



# cb2insights

## **CB2 HEALTH PULSE NOVEMBER 2020**

---

CB2 Health Pulse is a monthly publication that highlights data and interesting findings from a real-world data registry of over 100,000 patients in an integrative care setting focused on improving future health outcomes for patients.



## IN THIS EDITION

Up and down – How reporting of smoking and alcohol use have changed since the pandemic  
 Smoking and drinking by age, gender, race and state – How does it vary?

## INTRODUCTION TO CB2 INSIGHTS

CB2 Insights owns and operates clinics in the United States that put the patient at the center of their health and wellness journey in an integrative care setting. We are proud to provide care to more than 100,000 patients on an annual basis.

CB2 Insights maintains a real-world data registry of patient health outcomes with the goal of improving patient care, providing individualized feedback, and generating insights for the medical and academic communities.

The objective of the CB2 Insights Health Pulse is to highlight data and interesting findings from the real-world data registry with a focus on improving future health outcomes for patients.

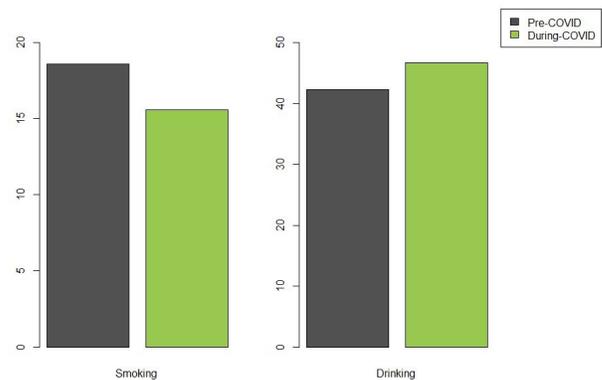
## WHAT'S CHANGED, OTHER THAN EVERYTHING?

After eight months living through a global pandemic, it's difficult to think of what hasn't changed in our day-to-day lives. From business closures and face masks, to working from home and physical distancing, our lives were turned upside-down, and quickly. Back in July we dug into our data and found a dramatic, but unsurprising increase in the number of patients reporting anxiety – with numbers doubling just a few months into the pandemic. For the November Health Pulse we have decided to look further into our data to see if there were other trends of interest during the pandemic.

## WHAT HAPPENED WITH SMOKING AND DRINKING HABITS?

There have been anecdotal reports of the stress of COVID-19 leading people to drink and smoke more, and we wanted to see if this was true based on the data collected from our patients. We separated our patients into those seen before March 15, 2020 and those seen after, and a trend around smoking and drinking was immediately apparent:

Reports of smoking went down, and alcohol consumption went up.



The graph above shows the proportion of patients from the CB2 data registry who reported smoking and drinking alcohol at their initial assessment prior to the pandemic compared to during the pandemic.

## HOLY SMOKES

Prior to the pandemic, an average of 18.6% of new patients reported smoking tobacco, following the onset of the pandemic, this dropped to 15.6% among new patients, which is a significant change. We ran the numbers again to control for other potential factors that might explain or bias this change, such as age and gender and it was still clear: **among new patients, fewer reported smoking tobacco following the onset of the pandemic.**

We dug into the literature to see what other researchers

were saying about COVID-19 and smoking. A report from the World Health Organization from June concluded that there is some evidence to suggest that smoking is associated with an increased severity of COVID-19; however, there are no data to confirm whether or not smoking will increase the risk of being infected with COVID-19 initially. Despite there being a lack of evidence to define whether smoking tobacco increases the risk of contracting COVID-19, the WHO recommends quitting smoking to protect heart and lung function.

Data surrounding the onset of the pandemic and quitting smoking is conflicting; tobacco sales increased in the US at the beginning of the pandemic, which may have been due to stockpiling (toilet paper, anyone?), but also may have reflected a true increase in smoking due to stress from the pandemic or simply being stuck at home with nothing else to do. Results from one survey indicated that roughly 30% of respondents increased the amount they were smoking. However, the same survey found that 22.9% of respondents attempted to quit smoking in order to reduce possible harm from COVID-19. Could this explain the drop in smokers? It will be interesting to revisit the proportion of patients reporting smoking as COVID-19 declines.

