SCIENTIFIC CONFERENCES
SCIENTIFIC CONFERENCES ON ETS

This Section gives three examples of recent scientific conferences that have dealt with the ETS issue. Two of these, held in Austria and Argentina, provide models for the organisation of a conference for countries at distinctly different stages of development of ETS as an issue. The third, held in London, is an example of an international scientific meeting.

The Vienna Conference

On 2nd May 1988 the Austrian Ministry of Health conducted a ‘Hearing’ on the alleged health consequences of ETS exposure. This was held at the Austria Centre in Vienna. The meeting was hosted by the Austrian Minister of Health and Public Services, Dr. Franz Läschnak, and moderated by a physician and former Austrian Minister of Health, Dr. Kurt Steyrer. Some 21 international scientists took part in short presentations and panel discussions on all aspects of the ETS issue. A balance of the various positions was heard. After assimilating all of the evidence and the discussions, the Minister of Health concluded that "a causal connection between passive smoking and illnesses cannot be proved". Moreover, he suggested that legislated restrictions on where smoking can take place are neither effective nor enforceable, and that the US example of widespread restrictions would not be followed in Austria. However, the Minister did say that babies and small children should not be exposed to ETS and that smoking rooms in schools would be eliminated.

Dr. H. Klus, Research Director of Austria Tabak, was the prime instigator of the ‘hearing’. Discussions with him in November 1988 revealed the following steps as being important when considering such a conference:

1. It should be clearly defined that the conference is organised by the Minister of Health.

2. Presentations should be complete on all aspects of ETS and by presenters covering the spectrum of views on the subject.

3. The scientific credentials of each of the presenters’ expertise should be confirmed by the supply of a list of references to the Minister.

4. A neutral, well respected, person should chair the meeting (in this case a physician and former Minister of Health).

5. Presentations should be limited to some 10 minutes, with three or four talks discussing each aspect. Each session should then be followed by a discussion period.

6. Neutral experts should summarise each session and the conference as a whole.
7. Journalists should be briefed some months prior to the meeting and it should be ensured that they have assimilated the background information.

8. These journalists should then be encouraged to promote the findings of the conference.

9. It should be made clear who is paying for what and publicise this.

10. The Health Minister should be supported if attacks are made after the conference.

The following pages give translations into English of the programme of the 'hearing' and some of the media publicity that ensued. Particularly interesting is an attack on the Minister by the anti-smoking campaigner Dr. Klech, and a response to this by the Health Ministry.

Although the result of the hearing was reasonably favourable, it should be noted that many media articles headlined the proposed ban on smoking rooms in schools.

Conferences of a similar format could prove useful, particularly in countries where the ETS issue has been actively discussed for some time and where public attitudes believe ETS to be harmful. However, if this format is considered, great care must be taken in its organisation and in ensuring accurate subsequent publicity.

The proceedings of the Vienna 'hearing' are due to be published by the Minister for Health early in 1989. This may provide an opportunity for wider publicity of the various conclusions.
The Federal Minister of
Health and Public Service

Dr. FRANK LÖSCHNAK

invites you to a

symposium

on the subject

ILL AS A RESULT OF

PASSIVE SMOKING?

2nd May 1988

08.30 hours

Austria Centre Vienna

1220 Vienna, Am Hubertusdamm
Programme Timetable

08.30 Opening:
Federal Minister Dr. F. Löschnak

Discussion guidance:
Dr. K. Steyrer
Ex-Minister of Health
and Environmental Protection

08.45 Introduction to the problem:
Prof. Dr. M. Kunze
Department of Social Medicine
University of Vienna

09.00 Passive smoking as a matter of conflict in society:
Prof. Dr. J. von Troschke
Department of Medical Sociology
University of Freiburg

09.20 Concentration of tobacco ingredients in inside rooms:
Dr. H. Klus
Research and Development
Austria Tabak AG, Vienna

09.40 Absorption of tobacco ingredients by non-smokers:
Dr. D. Hoffmann
American Health Foundation, New York
Dr. H.W. Letzel
Association for the Promulgation of Information and Statistics in Medicine, Munich

10.20 Coffee break

10.40 Toxicology of passive smoking, incl. synergistic effect:
Prof. Dr. H. Remmer
Department of Toxicology
University of Tübingen

