

The extent of this neglected epidemic:

- smoking rates are coming down amongst the general population but remain stubbornly high amongst those with mental health issues – reinforcing and widening health inequalities
- people with mental health issues may account for more than a third of the tobacco smoked in the UK
- people with mental health issues are dying prematurely because the impact of smoking on their mental and physical health is not being recognised
- people with mental health and substance misuse issues have higher smoking rates, smoke more cigarettes per day and are more addicted to nicotine but nevertheless are just as motivated to quit as the rest of the population who smokes
- smoking is the most common preventable cause of death for people with mental health issues.

Financial and human cost of smoking:

- the estimated economic cost of smoking in people with mental health issues was £2.34 billion (in 2010) of which about £719 million (31% of the total) was spent on treating diseases caused by smoking
- smoking affects the metabolism of various medications, including diazepam, haloperidol (partial), olanzapine (partial), clozapine, mirtazapine (partial), tricyclic antidepressants, barbiturates and benzodiazepines
- smoking increases psychotropic drug costs in the UK by up to £40 million per annum
- cigarettes smoking kills half of lifelong regular smokers, for whom an average of 22 years life expectancy will be lost
- mental health problems are independently associated with average reduced life expectancy: for bipolar disorder between 9 and 20 years, between 10 to 20 years for schizophrenia, between 7 to 11 years for recurrent depression – adding smoking to this burden further shortens life expectancy for people experiencing mental ill-health
- for every person who dies from smoking-related disease, 20 more smokers are living with tobacco-related illnesses
- research looking at the social care needs of smokers found on average they needed care and support nine years earlier than ex-smokers and those who had never smoked

Smoking cessation:

- stopping smoking is associated with improvement in depression, anxiety, stress, psychological quality of life and positive affect compared with continuing to smoke
- withdrawal from smoking may pose a challenge to mental well-being but this is largely an attribute of the withdrawal from nicotine; extra stress management may help
- health professionals need to challenge old assumptions that smoking is a useful coping mechanism
- the Scottish Government's (2017) 10-year mental health strategy makes addressing this problem a national priority for the first time.