

# The global tobacco crisis

## ••• Tobacco – global agent of death

Although tobacco deaths rarely make headlines, tobacco kills one person every six seconds.<sup>1</sup> Tobacco kills a third to half of all people who use it,<sup>2</sup> on average 15 years prematurely.<sup>2,3,4</sup> Today, tobacco use causes 1 in 10 deaths among adults worldwide – more than five million people a year.<sup>1</sup> By 2030, unless urgent action is taken, tobacco's annual death toll will rise to more than eight million.<sup>1,5</sup>

If current trends continue unchecked, it is estimated that around 500 million people alive today will be killed by tobacco.<sup>6</sup> During this twenty-first century, tobacco could kill up to one billion people.<sup>7</sup> Most tobacco users will want to quit but will be unable to because of their dependence on a highly addictive substance.

Cigarettes and other smoked tobacco products rapidly deliver the addictive drug nicotine to the brain immediately after smokers inhale –

about as efficiently as an intravenous injection with a syringe.<sup>8</sup> The tobacco industry itself has referred to cigarettes as a “nicotine delivery device”.<sup>9</sup> But because the effects of smoked tobacco last only a few minutes, smokers experience withdrawal symptoms unless they continue to smoke.<sup>10</sup>

Although standard cigarettes are the most commonly used type of smoked tobacco, other smoked tobacco products, such as bidis, kreteks and shisha, are gaining popularity – often in the mistaken belief that they are less hazardous to health. However, all forms of tobacco are lethal.<sup>11</sup> Smoked tobacco in any form causes up to 90% of all lung cancers and is a significant risk factor for strokes and fatal heart attacks.<sup>12</sup>

Bidis, small hand-rolled cigarettes typically smoked in India and other South-East Asian countries, produce three times more carbon monoxide and nicotine and five times more tar



Let people know where you stand

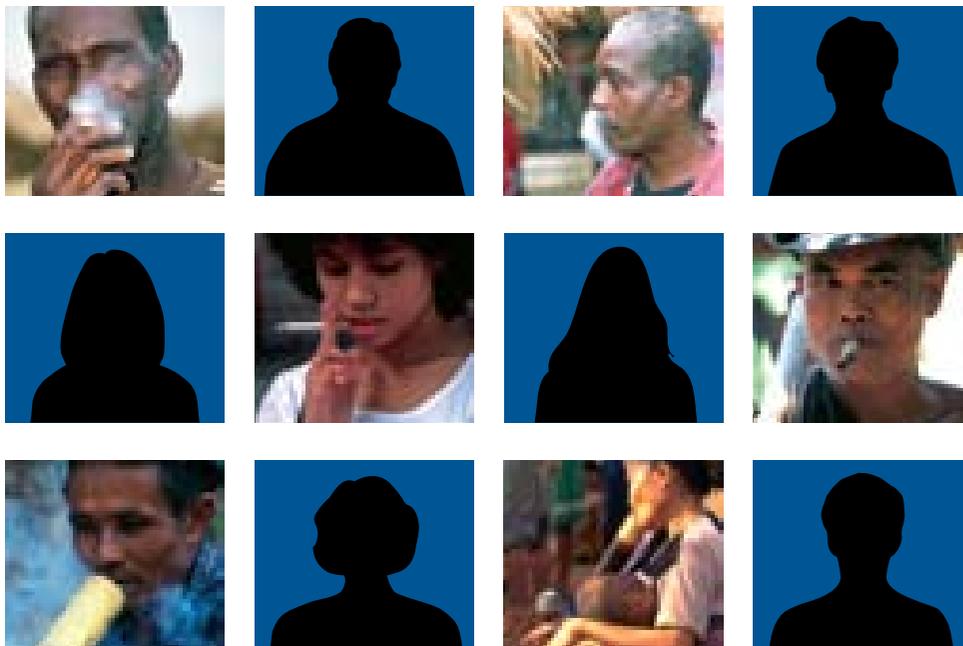
than regular cigarettes.<sup>13</sup> Bidi smokers have a three-fold higher risk of oral cancer compared with non-smokers and are also at increased risk of lung, stomach and oesophageal cancer. Kreteks, clove and tobacco cigarettes most commonly smoked in Indonesia, place smokers at increased risk of acute lung injury. Shisha, tobacco cured with flavourings and smoked from hookahs primarily in the Eastern Mediterranean region, is linked to lung disease, cardiovascular disease and cancer.<sup>11</sup>