Prof. Dr. K. Norpoth
Department of Hygiene and Industrial Medicine
University of Essen

Prof. Dr. F. Adlkofer
Smoking & Health Association, Hamburg
11.40 Epidemiology of passive smoking with emphasis on lung cancer:
B. Junge
Department of Social Medicine and Epidemiology, Federal Health Office, Berlin

Prof. Dr. C. Vutuc
Department of Social Medicine
University of Vienna

Prof. Dr. K. Überla
Department for the Promulgation of Medical Information, Statistics and Biomathematics of the Grosshadern Clinic,
University of Munich

Prof. Dr. E.L. Wynder
American Health Foundation, New York

13.00 Lunch Break

Passive smoking as a possible cause of further diseases (pathology and clinic)

14.30 Heart circulation diseases:
University lecturer Dr. M. Kentner
Department of Industrial Medicine
University of Erlangen

Prof. Dr. W.T. Ulmer
Medical Clinic & Policlinic of the Employers’ Association for the Establishments for the Sick "Bergmannsheil", University of Bochum

15.30 Effect of passive smoking on children:
Dr. C. Hugod
National Board of Health
Department of Hygiene, Copenhagen

16.00 Coffee break
16.20 Smoking at the place of work and in public:
Prof. Dr. U. Henschler
Department of Toxicology & Pharmacology
University of Würzburg

Prof. G. Lehnhert
Central Department of Industrial Medicine
University of Hamburg

Prof. Dr. B. Raschauer
Department of State & Administrative Law
University of Vienna

17.10 Summary:
Dr. K. Steyrer
Ex-Minister of Health
and Environmental Protection

Prof. Dr. W.L. Wynder
American Health Foundation, New York

18.00 End of the event.
PRESS RELEASE

on the press conference with
Federal Minister Dr. Franz LOSCHNAX
Ex-Federal Minister Dr. Kurt STEYRER
Professor Dr. G.LEHNERT
Professor Dr. E.L.WYNDE

on the subject
Result of the symposium:
"Ill as a result of passive smoking?"

3rd May 1988
09.30 hours
ILL AS A RESULT OF PASSIVE SMOKING?

Increasing complaints by non-smokers about smoke contamination, and controversial statements about the effects of passive smoking made it urgent to examine this question from all sides within the framework of a comprehensive symposium. With ex-Federal Minister Dr. Kurt Seyrers in the chair, a whole-day symposium on the subject "Ill as a result of passive smoking?" took place on 2nd May 1988, 21 scientists from Europe and the USA participating and discussing the scientific knowledge which exists in this sphere.

The discussion produced results which went far beyond the actual sphere. Essentially the result of the whole-day event can be summarised in the following statements:

- A causal connection between passive smoking and illnesses cannot be proved. The scientific methods are (still) not fine enough for this. There is no positive proof of cancer diseases and such like resulting from passive smoking. The lack of proof does not however mean that the lack of a connection counts as proved.

- Indications of the organic effects of passive smoking are to be found throughout, especially in lung and cardiovascular functions, without clear connections between these effects and diseases having been established. Specific contamination as a result of passive smoking equates to the contamination which would occur with the consumption of one cigarette a day.

- The greatest risks were established in smoking pregnant women for their children. Children of women smokers weigh less at birth on average and are more susceptible during the first year of their life to bronchial complaints and pneumonia than are children of non-smoking women.

- Babies and small children should also not be exposed to passive smoking contamination in smoky rooms.

- Tobacco smoke is an important cause of air pollution in inside rooms. It contains health damaging or cancer promoting substances. Since no safe lower limits for such substance concentrations can be stated, the unnecessary introduction of such substances into the air breathed should be avoided as far as possible.

- In particular for small children and affected employees, care must be shown that protective measures are taken against passive smoking.

- The discussion showed clearly that active smoking is certainly much more dangerous than passive smoking. For the health politician this means that measures to reduce the consumption of cigarettes must be focused primarily on the smokers. During the discussion, reference was also made specifically to the problem of smoking rooms in the schools.

MEASURES

- Above all, information for pregnant women should be reinforced, since in this sphere there are the guaranteed results about connection between low birth weight and consequent infant mortality.
- Toddlers should be extensively protected against the effects of smoke. This applies primarily to inside rooms and, here again, especially to small, badly ventilated dwellings. Here appeals to the parents are needed. This problem cannot be resolved by means of governmental measures.

