

# No Smoking

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**Cigarette smoking, the leading preventable cause of disease, disability and death, has been declining. Experts attribute this in part to increases in available treatments, cigarette prices, smoke-free and tobacco-free policies, implementation of mass media and educational campaigns, and other evidence-based strategies to help people avoid or quit using cigarettes. Despite these efforts, tobacco kills more than 8 million people each year. More than 7million of those deaths are the result of direct tobacco use while around 1.2 million are the result of non-smokers being exposed to second-hand smoke. Over 80% of the world's 1.3 billion tobacco users live in low- and middle-income countries.[1] This paper covers health hazards of both active and passive smoking with a brief commentary on anti-smoking laws in some selected countries.**

**Movies have portrayed both positive and negative characters smoking cigarette as a sign of affluence or manliness, and none of these characters had been shown to suffer any life threatening consequences of smoking. In many instances, a cool leader in the movies is seen to be smoking while making important decisions. Such depiction has influenced young minds who idolize these characters to experiment with smoking. Before long, the addictive potential of nicotine changes an occasional smoker to a daily smoker. This is the usual beginning of a long journey of ill-health and poor quality of life, which could have been prevented. Perhaps the effect would have been the opposite if the life threatening effects of smoking were highlighted more dominantly than its glorification in movies.**

**However, it would be wrong to entirely blame movies or other entertainment media for this habit. Portraying smoking as a wilful and personal decision has long allowed tobacco companies to promote cigarettes even while acknowledging their deadly risks. After all, it is a highly successful multi-billion dollar industry that controls the production, sale and distribution of tobacco products. Adverse effects of smoking on health has been known now for decades. When knowledge regarding the ill-effects of smoking is freely available, anyone who starts smoking even under peer pressure is in one sense opting for a premature death.**

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It is clear that social influences, such as having friends or parents who smoke, play important roles in smoking initiation. In India, smoking is more common among men than in women. However, in many countries, smoking among females is nearly as prevalent as in males. Culturally, smoking in females is a major taboo as it is deeply imbedded in our mind-set that only vamps and bad character women smoke. Notably, smoking among females in India appears to be most prevalent among the lowest and the highest socio-economic strata.

Until recently, people have been smoking freely at home and in public places with no concern about passive smoking or discomfort to people around. Many of us would recall that ashtray in our drawing room side table for use by the visitors. In the past, there were no restrictions on smoking in public transport. Who cannot recall the nauseating smell of cheap tobacco that would greet the passengers as soon as one entered a bus or a train? Even the hospitals were not spared. It is ironical that hospitals who were dealing with smoking related illnesses had to place 'No Smoking' signs to consciously remind people not to smoke in or around the hospital.

Things have changed for the better in recent times. We are in an era where people are more health consciousness and well read on the health consequence of smoking. Now no one is found smoking in busses and trains (fellow passengers don't allow it) at least in the urban and semi-rural areas.

Various enactments have had a role in this transition. There are "No Smoking" zones in various public places. In markets, malls, and in and around educational institutions, there are signages to remind people not to smoke. The result is better air to breathe at home as well as in the open areas.

We will enumerating later in this article the legal provisions in this respect in some selected countries including India and major health hazards due to smoking.



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## Health Hazards Due to Smoking

Smoking is among the leading preventable causes of illness and death among human population. Every pack of cigarette sold in the market comes with a warning that smoking is injurious to health. This warning is the only truth that cigarette makers have disclosed. This statement by cigarette makers is not made with consideration of health of the users but because it is mandated by law. Nearly one-half of all smokers die prematurely due to smoking related diseases. In the United States, smoking contributes to one in five premature deaths. It is estimated to cause more than 480,000 deaths annually (including deaths from second-hand smoke).[2] The situation in the developing world may be even more dire in this regard, but reliable data are not available.

Smoking causes cancer, heart disease, stroke, lung diseases, diabetes, and chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis. Smoking also increases risk for tuberculosis, certain eye diseases, and problems of the immune system, including rheumatoid arthritis.

## Smoking and Cardiovascular Disease

Smoking is the most important preventable cause of coronary artery disease which causes heart attacks. As many as 1 in 4 of heart attacks and 1 in 10 strokes can be directly attributed to smoking. After diabetes mellitus, smoking is the leading cause of blockage of arteries which supply blood to the legs, placing smokers at higher risk of loss of limbs or amputation in future.

