

F R O M	Name & Title	Dr. Leana Wen, Commissioner	Health Department AGENCY REPORT	
	Agency Name & Address	Health Department 1001 E. Fayette Street Baltimore, Maryland 21201		
	Subject	18-0178 – Indoor Smoking – Hookah Lounges		

To: President and Members
of the City Council
c/o 409 City Hall

January 25, 2018

The Baltimore City Health Department (BCHD) is pleased to have the opportunity to review 18-0178 – Indoor Smoking – Hookah Lounges. The purpose of this legislation is to expand the exception for hookah under the City’s indoor-smoking restrictions to allow for charcoal-based hookah. Under the current exception, only electronic hookah is permitted. **BCHD strongly opposes this legislation.**

A hookah is a water pipe used to smoke specially made tobacco that comes in different flavors. Hookah is also called shisha, narghile, argileh, hubble-bubble, andgoza.¹ Tobacco use is unsafe in any form. 90% of lifelong tobacco user’s start before age 18 and hookah use among high schoolers nationwide nearly doubled in just one year from 5% in 2013 to almost 10% in 2014.²

While hookah popularity has risen among teenagers nationally, youth consumption of tobacco remains an area of significant concern in Baltimore. According to the FY17 Annual Cigarette Restitution Fund report, 14% of Baltimore City youth under the age of 18 reported using tobacco products of any kind, compared to 10.7% youth statewide. While rates across the City and state fell from 2000 to 2014 overall, the City’s rate of usage fell slower than statewide, and the percentage of youth reporting usage of both cigars and smokeless tobacco increased. The Centers for Disease Control and Prevention (CDC) reported in a 2015 survey that nearly three out of 10 high school youth consuming tobacco at least once in the prior 30 days.³

Public perception of hookah often views it as less harmful than other forms of tobacco consumption, including cigarette smoking. However, evidence shows hookah poses many of the same health risks as cigarettes.⁴ In fact, one hour of smoking has been found to be the equivalent

¹ CDC Fact Sheet – Hookahs- Smoking and Tobacco Use
http://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_industry/hookahs/

² Tobacco Use Among Middle and High School Students — United States, 2011–2014, CDC Morbidity and Mortality Weekly Report, April 17, 2015. Available at:
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6414a3.htm>

³ CDC High School Youth Risk Behavior Survey.
<https://nccd.cdc.gov/youthonline/App/Results.aspx?TT=C&SID=HS&QID=H77&LID=BA&LID2=SL&YID=2013&YID2=SY&SYID=&EYID=&HT=QQ&LCT=LL&COL=S&ROW1=N&ROW2=N&TST=false&C1=&C2=&SC=DEFAULT&SO=ASC&VA=CI&CS=Y&DP=1&QP=G&FG=G1&FR=R1&FS=S1>

⁴ CDC Fact Sheet – Hookahs – Smoking and Tobacco Use
http://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_industry/hookahs/

of smoking 100 cigarettes.⁵ According to a meta-analysis conducted by the University of Pittsburgh School of Medicine, a single hookah session similarly delivers 25 times more tar than that found in a single cigarette, 2.5 times the nicotine, and 10 times the carbon monoxide.⁶ Smoking hookah has been associated with lung cancer, periodontal disease, low birth rates, and other types of cancer and cardiovascular diseases.⁷

The legislation in question would expand access to hookah lounges in Baltimore City by expanding access to charcoal-based hookah, as opposed to the electronic-based hookah allowed under the exception in current law. By expanding the exception, Baltimore would weaken its regulations on hookah, despite evidence from the City itself that hookah remains a danger to residents and workers. A study of Baltimore (electronic) hookah lounges published in 2014 showed carbon monoxide levels in lounges exceeded occupational exposure guidelines.⁸ Charcoal-heated hookah would further increase health risks by producing high levels of carbon monoxide, metals, and cancer-causing chemicals.⁹

The usage of charcoal-based hookah creates the additional attendant increased risk of second- and thirdhand smoke exposure. These dangers are magnified by the increased toxicity and levels of tar and nicotine present in hookah smoke.¹⁰ Given the density of Baltimore's built environment and close proximity of residences to commercial establishments, surrounding properties will likely be affected by exposure to charcoal-based hookah, as smells and toxins produced by smoking hookah can pass through ventilation systems and walls, and can adhere to nearly any material.

BCHD is proud to have worked with the Council in years past to create Baltimore City's clean indoor air law, the first jurisdiction in Maryland to create such a law. The rationale for creating the law then remains today – to ensure our residents and youth are adequately protected from the dangers of tobacco consumption and secondhand smoke. **For these reasons, BCHD strongly opposes this legislation, and requests this committee issue an unfavorable report.** We will be present at the hearing to answer any questions the Council may have on this matter.

⁵ Waterpipe tobacco smoking: health effects, research needs and recommended actions for regulators, 2nd Edition, WHO Study Group on Tobacco Product Regulation.

⁶ University of Pittsburgh School of Medicine. <http://www.upmc.com/media/NewsReleases/2016/Pages/primack-hookah-meta.aspx>.

⁷ Ibid.

⁸ Waterpipe cafes in Baltimore, Maryland: Carbon monoxide, particulate matter, and nicotine exposure, *Journal of Exposure Science and Environmental Epidemiology* (2015) 25, 405–410; doi:10.1038/jes.2014.19, retrieved Jan. 25 2018: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4333110/>

⁹ CDC Fact Sheet – Hookahs- Smoking and Tobacco Use http://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_industry/hookahs/

¹⁰ University of Pittsburgh School of Medicine. <http://www.upmc.com/media/NewsReleases/2016/Pages/primack-hookah-meta.aspx>.