- Increased attention to the inside room concentration of smoke substances. The question of how far the pertinent values for the maximum constituents, for instance at the place of work, still correspond to the state of science, must be properly related.

- The fact that no clear endangering can be proved, but that a scientifically proved risk exists, makes it necessary for the health policy to react not with bans but with positive measures which will facilitate the decision of the individual to avoid the risk. The establishing of no smoking zones, primarily on public transport and in administrative rooms open to the public, is an important step in this direction.

- Legal measures are desirable, to avoid conflicts between non-smokers and smokers. They are however only sensible if they are effective. The correct path lies, not in general bans, but in general protective measures in firms, at public events, in means of transport and in offices.
CLINIC AND PRACTICE

STUDIES PERMIT RECOGNITION OF THE TREND TOWARDS CARCINOGENESIS.

CONFLICT OVER PASSIVE SMOKING CONTINUES.

For years now scientists and laymen have disputed whether passive smoking is harmful to health and, if yes, to what extent. Many in the course of the debate go so far as to maintain that passive smoking could just like active inhaling, cause lung cancer.

A whole-day hearing in Vienna, to which the Austrian Health Minister Dr. Franz Loschak had issued invitations and in which 22 scientists from Austria, West Germany, the United States and Denmark participated, showed however that an unequivocal clarification of this disputed question is not at present within sight. The studies available hitherto, which are supposed to show an increased risk of lung cancer as a result of passive smoking, all exhibit considerable deficiencies in their formulation of questions and study design, Professor Karl Oberla from the Department of Medical Information Processing, Statistics and Biometrics of the Grosshadern Clinic of the University of Munich reported. He had looked through all the currently available results and was of the opinion that "with a very precise consideration" of all statements "not much more" was left. Meta-analyses, which attempt to combine several studies into one statement, mostly founded on insufficient comparability and inadequate quality.

With careful examination of the studies, it was not possible to prove an increased risk of lung cancer as a result of passive smoking, stated Oberla and added verbatim: "Epidemiology does not have a mission to improve the world. It must not succumb to the spirit of the age and produce imprecise proofs. The question of health endangerment as a result of passive smoking is open. A certain effect cannot be ruled out, but it is likely to be small."

It is time to exercise self-criticism of one's own discipline, Professor Ernst Wynder, President of the American Health Foundation, New York, believed. There was no agreement in design between the individual studies. Wynder named as an example the misclassification of non-smokers on the strength of the reply "I do not smoke", which often occurred in the studies. This classification did not allow for whether someone had Nevertheless previously smoking or still today smoked now and then, and consequently classified himself as a non-smoker. Nor could one rely on replies of spouses, parents or children, since it often occurred that the latter did not notice anything from the smoking of the person in question.

STUDIES WITH DIFFERENT DESIGN

In Wynder's opinion, the different types of lung carcinomas should be taken into account. Non-smokers would catch primarily Type II adenocarcinomas. These would actually also be caused more frequently through passive smoking, which he could not however prove. In specific occupational groups the risk would be increased just as little as in smokers who do not inhale.
On the other hand, Professor U. Henschler from the Department of Toxicology and Pharmacology of the University of Würzburg insisted that the available studies permitted the clear recognition of a trend which proved the connection between passively inhaled tobacco smoke and the incidence of lung cancer. This related to a hypothesis to be taken seriously, which could not simply be disposed of as unproven. From the epidemiological studies, it was just that no criteria for a fairly large cancer risk were shown, Henschler thought. The precise estimation of the risk was made more difficult by the long manifestation period of the carcinomas. This applied also to animal experiments which, compared to epidemiology, were currently gaining more and more in importance. A basis for preventive action was always present to-day.

A resume of all the addresses can be summarised in the following items:
- The methodology of the available studies is frequently inadequate.
- Apart from passive smoking, too many other factors are relevant to a risk of cancer.
- Diagnosis by means of technically mature analytical methods is very well possible to-day. But precisely as a result of this, the interpretation of findings becomes ever more difficult.
- Synergistic and antagonistic effects cannot be mutually delineated.
- Retrospective studies frequently dispense with precise bases for the analysis of smoking behaviour or with a uniform mode of questioning.
- The experiments cannot be directly transferred to the situation in everyday life and accordingly show in part a considerable error quota.
- From proved the correlation it is not possible to derive any scientifically guaranteed, legal regulations. Scientifically based, individual opinions could however already to-day initiate action to guarantee the protection of the corporal entirety, even though disease risks cannot be proved.