Smokers are not the only ones sickened and killed by tobacco. Second-hand smoke also has serious and often fatal health consequences. In the United States, second-hand smoke causes about 3 400 lung cancer deaths and 46 000 heart disease deaths a year. Second-hand smoke is responsible in the United States for an estimated 430 cases of sudden infant death syndrome, 24 500 low-birth-weight babies, 71 900 pre-term deliveries and 200 000 episodes of childhood asthma annually.<sup>14</sup>

Smokeless tobacco is also highly addictive and causes cancer of the head and neck, oesophagus and pancreas, as well as many oral diseases.<sup>11,15</sup> There is evidence that some forms of smokeless tobacco may also increase the risk of heart disease and low-birth-weight babies.<sup>16</sup>

## TOBACCO KILLS UP TO ONE IN EVERY TWO USERS

Of the more than 1 billion smokers alive today, around 500 million will be killed by tobacco



**...tobacco is the only legally available consumer product which kills people when it is used entirely as intended.**

The Oxford Medical Companion (1994)

## A growing epidemic

Unless urgent action is taken, the number of smokers worldwide will continue to increase.<sup>17</sup> Unlike many other dangerous substances, for which the health impacts may be immediate, tobacco-related disease usually does not begin for years or decades after tobacco use starts. Because developing countries are still in the early stages of the tobacco epidemic, they have yet to experience the full impact of tobacco-related disease and death already evident in wealthier countries where tobacco use has been common for much of the past century.

Tobacco use is growing fastest in low-income countries, due to steady population growth coupled with tobacco industry targeting, ensuring that millions of people become fatally addicted each year. More than 80% of the world's tobacco-related deaths will be in low- and middle-income countries by 2030.<sup>1</sup>

As many as 100 million Chinese men currently under age 30 will die from tobacco use.<sup>18</sup> In India, about a quarter of deaths among middle-aged men are caused by smoking.<sup>19</sup> As the number of smokers in this group increases with population growth, so will the number of deaths. The shift of the tobacco epidemic to the developing world will lead to unprecedented levels of disease and early death in countries where population growth and the potential for increased tobacco use are highest and where health-care services are least available.

The rise in tobacco use among younger females in high-population countries is one of the most ominous potential developments of the epidemic's growth. In many countries, women have traditionally not used tobacco: women smoke at about one fourth the rate of men. Because most women currently do not use tobacco, the tobacco industry aggressively markets to them to tap this potential

