

World Summit on **O**BESITY AND **W**EIGHT **M**ANAGEMENT

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**Mentholated Cigarettes and Obesity****Maria Jose Miguez***Medical Doctor, Florida Department of Health, USA*

**Statement of the Problem:** Despite the old myth that smokers are skinnier, obesity is reaching epidemic proportions among smokers, and particularly among women. Since mentholated cigarettes are widely used by women, we assessed whether obesity was a result from menthol induced alterations. Methods: Smokers living with HIV and ready to quit were consecutively enrolled in our clinical trial. With a response rate of 98%, 154 female smokers were enrolled until 12/2018. Smoking history was obtained, and participants were grouped into users of mentholated cigarettes=Group 1, or Group 2 if non-mentholated users. The study visit includes collection of anthropometrics, along with a history of weight problems. Two main outcomes were examined: (1) the relationship between Body Mass Index (BMI) and proximal predictor variables derived from the Socio-Ecological Model: socioeconomic status, and unhealthy habits (dietary intakes, physical activities, sleep and smoking); and (2) the prevalence of overweight and obesity (BMI >30) and the history of obesity as a function of the type of cigarette used. Result: The prevalence of obesity among this group was 51%, whereas in the general population is 38.3% (NHANES). An association was found between obesity and one SES component, race/ethnicity. Two behavioural factors were significant: high consumption of sugars and use of mentholated cigarettes. The age of smoking onset did not differ between groups 1 and 2, suggesting that smoking onset was not triggered by their weight concerns. Weight gain associated with pregnancies tended to affect the development of obesity in women during midlife and beyond (OR=2.1 95% CI 0.7-7.1, p=0.07). However, the history of obesity did not differ between Groups 1 and 2. Binary regression confirmed in the adjusted model the effects of history of obesity during childbearing years, use of mentholated cigarettes, and limited physical activity on current obesity trends. Conclusion and Significance: Data points to the primacy of behavioural factors, such as the use of mentholated cigarettes. Analyses confirmed that obesity was not a precondition linked to start smoking, indicating that it is likely to be the consequence of using mentholated cigarettes. Reduced physical activity also is contributing to the rising obesity rates.

**Biography**

Miguez is a Medical Doctor with a PhD in immunology. She has been funded for the past 2 decades by the James and Esther King. As part of her tobacco work she has built this model on how mentholated cigarettes are doing additional harm above and beyond those inflicted by tobacco.