Note from the Surgeon General

One year ago in this Journal, I announced the initial products of the Task Force on Community Preventive Services.1 Today, we add to the public health toolkit with the Task Force’s second set of recommendations, “Recommendations Regarding Interventions to Reduce Tobacco Use and Exposure to Environmental Tobacco Smoke.”2

Reducing tobacco use is a key component of Healthy People 20103—our national action plan for improving the health of all Americans during the first decade of the 21st century. There are 21 national health objectives related to tobacco use, covering tobacco use in population groups, cessation and treatment, exposure to secondhand smoke, and social/environmental changes. Attaining all of the Healthy People 2010 tobacco-use objectives, including one to cut smoking rates among teens and adults in half, will require a national commitment to implementing approaches to tobacco-use prevention and control that have been proven to be effective.

The Task Force’s recommendations address this critical need and respond directly to the call for evidence-based decision making for tobacco use prevention and control in last summer’s Reducing Tobacco Use: A Report of the Surgeon General4 and the Best Practices for Comprehensive Tobacco Control Programs5 released by the Centers for Disease Control and Prevention’s (CDC) Office on Smoking and Health in August 1999. The publication of these recommendations could not be more timely, as states and communities seek the most effective and cost-effective ways to implement comprehensive tobacco control programs. The Master Settlement Agreement6 that resulted from state lawsuits, as well as other funding source, such as excise taxes, are providing the resources that can be used to fuel major investments in this area. Although we will continue to learn more about effective tobacco-use prevention and control strategies, the current evidence base for action is strong and can be used to guide the allocation of available resources.

It is important to note that the articles in this supplement to the American Journal of Preventive Medicine go beyond just making recommendations. The evidence on which the recommendations are based is clearly laid out, as are the methods used to establish that evidence base. This kind of explicit and systematic process allows the reader to judge for himself or herself how the recommendations can be best applied locally. In addition, the summary of guidelines from different sources within the federal government regarding various aspects of tobacco-use prevention and control will be of enormous assistance to readers already inundated with numerous sets of guidelines and recommendations. This piece clearly lays out how the different guidelines and recommendations complement each other and can be used together to create a rational and comprehensive evidence-based tobacco policy.

I congratulate the Task Force, the CDC-based support staff, and the authors and team members who designed and conducted the evidence reviews on which the recommendations are based for their diligence and hard work. I also commend the Journal’s editors for their commitment to publishing these recommendations and reviews.

To assure our goal for improving health and quality of life, we must rely on clear, science-based, and practical recommendations. I encourage each of you to use these recommendations from the Guide to Community Preventive Services and other guidelines to identify, implement, and apply the most effective and cost-effective interventions to combat tobacco use, the largest avoidable cause of premature morbidity and mortality in this country, and to strengthen our public health efforts and our nation’s well-being.

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References