

# Better Think Before You *Take That Pinch*

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I recently read a mishap report about a Marine sergeant stationed at an embassy and who was medically evacuated after reporting to medical with a lesion on the inside of his lower lip. He was a smokeless-tobacco user, otherwise known as a “dipper.” Smokeless tobacco is a mixture of tobacco, sweeteners, salts, and hundreds of chemicals poisonous to the body. The embassy medical officer examined the Marine and sent him to a hospital for a biopsy.

After reading this report, I remembered a personal experience I’d like to share with you.

During a Mediterranean cruise, I knew a Marine gunnery sergeant with whom I spent a lot of time in the chief’s mess after dinner playing dominoes. One evening, he asked me, “Hey, Doc, do you have any cough syrup? I’ve had a cough for about three weeks now.”

I asked, “Are you bringing up anything when you cough?” His answer was, no. I gave him cough syrup, and he finished that bottle and another one. He came back to me and said he had finished both bottles, but there was no change in his cough. He also mentioned he had been having an uncomfortable feeling in his throat for the past couple months. I referred him to the senior medical officer (SMO), who examined him and had an X-ray made of his throat. Within the hour, the SMO called me down and said, “Chief, we need to get that gunnery sergeant back down here—there’s some type of growth in his throat that’s causing his cough.”

The Marine was medically evacuated and diagnosed as having throat cancer. He had been a dipper for about 17 years. The bad news was that, three months later when the cruise ended, he had already received chemotherapy, and, shortly there-



This is what oral cancer looks like, which can be caused by using smokeless tobacco.

after, I met his family for the first time—at his funeral.

Overall, the five-year survival rate for oral-cancer patients is about 50 percent if the cancer is detected very early, according to the University of California at San Francisco’s Margaret Walsh, a professor of dental public health. She made the statement in a speech she gave in September 1998. She also emphasized that treating oral cancer involves disfiguring surgery, since pieces of the face, tongue, jaw, throat, etc., begin to disappear with each surgery performed to stop the cancer from spreading. This type of cancer is even more common than leukemia; skin cancer; Hodgkin’s disease; and cancers of the brain, liver, bone, thyroid gland, stomach, ovaries, and cervix. It typically is caused by long-term tobacco use.

Why am I writing this? I want to give you and perhaps someone you know a bit more of an insight than you or they might already have. Many dippers may not know that dipping tobacco can cause significant diseases in your mouth or throat.

Statistics also indicate dipping is no safer than smoking! In terms of smoking addiction vs. smokeless-tobacco addiction: Because of the rapid absorption of nicotine through the mouth's mucous membranes, those who dip or chew get an even quicker nicotine "buzz" than do smokers. Meanwhile, the nicotine level in the blood is just as high—or higher—in smokeless-tobacco users as it is in smokers.

Smokeless-tobacco users also become just as addicted to nicotine and often start smoking (which doesn't require a place to spit).

Become a healthy statistic and join the millions of Americans who permanently have quit smoking or dipping tobacco products. Even long-time tobacco users—addicted to nicotine, the habit-forming substance, in tobacco—have found great satisfaction when they quit. They save money, they don't have the increased stress tobacco puts on their heart and blood pressure, they reduce their risks of cancer, and their senses of taste and smell are improved.

For more information about tobacco use, see your ship's medical department or visit the American Dental Hygienists' Association's website at [www.adha.org](http://www.adha.org).

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## A Different Kind of Poison

