.\textsuperscript{30} This ban includes hospitals with psychiatric units.

**Indianapolis, Indiana**

Proposal 45, currently under consideration by the Indianapolis City Council, would enforce a smoking ban both inside of and within 50 feet of all public locations including but not limited to restaurants, bars, shopping malls, sports arenas, and health care facilities. The health care facilities mentioned in the ban include those that treat psychiatric, mental, emotional, and substance abuse problems.\textsuperscript{31}

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This report has been prepared by undergraduate students at the University of Vermont under the supervision of Professor Anthony Gierzynski. The material contained in the report does not reflect the official policy of the University of Vermont.