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# Passive smoking doesn't cause cancer – official

THE world's leading health organisation has withheld from publication a study which shows that not only might there be no link between passive smoking and lung cancer but that it could even have a protective effect.

The astounding results are set to throw wide open the debate on passive smoking health risks.

The World Health Organisation, which commissioned the 12-centre, seven-country European study has failed to make the findings public, and has instead produced only a summary of the results in an internal report.

Despite repeated approaches, nobody at the WHO headquarters

by VICTORIA MACDONALD

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in Geneva would comment on the findings last week. At its International Agency for Research on Cancer in Lyon, France, which coordinated the study, a spokesman would say only that the full report had been submitted to a science journal and no publication date had been set.

The findings are certain to be an embarrassment to the WHO, which has spent years and vast sums on anti-smoking and anti-tobacco campaigns.

The study is one of the largest ever to look at the link between passive smoking — or environmental tobacco smoke (ETS) — and lung cancer, and had been eagerly awaited by medical experts and campaigning groups.

Yet the scientists have found that there was no statistical evidence that passive smoking caused lung cancer.

The research compared 650 lung cancer patients with 1,542 healthy people. It looked at people who were married to smokers, worked with smokers, both worked and were married to smokers, and those who grew up with smokers.

The results are consistent with their being no additional risk for a person living or working with a

smoker and could be consistent with passive smoke having a protective effect against lung cancer.

The summary, seen by *The Sunday Telegraph*, also states: "There was no association between lung cancer risk and ETS exposure during childhood."

A spokesman for Action on Smoking and Health said the findings "seem rather surprising given the evidence from other major reviews on the subject which have shown a clear association between passive smoking and a number of diseases."

Roy Castle, the jazz musician and television presenter who died from lung cancer in 1994, claimed

he contracted the disease from years of inhaling smoke while performing in pubs and clubs.

A report published in the *British Medical Journal* last October was hailed by the anti-tobacco lobby as definitive proof when it claimed that "non-smokers living with smokers had a 25 per cent risk of developing lung cancer."

But yesterday, Dr Chris Proctor, head of science for BAT Industries, the tobacco group, said the findings had to be taken seriously. "If this study cannot find any statistically valid risk you have to ask if there can be any risk at all."

"It confirms what we and many other scientists have long believed, that while smoking in public may be annoying to some non-smokers, the science does not show that being around a smoker is a lung-cancer risk."

The WHO study results come at a time when the British Government has made clear its intention to crack down on smoking in thousands of public places, including bars and restaurants.

The Government's own Scientific Committee on Smoking and Health is also expected to report shortly — possibly in time for this Wednesday's National No Smoking day — on the hazards of passive smoking.

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# A setback for nanny

**A**S FAR as the World Health Organisation is concerned, good news is bad news. That is why, as we reveal today, it has chosen so far not to publish the findings of the extensive research which it commissioned into the alleged association between passive smoking and lung cancer in non-smokers. The research failed to find any such association, thus destroying one of the articles of faith upon which the church of anti-smoking is founded. Can anyone doubt that if the research had uncovered a positive association between passive smoking and lung cancer in non-smokers, it would have been given the kind of publicity usually reserved for the antics of film stars?

There are two reasons for the WHO's deep reluctance to broadcast the findings of its own study. First, of course, the organisation had already taken up a strong position on the harmfulness of passive smoking and, like every organisation and individual, does not like to admit that it might have been wrong. Second, so strong has the faith in the evils of smoking become that many people genuinely feel that any intellectual sleight of hand is justified, as long as it conduces to the greater, indeed the greatest, good: that is to say, the total elimination of smoking from

the repertoire of human behaviour.

There is yet another, deeper reason. The WHO is a bureaucracy, whose institutional *raison d'être* is to interfere as widely as possible in the day-to-day life of as many people as possible. The more serious hazards to the health of humanity it can uncover, the more plausible its claims to lavish funding, larger staffs, higher pensions and better canteen facilities.