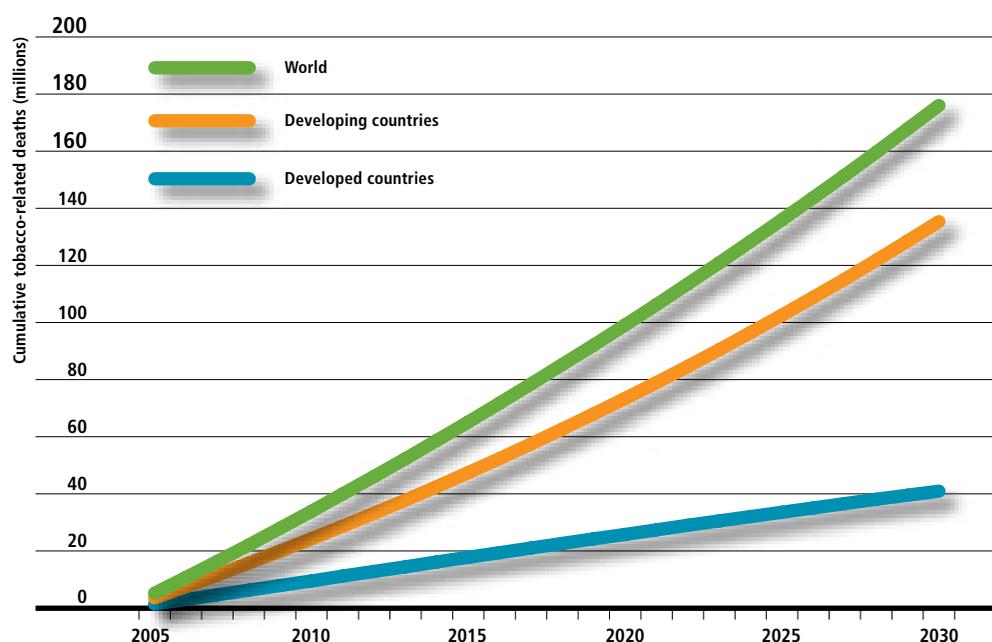


**Support a tobacco-free world**

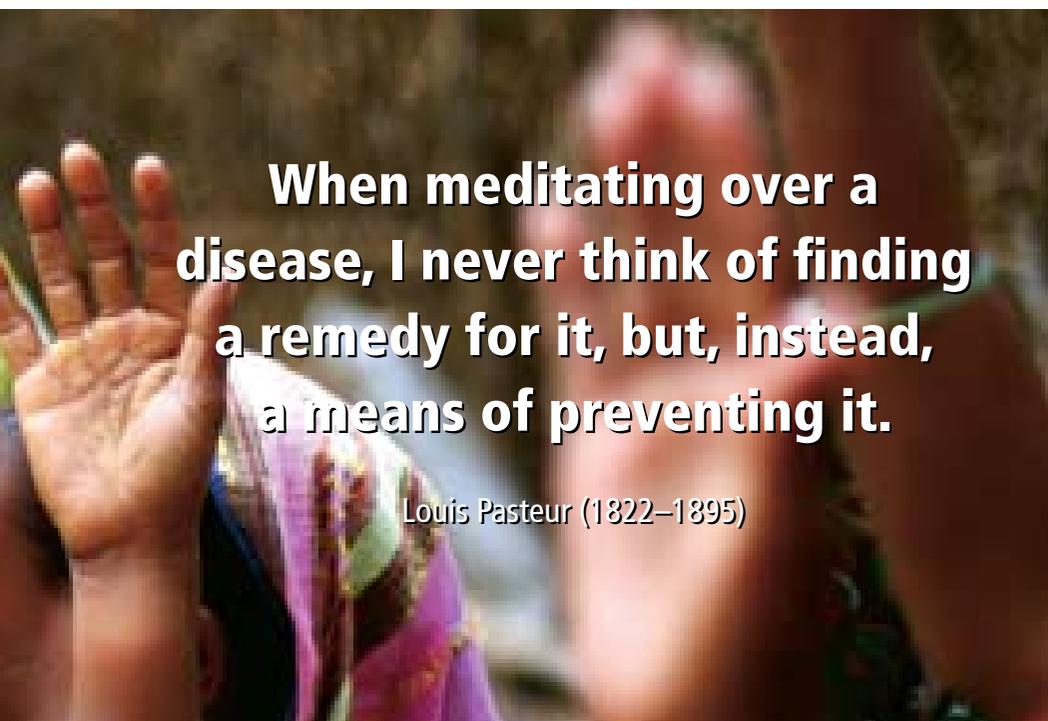
new market. Advertising, promotion and sponsorship, including charitable donations to women's causes, weaken cultural opposition to women using tobacco. Product design and marketing, including the use of attractive models in advertising and brands marketed specifically to women, are explicitly crafted to encourage women to smoke.

## TOBACCO WILL KILL OVER 175 MILLION PEOPLE WORLDWIDE BETWEEN NOW AND THE YEAR 2030

Cumulative tobacco-related deaths, 2005–2030



Source: Mathers CD, Loncar D. Projections of global mortality and burden of disease from 2002 to 2030. *PLoS Medicine*, 2006, 3(11):e442.



