

Smoking habits do not differ for teens with, without asthma

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with [persistent asthma](#) smoked less than those with adolescent-onset asthma (7.3 versus 13.0 percent; $P = 0.04$). In a model including parental smoking, persistent asthma correlated with reduced odds of [adolescent](#) smoking at age 16 years (odds ratio, 0.57; 95 percent confidence interval, 0.35 to 0.94). Among parents, 18.4 percent were smokers, with parents of children with asthma [smoking](#) to the same extent as parents of children without [asthma](#) (17.6 versus 18.5 percent; $P = 0.65$)

"Smoking cessation must involve both parents and adolescents, and targeting adolescents before they become established smokers is vital," the authors write.

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(HealthDay)—Smoking habits do not differ for adolescents with asthma or their parents versus those without asthma, according to a letter to the editor published online Dec. 4 in *Allergy*.

Ulrika Hellberg, from the Karolinska Institutet in Stockholm, and colleagues examined self-reported smoking habits at age 16 years among adolescents and [parents](#) (4,089 participants) in relation to phenotypes of asthma. The authors included data for 2,994 adolescents.

The researchers found that 14.1 percent of participants had asthma at age 16 years. The prevalence of asthma phenotypes was 7.3 percent for adolescent-onset and 12.2 percent for persistent. Overall, 11.8 percent of adolescents reported smoking. The prevalence of smoking was similar for those with and without asthma (11.4 versus 11.8 percent; $P = 0.79$). Smoking prevalence was similar for adolescents without asthma and those with adolescent-onset asthma (11.1 versus 13.0 percent; $P = 0.45$). Adolescents

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