## Smoking and Respiratory Disease

Smoking is responsible for a host of lung diseases. Most important among these is chronic obstructive pulmonary disease (COPD), which causes patients to develop shortness of breath, chronic cough and sputum, and progressive decline in exercise capacity. More than 8 out of 10 cases of COPD are directly due to smoking. COPD is among the leading causes of premature death in smokers. Even though a partial improvement is seen, many changes in

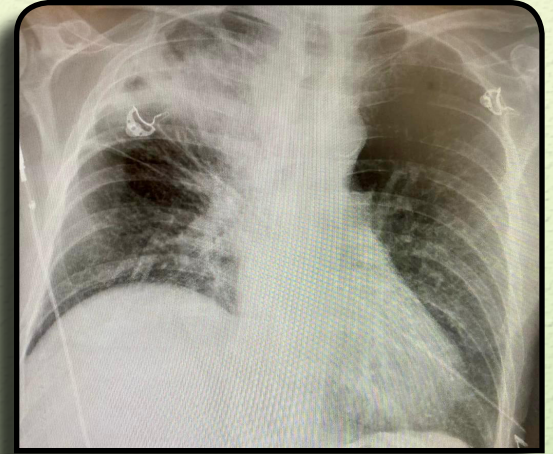




the lungs in COPD are irreversible, leading to continuation of symptoms even after smoking cessation. Usually, clinical symptoms of COPD would develop after about 20 years of smoking, but it is well known that structural changes in lung which eventually leads to COPD can develop within 1-2 years of smoking.

## Smoking and Cancer

Smoking is also a leading cause of preventable cancers among human beings. Most people relate smoking to lung cancer, but what is important to know is that smoking also causes cancers of many other organs. This includes cancer of oral cavity, throat, voice box, food pipe, stomach, pancreas, kidney, liver, urinary bladder, cervix and blood. There is some evidence for increased risk of breast cancer among pre-menopausal women. Smoking cessation reduces the risk of cancer within 5 years, but the risk remains higher than in never-smokers as long as 20 years after quitting.



## Smoking and Other Health Risks

Smoking leads to disease and disability and harms nearly every organ of the body.

Smoking during pregnancy has numerous adverse effect on both mother and infant. There is a significantly increased risk of spontaneous abortion, still birth, and preterm (early) delivery. Smoking increases risks for lower birth weight, respiratory distress and sudden infant death syndrome, ectopic pregnancy, and orofacial cleft in infants. Smoking can also affect men's sperm, which can reduce fertility and also increase risks for birth defects and miscarriage.

There are a host of other illnesses caused or worsened by smoking. Dental and gum diseases are readily apparent. Smoking can affect bone health, can increase risk for cataracts, cause type 2 diabetes mellitus and, rheumatoid arthritis, increases inflammation and decreased immune function. Smokers tend to have more respiratory complications after routine surgeries. The benefits from cancer therapies are also less among smokers than in non-smokers.

## Second- hand Smoking and Health Risks

Second-hand smoking refers to the smoke exposure to individuals spending time in close proximity to a smoker. Second hand smoking over a prolonged period of time is



also injurious, though to a lower extent than in primary user. Health risks of second-hand smoking include increased risk of lung cancer, heart disease, respiratory infection, middle ear infections among children, and poor control of asthma. The realization that second-hand smoking is harmful is the major driving force behind campaign to ban smoking from public places across the globe.

### **Smoking Cessation and Reduced Risks**

Smoking cessation has health benefits at any age, no matter how long or how much an individual have smoked. Research has shown that various damages can be healed even after years of smoking. Smoking cessation leads to a significant decline in risk of heart disease with a few months to years after cessation. Quitting smoking before the age of 40 reduces the risk of dying from smoking-related disease by about 90%. It is the single best way to protect family members, co-workers, friends, and others from the health risks associated with breathing second-hand smoke.

### **Anti-smoking laws**

Despite stiff resistance from smoking lobby, most countries around the world have taken steps to save their people from effects of active and passive smoke.

a. Health Act 2006 in UK, Smoke Free Environment Act 1990 in New Zealand, COTPA 2003, and Prohibition of Smoking in Public Places Rules 2018 in India were enacted to regulate smoking. In Japan, however, there are hardly any national level laws to restrict smoking. In France, sub-national jurisdiction enacts their own smoke free laws that are stricter than the national laws. And in the US, while there are no Acts to impose nation-wide federal smoking bans, different states are free to frame their local laws on the subject which range from no regulations to a ban nearly everywhere.

b. Restriction on smoking in enclosed public areas, such as in public transport vehicles, is also variably enforced. In some countries like India, smoking in airports, restaurants, and other enclosed places is allowed in separate designated smoking areas. In the US, indoor smoking is banned by the United States Department of Transportation on all the commercial passenger flights.