Throughout most of Europe, where modern tobacco use began a century ago, rates of tobacco use by males and females have been converging for decades. Today, tobacco use rates are decreasing among European men while they are increasing among women, particularly in eastern, central and southern Europe.<sup>20</sup> In most European Union countries, teenage girls are as likely to smoke as boys, if not more likely.<sup>21</sup> In the developing world, tobacco use rates for adult females remain relatively low, but could rise quickly among teenage females. In South-East Asia, the adult male smoking rate is ten times higher than the adult female rate.<sup>17</sup> Among 13–15-year-olds, however, the male smoking rate is only about two and a half times higher.<sup>21</sup>

The most affected regions of the world are also challenged by a much wider variety of smoked tobacco products, such as bidis, kreteks and shisha. Like cigarettes, these products are also deadly. But since they are a different form of tobacco, they often do not include the same warning labels, taxes and other restrictions placed on cigarettes. Not surprisingly, many people believe – wrongly – that they are less dangerous than cigarettes.

## The economic threat of tobacco

Although the tobacco industry claims it creates jobs and generates revenues that enhance local and national economies, the industry's overriding contribution to any country is suffering, disease, death – and economic losses. Tobacco use currently costs the world hundreds of billions of dollars each year.<sup>22</sup>

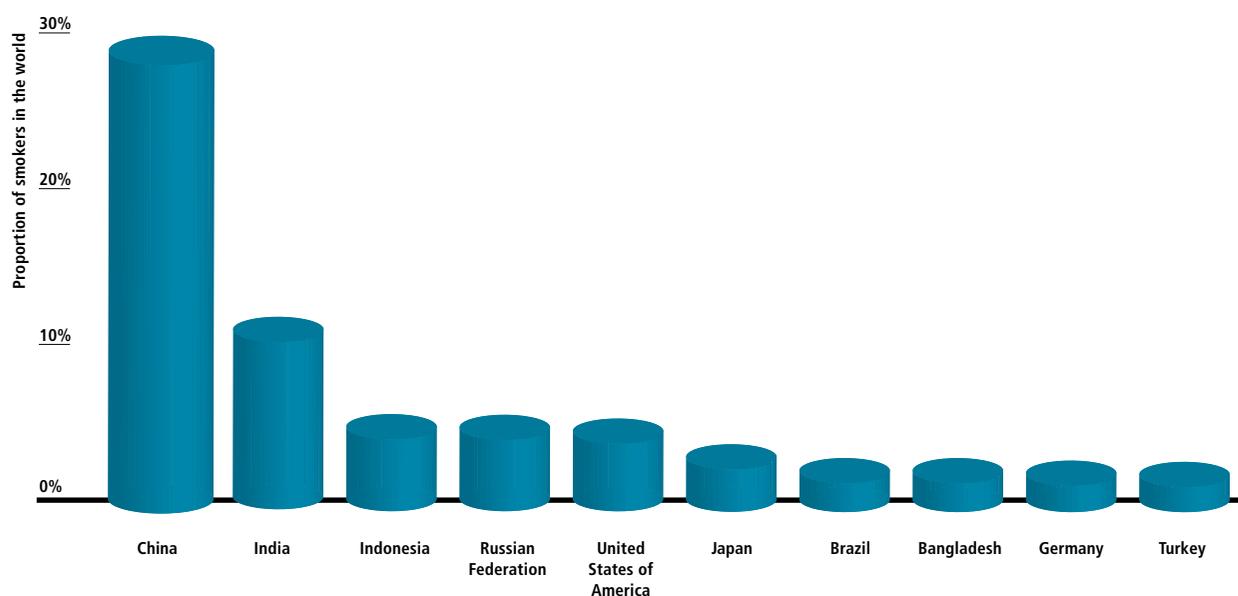
Tobacco-related deaths result in lost economic opportunities. In the United States, these losses are estimated at US\$ 92 billion a year.<sup>22,23</sup> Lost economic opportunities in highly populated, developing countries – many of which are manufacturing centres of the global economy – will be severe as the tobacco epidemic worsens, because half of all tobacco-related deaths occur during the prime productive years.<sup>22</sup> The economic cost of tobacco-related deaths imposes a particular burden on the developing world, where four out of five tobacco deaths will