## KEEP CALM AND POUR ON

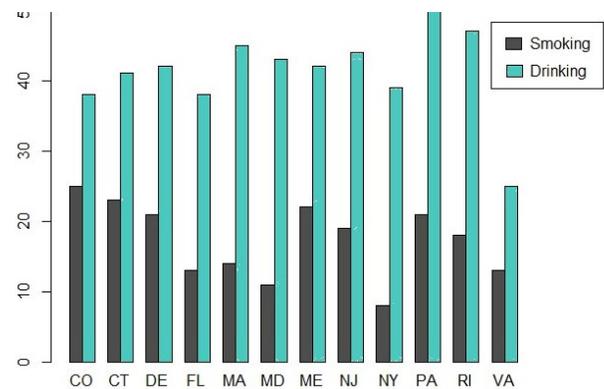
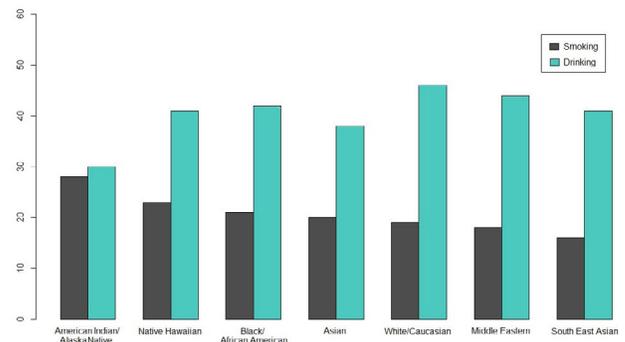
The opposite trend was seen for the pandemic and drinking – prior to the pandemic 42.3% of new patients reported drinking alcohol, which jumped to 46.7% after its onset. Again, we ran the numbers to make sure this change couldn't be explained by a source of bias such as age or gender and the difference was still significant – **the proportion of patients reporting drinking alcohol increased during the pandemic.**

We again wanted to see if there was information in the literature to support our findings. Similar to tobacco sales, alcohol sales were way up at the end of March – 54% higher than the same time last year. Results of several surveys also indicate that people are drinking more than prior to the pandemic. One in particular reported that there was a large increase in alcohol consumption among those who were not drinking more than the recommended guidelines previously, which is similar to our findings. We hypothesize that this increase may be due to any number of factors, including stress, boredom, and potentially even unemployment due to businesses shutting down during the lockdown. How did the pandemic impact your alcohol consumption; did boredom and stress cause it to increase, did a lack of social functions cause it to decrease, or did you stay consistent, whether drinking or not?

## BEYOND THE PANDEMIC

Apart from looking into smoking and drinking before and during the pandemic, we investigated behaviours overall by age, gender, race and state. Here are some of the highlights:

- Smokers were younger than non-smokers (42.2 vs 45.3)
- The average age of those who reported drinking vs those who did not was the same (44.9)
- Males reported smoking more than females (19% vs 17%), but females reported drinking more than males (44% vs 42%)
- American Indians/Alaska Natives reported smoking most often (28%)
- Caucasians reported drinking most often (46%)
- Smoking was highest in Colorado (25%)
- Drinking was highest in Pennsylvania (52%)



The graphs above show the proportions of patients from the CB2 data registry who report smoking and drinking by ethnicity and by state.

Looking at data from the Center for Disease Control, they also report males smoking more than females, but at lower proportions than our patient population. Our findings are also consistent with respect to race, with American Indians/Alaska Natives smoking in the highest proportion per the CDC.

Our findings with respect to drinking are reversed for males and females, however, as historically males have reported drinking more than females, but line up with respect to race as Caucasians report drinking more than other racial groups.

## LET'S SUM IT UP

---

No matter how you're looking at it, trends in smoking and drinking vary by age, gender, race and geographic region. Trends have varied by population over time as a result of increasing health knowledge, or traumatic situations, and vary within individuals throughout their life based on situations and their environment. Will a global pandemic be a thing of the past in no time, with behaviours (whether healthy or not) reverting back to the mean, or will this leave a lasting impression on trends in how individuals view and care for their own health?

## UP NEXT: CB2 HEALTH PULSE

- Deep Dive: Anxiety – is it still on the rise due to the pandemic?
  - Pharmaceutical medication use – are patients happy with their options?
  - Deep Dive: Chronic Pain – it's the most commonly reported reason for using medical cannabis, but what are the experiences of these patients?
- 

### CB2 HEALTH PULSE

We will be releasing additional data and insights on a monthly basis.

### QUESTIONS?

Want to see something featured? Let us know!  
Email: [datareport@cb2insights.com](mailto:datareport@cb2insights.com)