

Smoking and Smoking-Related Health Issues among Depressed Individuals in Los Angeles County

S. Mills, Ph.D., M. Weber, Ph.D., and P. Simon, M.D., M.P.H.

Los Angeles County Tobacco Control & Prevention Program

Problem

Smoking has been found to occur at higher rates among people with mental health conditions such as depression and anxiety. A population-based study conducted in the early 1990's (the National Comorbidity Survey) demonstrated that of the nearly 17% of the U.S. population ever diagnosed with depression, about 37% were current smokers, much higher than the roughly 22% rate for individuals with no diagnosis of a mental health condition (Lasser et al., 2000).

Objective

To study the relationship between depression and smoking and also smoking-related health factors.

Design and Methods

Biennial, population-based telephone health survey conducted in 1999 among adults living in Los Angeles County.

SUDAAN was used to obtain proportions and standard errors while taking into account the sampling design. Two-way cross-tabulation analyses were conducted to examine the associations among depression, smoking, and smoking-related factors. Follow-up logistic regression analyses were conducted to determine whether depression had an independent contribution after controlling for sex, race/ethnicity, age, and education.

Variables of Interest

The independent variable of interest was depression diagnosis: adults who self-report ever having been given a diagnosis of depression versus adults who self-report never having been given a diagnosis of depression.

The dependent variables of interest were: smoking status, exposure to secondhand smoke, and tried to quit smoking in the past 12 months.

Results of comparisons between depressed and non-depressed adults living in Los Angeles County in 1999.

Dependent Variable	Depressed % (95%CI)	Non-Depressed % (95%CI)	Odds Ratio* OR (95%CI)	Adjusted Odds Ratio*† OR (95%CI)
Current smoking	29 (4)	17 (1)	1.97 (1.60, 2.42)	1.94 (1.54, 2.45)
Former smoking	42 (5)	31 (1)	1.63 (1.32, 2.02)	1.51 (1.16, 1.98)
Secondhand Smoke Exposure In Home	20 (4)	11 (1)	2.13 (1.67, 2.71)	1.96 (1.50, 2.57)
Secondhand Smoke Exposure Outside Home	20 (4)	14 (1)	1.43 (1.12, 1.84)	1.53 (1.18, 1.99)
Tried to Quit Smoking in Past 12 Months	64 (8)	48 (3)	1.96 (1.36, 2.81)	2.08 (1.40, 3.10)

* Reference category is the non-depressed group.

† The logistic regression model assessing the independent contribution of depression for each dependent variable was adjusted for sex, race/ethnicity, age, and education.

Results

Adults who self-report ever having been diagnosed with depression had significantly higher odds (in comparison with nondiagnosed adults) of being current smokers, former smokers, exposed to secondhand smoke both inside the home and outside the home, and of having made at least one quit attempt in the past 12 months. Depressed and non-depressed groups were significantly different even after simultaneously controlling for sex, race/ethnicity, age, and education.

Conclusions

High rates of smoking and exposure to secondhand smoke indicate that tobacco-related interventions targeted to individuals with depression are urgently needed. Evidence of increased quit attempts by depressed individuals may signify a high level of motivation that combined with interventions modified to meet the needs of the depressed smoker (e.g., negative cognitions and behaviors, low self-efficacy, increased risk for relapse and for use of nicotine to self-medicate) could lead to success in treating both smoking and depression.