**Help build a healthier future**

## NEARLY TWO THIRDS OF THE WORLD'S SMOKERS LIVE IN 10 COUNTRIES

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Source: The number of smokers per country was estimated using adjusted prevalence estimates (see Technical Note II and Appendix III). A limitation of this approach is that adjusted estimates used to estimate the number of smokers are sometimes derived from limited country data, and for some countries large adjustments are needed. In these cases the adjusted estimates can be different from actual surveys reported by countries. Brazil prevalence data were obtained from VIGITEL 2006.

**The failure to use available knowledge about chronic disease prevention and control endangers future generations.**

WHO Report 2005, Preventing chronic diseases: a vital investment

occur by 2030.<sup>1</sup> Data on tobacco's impact on global health-care costs are incomplete, but it is known to be high. In the United States, annual tobacco-related health-care costs are US\$ 81 billion, in Germany nearly US\$ 7 billion and in Australia US\$ 1 billion.<sup>22</sup>

The net economic effect of tobacco is to deepen poverty. The industry's business objective – to get more customers addicted – disproportionately hurts the poor. Tobacco use is higher among the poor than the rich in most countries, and the difference in tobacco use between poor and rich is greatest in regions where average income is among the lowest.<sup>24</sup>

For the poor, money spent on tobacco means money not spent on basic necessities such as food, shelter, education and health care. The poorest households in Bangladesh spend almost 10 times as much on tobacco as on education.<sup>25</sup> In Indonesia, where smoking is most common among the poor, the lowest income group spends 15% of its total expenditure on tobacco.<sup>26</sup> In Egypt, more than 10% of household expenditure in low-income homes is on tobacco.<sup>27</sup> The poorest 20% of households in Mexico spend nearly 11% of their household income on tobacco.<sup>28</sup> Medical

costs from smoking impoverish more than 50 million people in China.<sup>29</sup>

The poor are much more likely than the rich to become ill and die prematurely from tobacco-related illnesses. This creates greater economic hardship and perpetuates the circle of poverty and illness.<sup>30</sup> Early deaths of primary wage earners are especially catastrophic for poor families and communities. When, for example, a 45-year-old Bangladeshi man who heads a low-income household dies of cancer from a 35-year bidi habit, the survival of his entire family is at stake. His lost economic capacity is magnified as his spouse, children and other dependants sink deeper into poverty and government or extended family members must take on their support.

In addition to the health consequences of second-hand smoke, it is also a serious drain on economic resources. Second-hand smoke exposure in the United States alone costs an estimated US\$ 5 billion annually in direct medical costs and more than US\$ 5 billion more in indirect medical costs such as disability and lost wages.<sup>31</sup> In the Hong Kong Special Administrative Region of China, the cost of direct medical care, long-term care and

productivity losses due to second-hand smoke exposure is approximately US\$ 156 million annually.<sup>32</sup>

While more data and analysis are needed on tobacco's costs and economic burden, it is clear that its economic impact on productivity and health care – already disproportionately felt by the poor – will worsen as tobacco use increases. With the full onset of tobacco-related illness and death in the next few decades, the monetary costs of the epidemic will cause severe economic harm to low- and middle-income countries.



**MPOWER benefits all of society**

## The tobacco industry as disease vector

All epidemics have a means of contagion, a vector that spreads disease and death. For the tobacco epidemic, the vector is not a virus, bacterium or other microorganism – it is an industry and its business strategy.<sup>33</sup> The epidemic of tobacco use and disease as we know it today would not exist without the tobacco industry's marketing and promotion of its deadly products over the past century.