Its position is not fundamentally different from that of the British Department of Health, which only last week was forced finally to concede that red meat may not be as cardiotoxic as previously alleged. Again, the reason for ministers' reluctance to admit this before is not hard to guess. If red meat is dangerous, then the Government has another excuse to intervene in our lives. But if it is safe — heaven forbid that it should actually be good for you! — the Government need do nothing. And if there is one thing governments hate more than any other, it is the need to do nothing. Something far more precious than mere lives is at stake here: government jobs and ministerial power.

The anti-anti-smokers should not rejoice too soon, however. All scientific findings such as those of the WHO research are provisional, and

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The quasi-religious fervour with which the anti-smoking lobby carries on its activities results not so much from the desire to do good, but from the desire to have a cause in which to believe and with which it may exert public influence. Once smoking has been utterly suppressed, we may be sure that we shall not be left in peace to go to Hell in our own way. First tobacco, then meat, cholesterol, alcohol, salt, chocolate, sugar, caffeine — the list is endless. We shall never be left to enjoy anything unselfconsciously again, and in the meantime health bureaucracies will have waxed uncommonly, and unhealthily, fat.

can be overturned by further research. And even if passive smoking does not cause cancer in non-smokers, it may still cause asthma and bronchitis in children, which is bad enough.

Still, the WHO debacle should alert the public to the fact that it isn't only tobacco companies which have vested interests, contrary to what the anti-smoking lobby might say. Organisations which claim to work disinterestedly for the good of the general public rapidly gain vested interests of their own, even if they didn't have them to begin with. The truth is rarely pure, and never simple.

If the public is not to be agitated constantly by panics over health hazards, most of which turn out to be illusory only a few weeks or months after they are first raised, it will have to keep a few simple considerations constantly in mind.

Our age is by far the healthiest which has existed in the history of humanity. A statistical association between a disease and an environmental factor does not prove cause

and effect; yet wide publicity is given to every claim that such causal relationships exist. In contrast, little or no publicity is given to evidence that they do not. The result is to strengthen the impression that the world is ever more full of hazards and dangers. In

fact, the reverse is true: it is safer than ever before. When a large percentage increase in a risk is reported — say, the dangers involved in eating beef because of BSE — it is worth asking how great the risk was in the first place.

The dangers of passive smoking have been grossly exaggerated for political ends. Smoking remains an unpleasant habit for those who do not themselves smoke, and it is undoubtedly bad for the health of those who do. But there can be few smokers left in the developed world who do not know this, and therefore die of, or in, ignorance.

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# No 'significant' risk in passive smoking

LEADING cancer experts have conceded that the World Health Organisation's study of the link between passive smoking and lung cancer failed to find any statistically significant extra risk, as exclusively revealed by *The Sunday Telegraph* last week.

The experts include Prof Sir Richard Doll, the world's leading authority on the link between direct smoking and cancer, who said that the rejection was on the grounds that the results were simply yet more evidence of the kind produced by dozens of earlier studies, which have also usually failed to give conclusive results.

He insisted, however, that taken together the studies point to a significant risk: "On its own, the WHO study is not definitive, but it contributes to the weight of evidence."

However, the rejection of the non-significant findings from the WHO study looks set to trigger accusations that "politically correct" scientists deliberately suppress data which fails to support their own beliefs.

Despite repeated requests last week to the WHO team to put its own side of the story, and an undertaking from a senior team member to give a response to specific

by ROBERT MATTHEWS and VICTORIA MACDONALD

questions, none was given.

However, *The Sunday Telegraph* this week reveals the full extent of the flaws in the WHO report, including the fact the scientists appear to have over-interpreted the figures leading them to claim the risk is greater than it is.

The study, conducted by the WHO's International Agency for Research on Cancer, compared 650 lung-cancer patients with 1,542 healthy people. It looked at people who were married to smokers, worked with smokers, both worked and were married to smokers, and those who grew up with smokers.

The WHO scientists and Ash incorrectly claim that the results show that there was a 16 per cent risk of a spouse living with a smoker developing lung cancer.

Dr Rudolfo Saracci, a senior scientist on the WHO team, yesterday declined a request to give further details of the research findings pending publication in a medical journal. However, he insisted that the "soundest interpretation" of the results was that there is indeed an increase in risk related to spousal exposure.