Annette Bopp
SCHOOL SMOKING ROOMS ARE TO BE ABOLISHED.

Contamination through passive smoking: Löschnak invited to inquiry.

Do smokers endanger only their own bodies or do they endanger at least equally the lungs of their fellow men? What measures could reduce the number of active smokers? Federal Minister Franz Löschnak issued an invitation to a symposium, to clarify these questions. As an initial consequence, the smoking rooms in schools will be abolished.

The smoking rooms exert a great attraction, especially on younger pupils. For then smoking means "being with it, to act grown up". Smoking is however particularly harmful, precisely for young people. For this reason the smoking rooms will be abolished: smoking is no longer to be sanctioned by the schools. The "smoking room" project has failed - probably smoking will now take place secretly in the school loco.

Minister Löschnak and the chairman of the symposium, Kurt Seyrer, are agreed that the harmfulness of smoking during pregnancy should be increasingly pointed out. Guaranteed results about the connections between smoking, a low birth weight and consequent infant mortality exist. In addition, small children should also be protected as far as possible from the effect of smoke.

In active smokers, the risk factors of several varieties of cancer and permanent bronchitis increase enormously. A connection between passive smoking and diseases is possible, doctors explained, but not provable. The contamination as a result of passive smoking could equalize to the consumption of one cigarette a day.

Smoking bans, as applied in the USA, do not threaten Austria's smokers. Löschnak does not believe that positive effects can be achieved either through bans or through "horror information".

Photograph caption: Soon a thing of the past: smoking room in the school.
The smokers remain the basic problem - bans not envisaged

VIENNA—The smokers remain the basic problem. Scientifically there is no doubt that the "tag"-adherents can expect the most severe health damage. However, anti-tobacco laws, as in the USA, are obviously unenforceable. It has not so far been possible unequivocally to prove statistically health damage as a result of passive smoking.

Experts explained this yesterday at Health Minister Dr. Franz Löschnak's press conference.

The press conference had been preceded on Monday by a symposium in Vienna with the title "Ill as a result of passive smoking?"

There is indeed plenty of scientific proof hitherto of the damage which smokers inflict on themselves through the "tag", but it is considerably harder to prove diseases which "smoke-free" citizens could contract as a result of the blue haze.

Prof. Ernst L.Wynder, president and medical director of the American Health Foundation: "With such a large consumption as 30 to 40 cigarettes a day one can hardly make statistical errors as an epidemiologist. We believe, however, that the epidemiological investigations have not hitherto proved uniformly that there is a connection between passive smoking and e.g. an increased risk of cancer."

Health Minister Löschnak: "Part of the question has still not been clarified. The contamination of the non-smokers must however be regarded as a certain risk."

The Minister does not however hold with such rigorous anti-tobacco measures as have been introduced in recent times in the United States. "One must watch out that in a country not everything is regulated down to the last detail, or that such regulations cannot be executed," Löschnak explained.

Löschnak wants in future - the "Healthy Austria" action initiated by him is to busy itself in 1989 with the subject of cancer and consequently also with the harmful effects of tobacco consumption - to stress specifically the health education of the young. The proverbial thorn in the flesh of the health experts are in this context the smoking rooms which still exist in five percent of the schools.
The snickers remain the basic problem. Scientifically there is no doubt that the "fag"-adherents can expect the most severe health damage. However, anti-tobacco laws as in the USA are obviously unenforceable. It has not so far been possible unequivocally to prove statistically health damage as a result of passive smoking. Experts explained this recently at Health Minister Dr. Franz Löschnak's press conference.

The press conference was preceded by a symposium in Vienna with the title "Ill as a result of passive smoking?". There is indeed plenty of scientific proof hinting at the damage which smokers inflict on themselves through the "fag", but it is considerably harder to prove diseases which "smoke-free" citizens could contract as a result of the blue haze.

