

Editorial

SMOKING EPIDEMIC IN PAKISTAN

Smoking is a single largest preventable cause of death all over the world: Today smoking is responsible for 3 million deaths per year world wide, and unless some strong measures are taken this death toll could rise to 10 million deaths per year by year 2025 – most of these deaths would be in the developing countries.

Smoking is on the rise in Pakistan. A survey done in 1994 showed that the prevalence of smoking in Pakistan's adult population aged 15 years and above was 21.6%. these rates were higher in males (36%) than females (9%)¹. Overall tobacco use is even higher. According to National Health Survey conducted by Pakistan Medical and Research Council 54% of men and 20% of women use some form of tobacco on regular basis in Pakistan². Looking at the growing tobacco industry in this country these figures are expected to be much higher now. The harmful effects of tobacco on human health are well established in various scientific studies^{3,4}. The risk of smoking is not just confined to persons who smoke but it also affects the individuals who live or work close to the smoker (Passive or Second hand smoking)⁵. Smoking is the major cause for Heart attack, Lung cancer, Chronic bronchitis, Stroke, Peripheral vascular diseases and many other illnesses. If any of the parent smoke then their children are more likely to develop Asthma, Respiratory infections, Growth retardation as well as Cancer compared to children of non smoking parents. On an average smoker shortens his life by five minutes for each cigarette smoked.

In western countries smoking is on the decline. The general public has been well informed about the harmful effects of tobacco. As a result of this, use of tobacco is now considered socially unacceptable. In this country people feel very proud in smoking at public places without realizing the harmful effects of smoking on others. Cigarette advertisement has been shown to have strong influence on children particularly teenagers. In countries where cigarette advertisement was banned few years ago the prevalence of smoking has considerably declined. Imposing ban on sports sponsorship has also helped in this regard. Unfortunately today in Pakistan we have more cigarette advertisement and more sports sponsorship than ever before. During recent World Cup Cricket cigarette advertisement was at full swing.

There is high prevalence of smoking even among the members of medical profession. Doctors and Medical Students are supposed to be the role model for their patients. Credibility of anti-smoking message is lost when people in the medical profession themselves smoke. A study done at Aga Khan University Showed 17% of male and 4% of female medical students smoke⁶. It is the responsibility of doctors in general and Chest Physicians in particular to take active part in the anti-smoking campaign.

Few months after taking his office, The Prime Minister announced that smoking will be banned at public places such as airports. However this decision was not implemented. Some years ago Federal Ombudsman passed an order banning tobacco advertisements on TV and Radio. The government appealed against the order and advertising continued. Most adults smoker began their smoking before the age of sixteen. This is an age when youngsters are poorly equipped to judge cigarette's health risk. Nicotine the main constituent of tobacco is more powerful than Heroin as an addictive substance.

It's easy to start smoking but very difficult to give up. Our emphasis should be to prevent younger generation taking up this addiction. There is tremendous need for educating the general public about hazards of smoking. The government of Pakistan must put a complete ban on advertisement of cigarettes and sports sponsorship. This single step will go a long way in reducing the tobacco related mortality and morbidity in Pakistan. Doctors should set up a good example by not smoking themselves and then help their patients in quitting smoking. Members of Pakistan Chest Society can play a key role in joining all the partners involved in the anti-smoking campaign. British Thoracic Society symposium on smoking at the forthcoming Pakistan Chest Society Meeting in Lahore could be used to launch a strong anti-smoking campaign in Pakistan.

References:

- Prevalence and pattern of smoking in Pakistan, Syed Ejaz Alam; JPMA 1998;48 (3) 64-66.
2. Pakistan Medical Research Council, National Health Survey of Pakistan, 1990-94.
3. The UK smoking epidemic, Callum C; Death in 1995, Health Education Authority 1998 p29-30.
4. Mortality in relation to smoking, Doll et al; BMJ 1994 Vol. 309 p 901.
5. Report of the Scientific Committee on Tobacco and Health, HMSO London 1998, p27-34.
6. Attitude of Asian Medical Student Towards Smoking, S.F. Hussain, I. Moid, J. A. Khan, Thorax 1995;50:996-7.

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