

MINUTES OF THE House COMMITTEE ON Federal and State Affairs

Held in Room 510-S, at the Statehouse at 2:45 ~~a~~^p.m., on March 4, 1975.

All members were present ~~except~~:

The next meeting of the Committee will be held at 2:45 ~~a~~^p.m., on March 5, 1975.

These minutes of the meeting held on _____, 19____ were considered, corrected and approved.



Chairman

The conferees appearing before the Committee were:

Rep. Farrar
Rep. Jones
Senator Booth
Mrs. Ann Galiger, Overland Park, GASP
Mr. Gary Zook, Kansas Association of Commerce and Industry
Dr. Samuel Zelman, M.D.
Ann Collins, Wichita
T. M. Murrow, Kansas Tobacco and Candy Distributors
Mr. Charles Huston, Kansas Tobacco and Candy Distributors
Rep. Crowell
Mr. Max Bickford, Board of Regents

The meeting was called to order by the Chairman, and Rep. Farrar appeared to discuss his HB 2459. which would make it unlawful for any person to disclose any voting record of a legislator without obtaining certification as to its correctness. Mr. Feleciano stated there is one problem about voting records insofar as a person opposing a bill and after it is amended, then being able to vote for it, or in the case it is amended and you can no longer support it. Mr. Farrar stated he felt it would not be too difficult to prove the facts.

Rep. Jones, one of the sponsors, stated that she believes this is an extremely important bill because campaigns are becoming more intensive all the time. She cited a situation where it was alleged in the last campaign that she had voted "anti-elderly" on all such issues when in fact she had voted in favor; that she spent considerable money on advertisements showing her voting record. She stated she believes that this bill will assure that false statement are eliminated.

Senator Booth appeared to discuss SB 121, and assured members that he is quite serious about the bill. He explained that he had introduced the bill last year at the request of an individual and as he worked with it, he became convinced that it was entirely proper and had therefore introduced it again this year.

Ann Galiger of Overland Park, testified that GASP is an educational organization with several hundred members; that they are engaged in several educational projects, one of which is a study of smoking in hospitals. She stated that it is their feeling since smokers are in the minority, they should not force their habit on a majority.

Mr. Gary Zook, Kansas Association of Commerce and Industry, testified in support of SB 121. He stated that he believed the bill would balance the individual rights, and would be a step toward guaranteeing public health and safety. See printed statement.

Dr. Samuel Zelman, M.D., a retired physician who was Chief of Medical Services at the Veterans Administration Hospital in Topeka, appeared in support of the measure. He stated that his interest has continued since the end of World War II when he was impressed with increased cases of lung cancer. He testified that he became convinced that it was a result of smoking and finally in 1954 the Cancer Society came out with statistics confirming his opinion. He stated that not only does it increase the instances of lung cancer, but affects hearing, vision and other functions of the body as well. He urged that members look at statistics concerning children of smokers and non-smokers, and the condition of babies born to smoking mothers. He stated that the children of smokers do not enjoy as good health as those of non-smokers.

Ann Collins of Wichita, spoke briefly in support of the bill, citing her own personal experience with allergy to smoke, and explained that she had been forced to quit a job because of being constantly exposed to second-hand smoke.

Mr. T. M. Murrow, representing the Kansas Tobacco and Candy Distributors, testified that there is no statistical evidence whatsoever that smoking is harmful or that it causes cancer; that statistical things are cited but that research has not been complete enough to be positive. He stated he believed this bill would cause more problems in the state than it would solve, particularly in retail establishments. He stated that people can control any problems now; that many places do indeed have posted signs. He stated that he feels the bill is impractical.

Mr. Charles Huston testified that he started smoking 63 years ago and that now he is 85; that his health is good, his hearing good, and vision reasonably so since cataract surgery. He stated that about 35% of adults over 18 smoke cigarettes, and with cigar and pipe smokers and non-smokers who do not object, it is about a 50-50 deal.

Rep. Crowell appeared to discuss his HB 2404, explaining it is a bill which will hopefully result in a better distribution of doctors. He explained it is a different concept with regard to medical students but that with legislators making appointments to the K. U. Medical school, he believed the students would tend to return to their own area to practice; that there is monetary incentive in that they would not have to pay their tuition, but that there would be no relaxing of qualifications; that after the program gets going it will cost in the neighborhood of \$265,000 per year.

Mr. Max Bickford, Executive Secretary of the Board of Regents, testified that he understands the frustrations which caused this bill to be presented; that the distribution and retention of doctors has been a prime concern for a long time. He pointed out that the results of this bill would not be realized until 1982, while there has been a recent program initiated in family practice, which places residents in hospitals

throughout the state; that doctors tend to stay where they serve their residency, and that results should be seen from this program rather soon. He stated he is not sure that the penalty for not remaining in Kansas would be all that significant, but it is only \$3,000 plus interest, and in the light of the income a doctor can expect, this is not a very large amount.

The Chairman called attention to a bill which the speaker had handed him, providing for the appointment of a member of the Roads and Highways Committee on the Turnpike Authority. It was moved by Mr. Hayes and seconded by Mr. Tom Slattery that the bill be introduced and referred to the Committee of the Whole. Motion carried.

The meeting was adjourned.

3-4-75

True?
False?

**TOBACCO
FACTS**

A quick quiz about tobacco smoke. Which statements are right? Which ones wrong?

