Being a current or former cigarette smoker increases the risk for severe illness from COVID-19.1

• Cigarette smoking compromises the immune system, is linked to lung inflammation and puts people at greater risk for pulmonary infection.2
• Smoking harms the airway lining cells that contain cilia3, which are our essential defenders against viruses like SARS-CoV-2.
• People who smoke have more ACE2 receptors in their lungs. The virus that causes COVID-19 uses these receptors as a ‘doorway’ to get into lung cells, thus allowing for more severe illness from the virus.4

Both smoking and COVID-19 disproportionately impact racial, ethnic, and sexual minority groups.5,6

• Communities that bear a disproportionate burden of COVID-19 hospitalizations and deaths include:7
  ○ American Indians and Alaska Natives
  ○ Black Americans
  ○ Hispanics or Latinx Americans
• Current cigarette smoking is highest among:8
  ○ Non-Hispanic American Indians and Alaska Natives
  ○ People of multiple races
  ○ LGB Americans

This pandemic is exacerbating the consequences of racial and socioeconomic disparities in health and healthcare in America – creating a crisis within a crisis.

There are persistent inequities in resource allocation, access to healthcare and other health stressors that communities of color experience.9

*Severe illness from COVID-19 is defined as hospitalization, admission to the ICU, intubation or mechanical ventilation, or death
At the present time, no firm link has been established between e-cigarette use and more severe risk due to COVID-19, but other harms remain.

Most e-cigarettes contain **nicotine**, which has several known health effects, including causing inflammation in lung tissue. ⁹³

E-cigarette aerosol can contain **heavy metals** like lead, volatile organic compounds and cancer-causing chemicals that are harmful to the lungs. ¹¹

E-cigarettes contain **acrolein, a pesticide**. Acrolein can cause acute lung injury and COPD and may cause asthma and lung cancer ¹². – all four are potential risk factors for developing more severe COVID-19 symptoms. ¹³

Secondhand smoke has not been established as a separate, known risk factor in developing more severe COVID-19 symptoms.

- Secondhand smoke is a serious health hazard which causes over 41,000 deaths in the U.S. each year. ¹⁴
- Many of the underlying conditions caused or made worse by secondhand smoke are potential risk factors for developing more severe COVID-19 symptoms. ¹⁵
- 100% smoke-free environments are the only effective way to fully protect people from secondhand smoke exposure. ¹⁶
  - Smoking indoors can increase the transmission risk of COVID-19 because people would need to take their mask off to smoke and respiratory droplets could be transferred when a smoker exhales.

With smoking being firmly linked to more severe disease from COVID-19, there has never been a better time to quit.

- Smoking cessation improves health status and enhances quality of life. ¹⁷
- Smoking cessation medications approved by the FDA and behavioral counseling can double the chances of quitting smoking. ¹⁸
- When people quit smoking, the number of ACE2 receptors in a person’s lungs decreases. ¹⁹