# Behind the smokescreen

Amid accusations of cover-up and misrepresentation in the wake of our revelations last week, Victoria Macdonald and Robert Matthews investigate the truth about passive smoking

## Passive smoking doesn't cause cancer – official

**THE** World Health Organisation has announced that passive smoking is *not* a cause of lung cancer. The WHO's findings are a significant blow to the anti-smoking lobby, which has long argued for the abolition of tobacco. The WHO's findings are based on a study of 15,000 people living with a smoking spouse. The study found that passive smoking was not a significant risk factor for lung cancer. The WHO's findings are based on a study of 15,000 people living with a smoking spouse. The study found that passive smoking was not a significant risk factor for lung cancer.

**I**N THE run up to a No-Tobacco Day last year, the World Health Organisation released its mission statement: "United for a tobacco-free world". The message was unequivocal. Tobacco, seemingly responsible for so many ills, must be abolished from this planet. Yet last week the WHO found itself in an embarrassing position when *The Sunday Telegraph* revealed that it was behind a study — the second largest in the world and the largest in Europe — which had found no statistical evidence that passive smoking causes lung cancer.

The findings from the WHO's International Agency for Research into Cancer had been published in an internal report but not made public. The WHO denied that it had kept the findings secret and said it was waiting for the study to be published in a science journal.

Secret or not, it was a signal for a clash of the Titans: the anti-smoking lobby and the WHO against the tobacco industry. The anti-smoking lobby accused the tobacco industry of manipulating the media. The tobacco industry accused the anti-smoking lobby of misrepresenting statistics.

Sir Kenneth Calman, the Government's Chief Medical Officer, said the WHO's study results had been "misreported". The WHO denounced *The Sunday Telegraph* report on the study as "false and misleading".

But *The Sunday Telegraph* article was not "false and misleading". It did not argue for or against smoking; nor did it address the debate on whether actual smoking causes cancer, or whether smoking in front of babies can lead to cot death, or even that other studies have shown a link between passive smoking and lung cancer.

Yet these were all arguments used by our critics to "prove" last Sunday's article was wrong. Our article was based on one fact: the WHO study has failed to show any statistically significant risk that passive smoking causes cancer.

In its report, the study team stated its findings in the recondite language of statistical analysis. Those exposed to environmental tobacco smoke from their spouse, it claimed, have a "relative risk" (RR) of lung cancer of 1.16, with a so-called 95 per cent confidence interval more of this later, ranging from 0.93 to 1.44.

On the face of it, the conclusion is clear: the study had found a 16 per cent greater risk of cancer among those living with a smoking spouse. That, at least, was the message that the WHO and its supporters wanted emphasised. But as ever with statistics, the devil is in the details. And it was these details that the critics of *The Sunday Telegraph* article chose to overlook.

The WHO study was based on results obtained by recruiting hundreds of people and taking into account all the obvious sources of lung cancer to which they were exposed, such as urban pollution.

Then, by sifting out the effect of all these other potential causes, the research team was able to give an estimate of the risk of lung cancer due to inhaling someone else's smoke.

Yet no matter how careful the researchers are to rule out other explanations from such statistical studies, one simple one remains: fluke. Statisticians have developed ways of stating their confidence that they haven't been fooled by a fluke, and the WHO team chose one known as the confidence interval method. This gives the range of results which

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the study might reasonably have got if nothing more than chance were at work.

And the bad news for those hailing the WHO results as proof-positive of a cancer link with passive smoking is that the study's own confidence interval of 0.93 to 1.44 includes a relative risk of 1 — that is, no extra risk.

In other words, the results are — as *The Sunday Telegraph* stated — consistent with there being no real cancer risk for non-smokers, and even with there being a reduced risk.

The WHO last week accused *The Sunday Telegraph* of concentrating on the study's confidence intervals while ignoring the study's "headline" relative risk figure of 1.16. But what the WHO declined to point out was that this headline figure alone is meaningless — as, unlike a confidence interval, it does not show how likely fluke is to give such a result.