1. TOBACCO SMOKE IS A MAJOR SOURCE OF AIR POLLUTION.

FALSE.

That statement is used as a "smoked red herring". It focuses attention on tobacco and away from the primary sources. An important study, published by the New York Academy of Sciences, showed that cigarette smoke provided less than *one ten-thousandth* of the carbon monoxide in our air. Motor vehicles produced more than 5,900 *times* as much. Even *forest fires* produced over 700 *times* as much. The contribution of tobacco smoke was called "negligible".

2. IT'S A KNOWN FACT THAT MANY PEOPLE ARE ALLERGIC TO TOBACCO SMOKE.

FALSE.

Doctors even disagree on how to determine this. Among people with allergies, some react to a *skin test* involving a *tobacco leaf extract*, but that's very different from tobacco smoke. Many of these people—smokers and nonsmokers alike—show *no* reaction at all when exposed to tobacco smoke. Smoke can make some people uncomfortable—direct exposure can make the eyes smart, for example—but that's not an allergy.

3. NONSMOKERS IN A SMOKE-FILLED ROOM INHALE NEARLY AS MUCH SMOKE AS SMOKERS.

FALSE.

Researchers have used scientific methods to find out if this is so—measuring skin temperature and blood content. They found that even in *extreme* test situations nonsmokers do not inhale significant amounts.

4. THE SURGEON GENERAL SAYS CARBON MONOXIDE IN EXPERIMENTAL SMOKE-FILLED ROOMS EXCEEDS PERMISSIBLE LEVELS.

TRUE.

But—putting the emphasis on that word “*experimental*”, it’s also true that the scientists who ran the tests went out of their way to point out that such conditions would rarely if ever be found in real life. And even in these deliberately extreme, heavy smoking, no-ventilation situations, permissible levels of carbon monoxide generally were *not* exceeded.

5. THE SURGEON GENERAL UNEQUIVOCALLY SAYS TOBACCO SMOKE IS DANGEROUS FOR NONSMOKERS.

FALSE.

Look at all the qualifying words in what the Surgeon General *really* said: If the artificial levels of carbon monoxide found in the experimental smoke-filled rooms *were* to prevail, this “*may, on occasion, depending upon the length of exposure, be sufficient to be harmful to health of an exposed person.*” His report did *not* suggest that such conditions are encountered in everyday life.

6. SINCE ANTI-SMOKING EFFORTS HAVE INCREASED LATELY, THE EVIDENCE AGAINST SMOKING MUST BE INCREASING, TOO.

FALSE.

Not long ago, after hearing weeks of expert scientific testimony, a Congressional committee concluded that “the arguments pro and con with respect to cigarettes” were the same as they had been years earlier when the first Surgeon General’s report on smoking was issued. Most recently, in fact, a prestigious British scientist, who for years

held the popular belief that smoking is the major cause of lung cancer, advised the scientific community that he had carefully examined the evidence and had "changed his mind".

7. THOROUGH REVIEWS OF THE WORLD'S SCIENTIFIC LITERATURE INDICATE THAT SMOKE ISN'T A SIGNIFICANT HEALTH HAZARD TO THE NONSMOKER.

TRUE.

One such review concluded that "no proof of a threat to the health of nonsmokers through 'passive smoking' can be found in studies available to date." Another review, conducted by an anti-smoking group, said that "there is no evidence that other people's smoke is dangerous to healthy nonsmokers . . ."

8. YET THE GOVERNMENT HAS SEGREGATED NONSMOKERS ON PUBLIC TRANSPORTATION.

TRUE.

But not on the basis of any health "hazard". U.S. government experts did a study in airplanes with heavy smoking among passengers. With sensitive instruments and normal ventilation, they found little smoke in the air and said it "does not represent a significant health hazard to nonsmoking passengers". In each case, apparently or explicitly noting that lack of support in the "medical" evidence, government commissions have acted solely in the interests of comfort and convenience of *both* smokers and nonsmokers who might enjoy their plane, train or bus rides more if they had an opportunity to be seated apart. On the other hand, there are social situations—attending a sporting event or visiting a restaurant are examples—where many smokers and nonsmokers want to be together and separate space can't be allocated without considerable inconvenience to one or the other.

9. WE DON'T NEED LAWS TO PROTECT "NONSMOKERS' RIGHTS".

TRUE.

Some 60 million Americans are smokers—such a large number that any question of "rights" would be difficult indeed to resolve in a legal sense. More importantly, with virtually no evidence of hazard for non-smokers, the controversy turns on the matter of annoyance for some of them by tobacco smoke. The answer lies in *courtesy*, not law. The alternative is to pave the way for government control of all sorts of everyday irritations. No one would advocate that.

An official of the American Lung Association made some pertinent observations in a recent speech. She said the anti-smoking movement "leaves itself open to tasteless and vulgar displays over which the lung association has no control and for which the lung association must bear the brunt of negative reaction from smokers and nonsmokers alike". She added, "The priority the nonsmokers rights movement is being given by lung associations takes away precious time, efforts and funds from much more important, relevant and substantial lung association activities that would help us toward realization of our goal—the prevention and control of lung diseases."

This leaflet is presented by The Tobacco Institute to aid full, free and informed discussion of the smoking and health controversy in the public interest and in the conviction that the controversy must be resolved by scientific research.

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