Treat tobacco dependence and “bend the trend”
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As the year 2000 approaches, the worldwide epidemic of tobacco-related diseases continues to worsen. Historians in the year 2200 will look back upon this time in history and wonder what went wrong with our society that it should allow such a lethal epidemic to continue. It will surely seem incredible to them that the cause of the epidemic was money, and an industry which was allowed to promote products that were known to cause sickness and death on such an epic scale.

It is estimated that a third of the global adult population, or 1.1 billion people, are smokers, and users of tobacco in other forms are increasing at an alarming rate in many regions of the world. In developing countries, an estimated 48% of men and 7% of women smoke, while in industrialized countries the figures are 42% for men and 24% for women. Each year, tobacco causes four million deaths, which means nearly 11 000 per day, with 1 million of these deaths currently occurring in the countries that can least afford this health and economic burden.

The global tobacco epidemic is predicted to claim the lives of some 250 million children and adolescents who are alive today, a third of whom live in developing countries. By the year 2030, according to current projections, tobacco will be the leading cause of death and disability, killing more than 10 million people annually, thus causing more deaths worldwide than HIV, tuberculosis, maternal mortality, motor vehicle accidents, suicide and homicide combined.

Despite the grim statistics, there is hope: many of these deaths are potentially preventable. Research has shown that the treatment of tobacco dependence greatly reduces the risk of tobacco-related disease. In other words, the treatments currently available save lives.

We now have more effective treatments for tobacco dependence than have ever existed before. The problem is that these treatments have not been delivered to the people who need them, a situation that the World Health Organization intends to change. WHO has made the reduction of tobacco use by treatment one of its top disease-control initiatives and has launched a Tobacco-Free Initiative through which it plans to make public a global intervention policy on World No Tobacco Day on 31 May. To help design this policy, nicotine-dependence experts from around the world met in Rochester, Minnesota, USA, on 21–23 March.

This group reviewed existing evidence for the effectiveness of treatment approaches to tobacco dependence, with particular attention to their applicability in developing countries. It then outlined the framework for a policy statement that could be used by governments, international organizations such as WHO and UNICEF, national health care professionals around the world, and the general public, both users and non-users of tobacco. Some of the key points they felt should be included in the policy statement were the following.

- Tobacco use kills millions of persons each year. The disease and premature death associated with exposure to tobacco have an impact on communities and families worldwide. Although this epidemic is increasing, the trend can be reversed.
- For the majority of tobacco users, quitting is not simply a matter of choice. Tobacco products are highly addictive and are designed to undermine efforts to quit using them. However, safe and effective treatments exist which have been proven successful in helping smokers and other users overcome tobacco dependence.
- Abstinence from tobacco products and freedom from exposure to secondhand tobacco smoke are necessary for maximizing health and minimizing health risks.
- Cultural barriers limit tobacco users’ motivation and efforts to quit. Governments, health providers, and community leaders share responsibility for educating the public about the health risks, such as “low tar” cigarettes and tobacco use in general, for motivating those who need treatment to seek it, and for making such treatment available.

Perhaps the most important outcome of these discussions was the realization that the current trend towards increasing tobacco dependence can be reversed. Perhaps in later years this meeting will be seen as the starting point for a dramatic decline in the tobacco epidemic.

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