

ary 1971; 127:89-94. Talbott's article simply is a review of this original article. The reason I am being picky is that this reference of Dr Selzer's is one of the most widely quoted in the professional literature, especially the literature about alcoholism.

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TO THE EDITOR: In my article, "Laboratory Evaluation of a Bleeding Patient,"¹ there is an error on page 51, right-hand column, third line from the bottom. It should read, "The thrombin time may be prolonged by a decreased amount of or dysfunctional fibrinogen or by substances that interfere with fibrin polymerization (Table 1)." It probably would have been clearer to have said "may be prolonged by reduced or dysfunctional."

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Cigarette Taxes—Regressive or Progressive?

TO THE EDITOR: California voters recently passed Proposition 99, which imposed a new 25 cents per pack state tax on cigarettes. During the months before the vote, the tobacco companies launched an advertising campaign designed to convince voters to defeat the proposition. One argument raised by the tobacco companies concerned the regressivity of the tax. Two points were made. First, the percentage of a typical poor person's income spent on cigarettes is likely to be higher because all smokers' expenditures on cigarettes do not vary greatly but their incomes do. Most smokers smoke from 10 to 50 cigarettes a day, but the incomes of all American smokers display much more than a five-fold difference.

Second, and more important, a much greater proportion of the poor than the rich smoke. Education is known to be strongly correlated with income and with cigarette consumption.¹ About 35% of high school dropouts—as opposed to 23% of people with college degrees—were smokers in 1985.² These two points can be summarized by aggregate statistics on the percentage of income all smokers and non-smokers who are poor spent on tobacco products versus that spent by all smokers and non-smokers who are rich. The percentage of income devoted to tobacco products among persons in the lowest quintile (fifth) of the income distribution in 1984 was 4.56%. The percent in the highest quintile was 0.45%.³ Smokers and non-smokers who are poor spent approximately ten times more of their incomes on tobacco than did smokers and non-smokers who are rich. It is appropriate to include nonsmokers in the rich and poor categories because regressivity or progressivity is calculated on the basis of taxes paid by groups with varying income—not varying consumption.⁴

The tobacco company advertisements carefully ignored a closely related argument, however. The poor are more sensitive to increases in cigarette prices.⁵ Teenagers, for example, earn far less than any other age group but are especially sensitive to increases in prices. Moreover, as prices increase, fewer teenagers are likely to ever begin smoking than persons in other age brackets.⁶ The benefits of the tax in terms of discouraging smoking are likely, therefore, to be progressive. A disproportionate number of lives of the poor are likely to be saved by a cigarette tax.

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