Prof. Ernst Wynder, president and medical director of the American Health Foundation: "With such a large consumption as 20 to 40 cigarettes a day, one can hardly make statistical errors as an epidemiologist. We believe, however, that epidemiological investigations have not hitherto uniformly proved that there is a connection between passive smoking and e.g. an increased risk of cancer." Those people who are exposed to the blue haze of the nicotine adherents, without themselves smoking, would without doubt be exposed to contamination which is many times less than the smokers'. In connection with this, Wynder also gave his opinion that hitherto there was no proof of a connection between air pollution and more lung diseases. Health Minister Löschnak: "Part of the question is still not clarified. The contamination of the non-smokers must however be regarded as a certain risk." Furthermore the Minister does not hold with such rigorous anti-tobacco measures as have been introduced in recent times in the United States. "One must make sure that in a country not everything is regulated down to the last detail, or rather that such regulations cannot be executed," Löschnak explained.

Strict laws in this field may be superviseable during the "first three days", he, Löschnak, would dread to see how such laws would be executed during the 30th or 300th week after their coming into force...
Medical causal chains between passive smoking and diseases cannot be established, but health contamination can. This is the result of the Viennese symposium on passive smoking. Health Minister Löschnack wants in future to strive for non-smoking in the schools and in firms.

On Monday 24 speakers had tried to show the effects of passive smoking at the international symposium "Ill as a result of passive smoking?" at the Austria Centre in Vienna.

Federal Minister Dr. Franz Löschnack stated at a press conference, in which the ex-Health Minister Dr. Kurt Steyrer and the President of the American Health Foundation, Prof. Dr. Ernst L. Wynder, participated, that no causal medical connections between passive smoking and diseases had been established.

It had however been possible to establish indications of organic effects, especially in lung and cardiovascular functions. Specific contamination as a result of passive smoking would equate to the contamination of one cigarette per day.

"The danger for the children of pregnant women who smoke is clear," the ex-Health Minister Steyrer drew attention to one of the most important results of the symposium.

Studies showed that children of smoking mothers weighed on average 200 to 300 grams less and that they were more susceptible to bronchial complaints and pneumonia during their first year of life than children of non-smoking mothers.

The experts were in agreement that health education and enlightenment about the "blue haze" must begin already with the children. As Prof. Dr. Wynder explained, there is a programme in USA schools with 30 hours of instruction in health behaviour.

In Austria there are still smoking rooms in about 5 percent of the schools. Health Minister Löschnack now wishes to introduce measures, in collaboration with the school authorities, for more publicity for non-smoking.

In doing so there is also the thought of sending doctors into the smoking rooms, to give information on the spot about the dangers of the "fag".

Löschnack wants to start a further non-smoking campaign in firms next year in connection with the action "Healthy Austria".

On strict laws, such as the rigorous smoking bans in the USA, Löschnack stated that they could possibly be supervised during the "first three days". He would not however like to see how such laws would be executed in the 30th or 300th week after coming into force.

The health spokesman of the Viennese VP, Provincial Assembly delegate Dr. Erwin Rasinger, stated on the occasion of the symposium that attempts to gloss over the dangers resulting from passive smoking or to continue researching until definitive proof could be produced was no longer defensible from to-day's standpoint.

Photograph caption: The "Passive smoking symposium" arranged by Health Minister Löschnack, in which the West German industrial medicine representative Leinert, the President of the American Health Foundation, Wynder, and the ex-Health Minister Provincial Assembly delegate Steyrer participated, lasted eleven hours. A total of 21 addresses were made.
Connection between passive smoking and the risk of disease not proved.

VIENNA (SN). When one investigates the significance of passive smoking for health, one must talk about nuisance rather than endangerment. 21 experts reached this conclusion at the symposium "Ill as a result of passive smoking?" On Tuesday at a press conference in Vienna, Health Minister Franz Töschnak spoke out against strict bans and for enlightenment and health education already in the schools. He wishes however to abolish also the remaining smoking rooms in schools and to achieve through the industrial inspectorate a compatible coexistence of smokers and non-smokers.

"The only group, in which a clear health risk through passive smoking can be established are the unborn children of women who smoke during pregnancy," ex-Health Minister Kurt Stejrer, who had chaired the symposium, explained. These children weighed about 300 grams less at birth and were more often susceptible to lung diseases. The same happened to babies who lived in smoker households.