The chances of getting this headline figure by fluke alone can be calculated. And once again, the bad news for the WHO and its followers is that those chances are so high that the headline fig-

dence." He added, however, that this was a trait common to many studies of passive smoking.

So why such a furore? *The Sunday Telegraph* was saying that you may not like smoke in your face, but it doesn't look as if it will kill you. It appears that the violence of the reaction to *The Sunday Telegraph* story was at least partly because of the embarrassment the article caused the World Health Organisation. But more than that is the emotion attached to the arguments over passive smoking. Each side has a vested interest in proving that it does or does not harm people.

The anti-smoking lobby, led by Action on Smoking and Health (ASH), and backed by the British Medical Association and cancer charities, can scent victory. At last it has a Government that wants to crack down on smoking (even if it fudged the issue when it came to Formula One and tobacco sponsorship).

A White Paper on smoking reduction is being prepared for publication this autumn and already ministers have let it be known that they want a voluntary ban on smoking in public places,

including pubs and restaurants.

Memories of the cigar-puffing former health secretary Kenneth Clarke have not yet faded. But there must have been joy at the sight of Tessa Jowell, the health minister, speaking at the launch of last Wednesday's National No Smoking Day, promising action while taking a swipe at the tobacco industry.

The big blow was delivered on that same Wednesday (24 hours earlier than planned), in a report from the Scientific Committee on Tobacco and Health which published a review of evidence collected over the past four years. It claimed that 120,000 people a year die from smoking-related disease, that passive smoking increases the risk of lung cancer by 26 per cent and that 80 cot deaths a year are attributable to smoking by mothers.

The Government said this was definitive and cancelled out *The Sunday Telegraph* claims. In fact, the SCOTH report was a collection of previous studies, added together to reach a risk value. The WHO research was an original study.

But it was the knowledge that the SCOTH report was due that

led Ash and other anti-smoking groups to claim that the tobacco industry was attempting a counter-offensive. And this is without a doubt true. The tobacco industry is increasingly beleaguered.

Danny Rogers, tobacco correspondent of *Marketing* magazine, said: "The industry has found itself backed into a corner and, like all cornered animals, it is fighting back."

Clive Bates, head of Ash, said: "Passive smoking and addiction destroy their civil liberties argument. The industry has always maintained that smoking is a habit that adults choose freely

and that the State and Government should not intervene. That argument breaks down if other people are harmed or there is addiction, because addiction means the smoker no longer chooses to smoke."

But the industry does not only have ethical or moral concerns: it is facing multi-billion-pound law suits in America and Britain from people with lung cancer. In this country, too, there has been a reduction in the number of adult cigarette smokers — 52 per cent of men and 42 per cent of women in 1972 to 29 per cent of men and 28 per cent of women in 1996/97.

John Carlisle, the former Tory MP who is now the executive director of industry affairs for the Tobacco Manufacturers' Association, admitted that there was a counter-offensive against the scientific claims made by the anti-smoking lobby and the advertising and sponsorship plans.

"We are hitting back because we fundamentally believe that the evidence it [the Government] has does not warrant further restrictions in public places."

That was not an argument that *The Sunday Telegraph* even attempted to enter. But what became clear as the week progressed was how important it was to the anti-lobby that passive smoking should be seen to be harmful.

The WHO was keen to stress its study was the largest ever carried out in Europe and was conducted in 12 centres from seven countries, covering 650 cases of lung cancer and 1,542 controls.

And yet despite its size and the care with which it was carried out and even with all the huffing and puffing, the simple fact reported last week by *The Sunday Telegraph* remains: the WHO study failed to make its case.

Scientists call for curbs on cigarettes

# Smoking in the home 'kills babies'

Who to believe? Our report (top) on the WHO study and *The Daily Telegraph* last Thursday

ure is not even close to being statistically significant. "They certainly seem to have been guilty of some over-interpretation," said one expert on medical statistics at a major British university, who declined to be named. "The results are definitely not significant."

Professor Sir Richard Doll, who first demonstrated the link between direct smoking and lung cancer, also conceded that the WHO results were not statistically significant: "On its own, the study is not definitive, but it contributes to the weight of evi-