Smokeless Tobacco in Sports

- Use of smokeless tobacco among athletes continues to be a problem.

- The CDC estimates that 20% of high school boys and 2% of high school girls use smokeless tobacco.

- It is estimated that among college level athletes that 60% of male baseball players, 40% of football players and 9% of female softball players use smokeless tobacco.
Smokeless Tobacco in Sports

What is smokeless Tobacco?

- Smokeless tobacco is a nicotine product, it is also called chewing tobacco, chew, chaw, dip, plug

- It comes in 2 forms: snuff and chewing tobacco

  - Snuff is a fine grain tobacco that comes in a round tin, it can be either a small tea like bag or loose in the tin

  - Chewing tobacco usually is a shredded, twisted or bricked tobacco leaves that usually comes in a pouch
Did you know?
The nicotine contained in 1 can of snuff is equal to that contained in 5 packs of cigarettes!
Did you know?

Besides Nicotine, which is the main drug the user derives from the tobacco, Smokeless tobacco contains 28 cancer-causing agents!

- Some of those agents are $N$–nitrosamino acids, volatile $N$–nitrosamines, benzo(a)pyrene, volatile aldehydes, formaldehyde, acetaldehyde, crotonaldehyde, hydrazine, arsenic, nickel, cadmium, benzopyrene, and polonium–210.
How it affects the athlete?

• Contrary to the fact, Many athletes believe that the use of tobacco products enhances their performance.

• When first taken the Nicotine in tobacco initially causes an unnatural rapid release of adrenaline

  Rapid heartbeat
  Increased blood pressure
  Rapid, shallow breathing
How it affects the athlete?

- Shortly after the release of adrenaline, and when the nicotine wears off, the brain stops releasing positive neurotransmitters and the user feels tired, depressed and down.

- Depending on the time of use, this can significantly impact the athletes performance.

- **Example:** A football player has a dip prior to the start of a game, after the 1st quarter the players performance begins to decline, due to a lack nicotine. We all know the results of poor performance.
Long term affects

In addition to mouth cancer, gum and tooth disease,

Tobacco use is associated with increased risk of peptic ulcers and coronary artery disease
Prevention and Treatment

- Education at the earliest possible age is key!
  - Studies show the user begins as early as age 8

- Make your policies clear and concise and have the athlete sign the policy.

- When noticing a user, we need to intervene
  - We need to do this when we first recognize a user!
  - We need to discuss with the athlete how it affects their performance and what long term effects it has on their health.

- For habitual users, there are many programs available as well as medications. The user should be referred to a physician for further guidance.

- In the end, Nobody can force somebody to quit, they have to do it on their own, but early education on the use of smokeless tobacco is the best prevention!