

# Learning Objectives

By the end of this session, students should be able to:

1. Enlist types and causes of tobacco smoking
2. Describe composition of tobacco
3. Elaborate health hazards of tobacco smoking
4. Discuss effects of second hand smoking
5. Describe measures for prevention of smoking in the community
6. Illustrate hope of life for quitters



## Facts about smoking

- \* 1/3<sup>rd</sup> of world population-Smoker
  - Males: > 1 billion
  - Females: > 250 million
- \* Industrialized Countries
  - % of Male smokers: 50%
  - % of Female smokers: 22%
- \* Developing countries
  - Males: 35%
  - Females: 9%

(Source: World Health Report)



## Facts about smoking

- \* Three million deaths annually because of smoking – means one death after every 8 seconds.
- \* Ten million deaths annually expected by 2020 - means one death after every three seconds.
- \* Developed countries have reduced smoking by 10% while developing countries have increased by 60% after 1970.





## Pakistan Picture

- \* Current Smokers – Approximately 15%
- \* Pakistan is among 8 countries in which smoking trend will rise in next 20 years.
- \* Pakistan will be leading in the race of tobacco sale in EMRO region in next 20 years.



## Types of tobacco smoking

- \* Cigarette - Most common and most harmful
- \* Sheesha
- \* Bidi
- \* Tobacco chewing
- \* Hookah(Hubble bubble)
- \* Cigar
- \* Kreteks(clove cigarettes)
- \* Snuff – Moist & Dry
- \* E-cigarette



## Causes of smoking

Usually the adolescents (mostly of 10-15 yrs) indulge in smoking as a result of

- curiosity,
- adventurism,
- rebelliousness and adulthood,
- a manly and masculine act that will lead them to happiness, fitness, wealth, power and sexual success.
- Attractive advertisements influence the immature and unstable minds.





## Composition of tobacco

- \* About 4000 toxic substances are present in tobacco
- \* Most important and dangerous constituents:
  - Nicotine
  - Carbon Monoxide
  - Tar



## Effects of Nicotine

- \* Smokers have to maintain a level of nicotine in the blood for normal working.
- \* Smokers have to smoke to avoid the discomfort experienced while not smoking.





## Consequences of smoking

- \* Economic loss
- \* Health loss
- \* Socio-cultural loss
- \* Psychological loss



# Smoking and Diseases

- \* An important causative/risk factor for various diseases.
- \* About 25 diseases caused/aggravated by smoking. e.g.
  - Lung cancer: 80-90% deaths due to smoking. Incidence 10 times more than non-smokers.
  - Chronic bronchitis
  - Emphysema: 80- 95%
  - Ischaemic heart disease: 20-30% deaths. Risk is twice than non-smokers
  - Obstructive peripheral vascular disease



# Smoking and diseases

- \* Cerebrovascular disease
- \* Cancer of tongue, oesophagus, larynx & pancreas, Gastro-duodenal ulcers
- \* Cancer of the cervix and endometrium
- \* Cancer of the urinary bladder
- \* Still births, abortions
- \* Neonatal deaths
- \* Fracture of hip, wrist and vertebrae





## Occupational Hazards & Smoking

*Effect of smoking in the presence of pollutants like asbestos, cotton, radioactive environment is either multiplicative or additive.*



## Effects of Second Hand (Passive) Smoking(SHS)

### Children

- Sudden infant death
- Respiratory distress
- Otitis media

### Adults

- Leads to discomfort, distress to asthmatics
- Nicotine is detected in blood and urine of passive smokers.
- Passive smoking by adults may lead to Ca-cervix, CA lung, and coronary heart disease.

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## Treatment

### \* Drugs

#### – Nicotine replacement therapy

- \* Patches
- \* Gums
- \* Nasal sprays
- \* Inhalers
- \* E-cigarettes

#### – Hypnotics

### \* Group therapy





# Treatment

Real Treatment is by

- \* Motivation
- \* Commitment
- \* Determination and
- \* Effort and support in the struggle to quit smoking.



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# MPOWER

To expand the fight against tobacco epidemic WHO has introduced MPOWER package of 6 policies:

- ❖ M- Monitor tobacco use and prevention policies
- ❖ P-Protect people from tobacco smoke
- ❖ O-Offer help to quit tobacco use
- ❖ W-Warn about dangers of tobacco
- ❖ E-Enforce bans on tobacco advertising, promotion & sponsorship
- ❖ R-Raise taxes on tobacco





## Preventive measures

- Recommendations of WHO Framework Convention on Tobacco Control (FCTC) should be implemented.
- Govt.'s responsibility for implementation of recommendations and legislation.
- Ascertain the existence of smoking as health problem.
- Encourage not to start smoking.
- Encourage to stop smoking.
- Multi-sectoral approach.



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## Tobacco Free Initiative (TFI) of WHO

Bans on direct and indirect tobacco advertising

Tobacco tax and price increases

Smoke-free environments in all public and workplace

Large clear graphic health messages on tobacco packaging



# **WORLD NO TOBACCO DAY**

**31<sup>ST</sup>. MAY 2018**



## **THEME FOR THE YEAR**

**“Tobacco & Heart Disease”**

**2019**

**“Tobacco & Lung Health”**

# Obligations for the Framework Convention on Tobacco Control

- \* Protect public health policies from commercial and other vested interests of the tobacco industry.
- \* Adopt price and tax measures to reduce the demand for tobacco.
- \* Protect people from exposure to tobacco smoke.
- \* Regulate the contents of tobacco products.
- \* Regulate tobacco product disclosures.
- \* Regulate the packaging and labeling of tobacco products.

\*



# HOPE OF LIFE FOR THE QUITTERS





## When smokers quit

Just 20 minutes after the smokers have smoked the last cigarette, their body begins an ongoing series of beneficial changes.

### \* After 20 minutes:

- Blood pressure drops to normal.
- Pulse rate drops to normal.
- Temperature of hands becomes normal.

### \* After 8 hours:

- Carbon monoxide level in blood drops to normal
- Oxygen level in blood increases to normal.



## When smokers quit

### After 24 hours:

- Chance of heart attack decreases

### After 48 hours:

- Nerve endings start growing.
- Ability to smell and taste is enhanced.
- Walking becomes easier.

### \* After 2 weeks – 3 months:

- Circulation improves.
- Lung function increases up to 30%.



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## When smokers quit

### \* After 1-9 months:

- Coughing, sneezing, congestion, fatigue, shortness of breath decrease.
- Cilia re-grow in the lungs, increasing ability to handle mucous, clean the lungs and to reduce infection.

### \* 1 year:

- Risk of coronary heart disease is half that of a smoker.

### \* 5 years after:

- Stroke risk is reduced to that of a nonsmoker.



## When smokers quit

- \* **After 10 years:**

*The lung cancer death rate is about half that of a continuing smoker's. The risk of cancer of the mouth, throat, esophagus, bladder, kidney, and pancreas decreases.*

- \* **After 15 years:**

*The risk of coronary heart disease is that of a nonsmoker's.*

*(Source: American Cancer society)*