



# Cotinine Test for Smokers

Smoking is the most important preventable cause of premature death and ill health in the world. It is an undisputed fact that the use of nicotine products will, most likely, affect a person's health. There are no safe tobacco products. The use of any tobacco product (including cigarette, cigar, pipe, and spit tobacco) can cause cancer and other adverse health impairments.

The Center of Disease Control indicates that each year smoking causes more deaths than AIDS, alcohol, drug abuse, auto accidents, murders, suicides, and fires combined. Its use causes millions of deaths each year, world wide, resulting in billions of dollars in direct medical related costs.

The principal causes of death among cigarette smokers are ischemic heart disease and cancer of the lung and bronchus. At least 20% of all heart disease deaths are smoking related. Emphysema, chronic bronchitis and asthma (which are forms of potentially disabling lung disease) are made worse by smoking. Another cancer with strong relation to smoking is laryngeal (vocal cord) cancer and the risk of bladder cancer is also increased for smokers. Other health risks associated with smoking are strokes, osteoporosis, and peptic ulcer disease. In addition, people who smoke have more infections because tobacco decreases immune system function.

Studies that compare smoking and non-smoking populations show that those, which smoke cigarettes, experience roughly twice the mortality of non-smokers. After smoking cessation excess mortality will decrease, but it depends on how long an individual smoked, the amount of cigarettes smoked daily, and the amount of damage already done. For example, "light" smokers (i.e. less than 20 cigarettes daily) who stop and are then followed for 10 years eventually reach a mortality similar to non-smokers. However, mortality remains high for those who smoked for a long period of time or who were "heavy" smokers.

Because smokers and other tobacco users may under-report their consumption, or deny smoking altogether, it has become routine practice of insurance companies to test the majority of urine specimens for nicotine or cotinine.

The body changes nicotine to cotinine prior to being excreted as waste product. Because nicotine has a short existence in its natural form in the body, cotinine testing extends the window of detection for several days, making it the preferred method of screening for tobacco use.

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All forms of tobacco (i.e. cigars, pipes, chewing tobacco, snuff, nicotine gum or nicotine patch) contain abundant nicotine. Its detection indicates that the individual has recently consumed a significant quantity of tobacco. The most common argument, when a proposed insured tests cotinine positive, is passive smoke or second hand smoke exposure from a family member or co-worker. Studies show that most individuals who are heavily exposed to second hand smoke do, in fact, have measurable quantities of nicotine/cotinine in their urine. For this reason, laboratories set thresholds for a “positive” cotinine test significantly higher than what is seen for passive exposure.

Prudential offers two rating categories for cigarette smokers and two rating categories for users of other nicotine products (i.e., cigar, pipe or chew tobacco).

**Cigarette Smoker Categories**

- ▶ Preferred Smoker – cigarette use current or within 12 months
- ▶ Smoker – cigarette use current or within 12 months

**Users of Other Nicotine Products Categories**

- ▶ Non-Smoker plus – no cigarette use for 12 months
- ▶ Non-Smoker – no cigarette use for 12 months

To be eligible for “Preferred Smoker” or “Non-Smoker Plus” category an individual must qualify based on other factors (i.e. occupation, build, blood pressure, cholesterol levels, alcohol/drug use, family history, travel, residence, driving record, aviation/avocational activities, and personal medical history).