c. Some countries have outlawed the sale of tobacco and tobacco products to underage persons as defined under their laws. In Australia, Germany, New Zealand, France, and India, tobacco products cannot be sold to persons below 18 years of age. And in Japan, the sale of such products is prohibited below 20 years of age. In the US, an amendment in federal Food, Drug and Cosmetic Act in December 2019 raised this



age limit to 21 years. The National Commission for Protection of Child Rights (NCPCR) has urged Central and state governments to increase the minimum legal age to buy tobacco products from 18 to 21 years.



d. In addition to age restrictions, some measures have been taken in different countries to protect the youth and minors from this menace. In France, law prohibits sale of tobacco products in and near educational institutions and centres for youth recreation. Smoking in some outdoor areas where minors visit regularly is also prohibited. In India, sale of tobacco products within 100 yards of educational institutions is prohibited. In the UK, several universities have imposed blanket bans on smoking on the campus.

e. Countries have been taking steps to control publicity of tobacco products and to educate consumers through regulation on advertising, signage, and printed warnings on the package. Under EU Tobacco Product Directives, the package has to carry a warning label since 2017. In Australia, there are laws that ban any advertising and display of tobacco products, and in addition, all tobacco products must carry a health warning in text and graphic. In New Zealand, cigarette advertising is banned on electronic and print media and signage outside the shop. In France, while display of tobacco products is allowed at the point of sale, all other forms of advertising, promotion, and sponsorship are banned. In India, the COTPA mandates a health warning. Films and TV showing are mandated to display a health warning of tobacco products.

## Summary

In most countries population-level interventions, such as raising the price of cigarettes, implementing comprehensive smoke-free policies, mass media campaigns and pictorial health warnings, and comprehensive tobacco control programs have supported and increased smoking cessation. The destructive health consequences of smoking cigarettes are widespread. Many sectors are addressing the issues, but much more must be done to create a smoke free world. While quitting earlier in life yields greater health benefits, smoking cessation is beneficial to health at any age. Even people who have smoked for many years or have smoked heavily will benefit from quitting.



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## Reviewer Speaks

I congratulate the authors for giving a very balanced and unbiased view of ill effects of smoking, describing the forces that influence youngsters to take up this terrible habit and forces that are trying to get rid of this curse on human society. Laws are helpful but it is equally a matter of individual choice and responsibility. Being a lung doctor, I have seen it from very close how smoking has destroyed the lives and dreams of countless people. I have encountered numerous patients who are able to quit smoking with their will power. Still, nicotine in tobacco products is a highly addictive substance. Once started, it may be extremely difficult to give it up. Let me describe one tragic situation to make this point.

About 10 years ago, one of the hospital-employee approached me informally because he had cough which was keeping him awake in night. He got particularly scared because he noted a small amount of blood in his sputum. Evaluation showed that he had a localized lung cancer. Within 2-weeks, he underwent a major surgery in which one-half of his left lung was removed. He did well for next couple of years. Then I heard that he was in emergency room with new onset of pain in the center of his chest. Tests showed that he was having a major heart attack. He underwent an emergency cardiac catheterization and had to have stents in 2 major arteries supplying blood to the heart. He did well afterwards. About 3 years after this episode, he required a major blood vessel surgery to restore blood supply to his right leg. Without it, he would have lost his leg. He did well initially but 2 weeks after surgery he developed a major blood clot in lungs, which is sometimes seen after major operation. He was treated with anticoagulants and did well. Over next 5 years, he developed symptoms of chronic obstructive pulmonary disease and congestive heart failure, seriously limiting his activities. About 1 year ago, he developed a new lung cancer in remaining part of left lung. This time he could not undergo surgery because his lung capacity was too low and his general condition was too poor. He received radiation therapy with good response. On the last imaging, there is suspicion that he may have recurrence of cancer.

All his medical problems started when he was about 55 years of age. He is now 65 years old, but on his last visit, he mentions that he feels as though he is 85 years old. He started smoking when he was 15. This started as an occasional "cool" habit with his high school friends. Within a year of starting, he was a daily smoker. Every single illness he suffered is directly related to smoking. He knows it very well but he does not blame anyone but himself for his ill health.

Still, till this date, he has never been able to quit smoking. He actively smokes at least 1 pack/day. He has made many efforts to quit, but all attempts at smoking cessation have failed. He has now given up trying and is resigned to his fate. All his dreams of having goodtime after retirement are totally shattered.

This is the power of nicotine addiction. If this real-life tragedy cannot convince a youngster never to try smoking, perhaps nothing will. I have no doubt that one signs up voluntarily for lifelong suffering, ill health and premature death the day one picks up the very first cigarette. So, I have simple advice- never start. It's your call.

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