"That is also a reason why we should steer clear of bans," Töschnak explained. Since the majority of passive smokers suffered from the nicotine indulgence of others in the family, bans could not be enforced here. As opposed to the United States, in which according to the latest reports smokers are to be officially "raised" to drug addicts, Töschnak would rather promote non-smoking by positive measures. The Health Minister takes these to mean "protective measures in firms, at events, in means of transport and in official offices". In addition the "Health Minister's warning" on cigarette packets is to be printed larger.

The measures should be effective directly at the place of work. Primarily the contamination to which non-smokers are subjected by their smoking colleagues should thereby be reduced.

CANCER RISK FOR PASSIVE SMOKERS: AN UNRESOLVED CONFLICT OF EXPERTS.

Own report "Presse" 3.4.98

VIENNA (st). All that seems clear: It is best not to inhale tobacco smoke at all. Those people who have to permit themselves to be "smoked" could - NB could - have their health put at risk. That is, briefly stated, the result of a symposium "Ill as a result of passive smoking?" arranged yesterday by the Ministry of Health with about a dozen national and international scientists.

There is no proof that passive smokers are not exposed to an increased cancer risk. Nor has the opposite been proved. All that appears certain is that non-smokers, e.g. in offices, inhale as much smoke as though they were to smoke one cigarette a day.

Yesterday's scientific argumentation that the room air of smokers is impregnated with - provable - cancer suspicious substances must make passive smokers laugh. None of the experts is able to say precisely what consequences that has. "Indoor Pollution" is a scarcely researched heading.

"If one compares passive smoking and smoking in their risk dimension, one is a cracker and the other an atomic bomb," says the Hamburg industrial medicine representative Professor Lehnert.

He asks himself and consequently also others whether sham fights are being conducted here: Are not - also for slight illnesses - other environmental factors (e.g. dust contamination at the work place, traffic exhaust gases) of greater - and less researched - importance?
PASSIVE SMOKERS APPEAL TO MINISTER.

At the opening of the symposium "Ill as a result of passive smoking?" at the Austria Centre Vienna, the Health Minister Franz Läschnack reported on Monday that he receives ever more complaints from the population about enforced passive smoking.

Non-smokers complain that they are exposed in many places to contamination by smokers, a proportion of them even feel that their health is at risk and demand a restriction of smoking behaviour in public. Läschnack believes that, if the proof that passive smoking causes lung cancer were to be validly presented, it would be his duty as Health Minister to protect passive smokers accordingly.

The symposium, to which numerous international experts have been invited, should contribute towards clarifying this question.
TOO MUCH BLUE HAZE

Minister Lassnag extended invitations to the symposium "Ill as a result of passive smoking?" on 2nd May 1988. The question-mark characterized the event very tellingly, since much in both its style and its objective must appear questionable.

What lies behind it?

Since recently, in the United States very rigorous regulations exist for the protection of the non-smokers. Smoking is no longer allowed in public places, in offices, etc. and is allowed only in a few isolated places in restaurants, aircraft, etc. With the Americans' special enthusiasm, these regulations are brought into force in public buildings and offices and even on the street and have put the smokers in many spheres of public life in the dirty fellow corner. Smoking is certainly "out" socially in America at present. The proportion of smokers under doctors and hospital staff for instance is rapidly decreasing.

Against the background of these facts and health political measures in the United States, the attack was now sounded in Austria on 2nd May.

Well known experts from home and abroad were summoned at the invitation of Minister Lassnag under the discussion chairmanship of ex Health Minister Kurt Steyrer.

The event was financed - and that may give rise to suspicions - by the Austria Tabakwerken.

The selection of the invited experts was exceptionally variegated, but perhaps unfortunately not balanced: Certainly all important aspects relating to passive smoking were discussed in detail. Participants were social medical workers, toxicologists, regrettably only one expert on complaints of the respiratory tract, no paediatricians, instead an environmental medical worker specialised in questions of environmental hygiene for children, a further industrial medical worker and a relatively large host of epidemiologists.

Chilling analyses of the composition of cigarette smoke were followed by exhaustive discussions of the so called side stream smoke. In fact the number of carcinogenic substances in the side stream smoke clearly exceeds that in the main stream smoke. It has also been proved that the substances directly associated with tobacco such as nicotine and cotinine for example are absorbed more by children than by adults. It is not disputed that passive smoking allows measurable quantities of substances contained in tobacco to be identified in the body. Quantity and intensity depend however on the duration and concentration of the tobacco smoke impregnating the room air.

The public, who appeared only by invitation, were not much animated to discussion. Health political aspects were in fact only touched on slightly. There was an extreme sticking to the proof of the carcinogenesis of passive smoking. Only President Neumann demanded urgently required discussions which went beyond the symposium, namely health political education of the young, primarily in view of the unfavourable experience with smoking rooms, and primarily also the increased attention to the chronic damage of smoking to the respiratory tract within the meaning of unspecific chronic respiratory tract diseases.

Dr. Rasinger, environmental protection spokesman for the Austrian Chamber of Medicine, voiced the suspicion that this event was to serve only to gloss over the currently still not completely conceivable damage resulting from passive smoking.

The fear unfortunately proved true in what followed: The great
appearance of the epidemiologists took place, a thoroughly renowned
group of scientists who, on the strength of the studies conducted by
themselves, could not assert a positive connection between passive
smoking and an increased risk of cancer. Particularly emphasised was
the criticism advanced by Prof. Thierer, Munich, of studies which
produced a connection between passive smoking and lung cancer. He was
congenially supported in this by Prof. Wynder, President of the American
Health Foundation in New York - furthermore Wynder could have very
significantly determined the programme structure as well as the
selection of the speakers for this symposium.

The attitude of the epidemiologists had however one great drawback:
only those studies with a positive connection were subjected to intense
criticism, much less however those which showed no connection, including
those studies carried out by themselves. As particularly galling, one
can rate the fact that none of the epidemiologists criticised by them
were invited to this event, to personally justify their studies. The
listener was therefore in my opinion informed only unilaterally, a
balanced discussion of the subject was consequently not actually
possible.

After these very suspicious attitudes of the epidemiologists, it was
difficult for the subsequent participants in the discussion to escape
from the dramatic technique of the event. One already tended to find
for the accused "Passive smoking" in dubio pro reo.

University lecturer Singinger of the Tind Univ. Clinic in Vienna
was able to show impressively the harmful effect of tobacco smoke on
the vascular system, the question of the effect on passive smokers was
however doubted. The model of an exposure chamber (trials personal-
ally exposed to the smoke of 30 cigarettes of the "Giannes" brand) which
he showed was dismissed as unrealistic. In fact however such quantities
in the region of bars or discos or in the car with the windows shut are
thoroughly realistic.

Disappointing and thoroughly glossing over was the attitude of the
pulmonologist Prof. Ulmer from Bochum, whom I personally appreciated as
an excellent scientist and critical spirit. He discussed only his own
defined studies of miners with and without exposure to smoke, in which
no certain connection could be established. He failed however to go
clearly into the immense importance of smoking in the pathogenesis of
many lung complaints, such as asthma, emphysema and chronic bronchitis.

Also regarding the problem of passive smoking in children, the
attitude of the environmental expert from Denmark was too superficial.

He indeed mentioned that smoking women run an increased risk of giving
premature birth as well as of the physical underdevelopment of their
newly born babies, but the increased risk of more frequent respiratory
tract infection of children in the households of smokers was
insufficiently stressed.

The discussion of questions arising was then rather moderate, also
because at this late point in time the audience had already melted away.
The summary of the event, which was then made by Kurt Steyerer was that
no guaranteed connection of an increased risk of cancer as a result of
passive smoking existed, that however everything must be done to
convince the active smoker of his health endangerment.

The tenor of the press conference next day was similar. Wynder
reported afresh on the unproved connection as an important result of
this symposium. The press reports then also reflected this.

The public had successfully been prevented from being made aware of
the illness-inducing effect of smoking.

In conclusion therefore it is not possible to spare the person

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for this spectacle some important reproaches:

1. The selection of the speakers was not balanced. Only those epidemiologists of one opinion group were invited to speak, and they used the opportunity to thoroughly tear to pieces, more or less in safety, other colleagues who found a positive connection between health endangerment and passive smoking. Too little tribute was paid to the fact that the American health authorities have already, in two large, hitherto uncontradicted reports, based on precisely these uninvited experts, classified passive smoking as a health risk in connection with an increased risk of cancer and also an increased risk of unspecified lung complaints.

2. With this constellation, important health political aspects could not be discussed. The number of experts who could make statements about the connection between smoking and unspecified lung complaints were underrepresented. Also in the auditorium there were hardly any doctors and only a few experts on pulmonology.

3. It would have done much more good for the integrity of the symposium if Minister Laschnak had arranged this symposium at ministerial expense, instead of accepting the Austria Tabakwerke as sponsor. The health policy of the Republic of Austria should be worth arranging out of its own purse and not, by calling in a highly dubious sponsor for this task, to discredit the significance and value of such an event and as a result to give it the smell of manipulation.

Summarising, one can only agree with Rasinger's argument that here a potential health risk is being glossed over: Much was done to play down the danger of passive smoking. Only very little was done, however, to offer a balanced and promising basis for discussion of the Austrian environmental policy on the lines of publicity for no smoking.

In toto, therefore, only a great deal of blue haze - but perhaps it was also due to the sponsor of the event.

The Austrian Chamber of Medicine will in any case continue to pay attention to its task regarding objective and, under the aspects of health policy, responsible reporting. There will be a lot to say against this event. The next opportunity for this will be the inquiry "The environment and the childish bronchial system", directed by the Social Medical worker Prof. Runze as well as by the President of the Austrian Chamber of Medicine Prof. Neumann on 16th June 1988.

AO Dr. Heinrich Kiech, pulmonologist. Further education spokesman of the Austrian Chamber of Medicine.
In the report on the Symposium entitled "Sickness due to Passive Smoking?" organised by the FRG Minister for Health Dr Löschnack, which appeared in the Österreichischen Arztezeitung (Austrian Doctors' Journal) 10/88 under the title "Too much Blue Haze" [Translator's note: This is the literal translation, but the title is a play on words, and would also translate as "Too much Sheer Invention"], accusations were made against the Organiser which require correction.

Firstly, it should be pointed out that Herr Dr Löschnack organised the symposium with the aim of hearing the opinions of experts on the dangers to health of passive smoking, since, if passive smoking does cause diseases of the respiratory tract, this would be a strong argument for the politician responsible for health to initiate a further restriction on smoking.

Since the question of the danger to health of passive smoking is the subject of controversy in the scientific literature, the Health Minister himself wished to seek clarification. The speakers were suggested by the experts in the field. Prof. Wynder was involved neither in the organisation of the programme nor in the choice of speakers. As regards the selection of the subjects and the speakers, the following were of decisive importance: to cover as many as possible of the areas in which passive smoking is at present being discussed as a possible influence, and to allow voices on both sides of the debate to be heard. For technical reasons, the invitations had to be restricted to German-speaking experts.

The Austria Tabakwerke only partly financed this event, by agreeing to pay the costs of the symposium venue. The Health Minister took the view that the Austria Tabakwerke, as cause of the problem, should also bear a proportion of the costs—a view which would certainly interest the tax-payer, given the limited nature of public funds. However, the Austria Tabakwerke did not have any influence on the programme arrangements.
It is also not true that the American report on the detrimental effect of passive smoking on the health had not been criticised until now. On 13th April 1988, in the resumption of the 79th Senate debate in the US Congress, this report and other research results were discussed, and it was established that the scientific results did not support the conclusions of the Surgeon General that passive smoking causes disease, including lung cancer.

A discussion on the damaging effects of smoking on the health cannot take place in a meeting on passive smoking because the crowded programme, with 21 speakers, made this impossible on grounds of time available. In any case, the detrimental effects of smoking on health are known and undisputed. It should also be known that the Health Minister has initiated a series of measures which serve to protect the non-smoker from being annoyed by smoke, even if actual danger to health through passive smoking cannot be demonstrated.

Finally, it should be pointed out that the symposium was a scientific meeting, to which were invited representatives of the health authorities, the medical community, delegates of various professional bodies and organisations, Ministers and politicians. It is not customary to make scientific meetings open to a wide public, nor can those issuing the invitations have any influence on whether the invitees honour the invitation. The Health Department would also have welcomed the presence of a greater number of representatives of the medical profession and the widening of the discussion around the technical contributions.

On behalf of the Federal Minister for Health and the Public Service.

Dr Erlacher