Tobacco companies have long targeted youth as “replacement smokers” to take the place of those who quit or die. The industry knows that addicting youth is its only hope for the future. Although anyone who uses tobacco can become addicted to nicotine, people who do not start smoking before age 21 are unlikely to ever begin. Adolescent experimentation with a highly addictive product aggressively pushed by the tobacco industry can easily lead to a lifetime of tobacco dependence. The younger children are when they first try smoking, the

more likely they are to become regular smokers and the less likely they are to quit.<sup>34,35,36,37,38</sup>

Worldwide, the tobacco industry spends tens of billions of dollars a year on marketing.<sup>39</sup> The global tobacco industry now exploits the developing world by using the same marketing and lobbying tactics perfected – and often outlawed – in the developed world. For example, in developing countries, the industry now targets women and teens to use tobacco while pressuring governments to block marketing restrictions and tax increases – the same tactics it has used for decades in developed countries.

Because of an addicted customer base and high profit margins, tobacco companies are flush with cash, resulting in a major push to exploit markets in the developing world. One of the world's largest tobacco companies is in the process of divesting its international



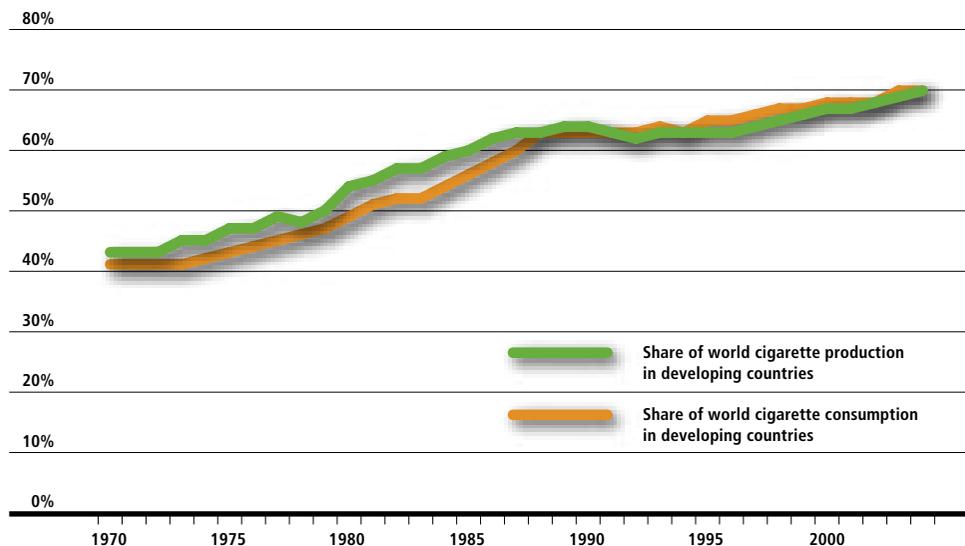
**It is mind-boggling that a product as destructive to the human body as the cigarette remains almost completely unregulated to protect health and safety.**

Matthew L. Myers, President, Campaign for Tobacco-Free Kids

cigarette business from its US-based business. This provides the company with protection from legal and public relations problems in the US.<sup>40</sup> Joint ventures and mergers among multinationals and locally and state-owned companies are common as large companies seek to expand their markets worldwide. In recent years, global tobacco giants have bought majority stakes in tobacco companies in the Dominican Republic, Indonesia, Mexico and Pakistan, among other countries, to boost sales and use in the developing world.<sup>41,42, 43,44</sup>

## A SHIFTING EPIDEMIC THE TOBACCO INDUSTRY REACHES NEW MARKETS IN DEVELOPING COUNTRIES

### Share of cigarette production and consumption in developing countries



Source: Based on data from Food and Agriculture Organization FAOSTAT, United Nations Commodity Trade Statistics Database, United Nations Common Database, United States Department of Agriculture Economic Research Service, World Health Organization Statistical Information System, and ERC Group Plc.'s World Cigarettes Report 2005

## SUMMARY

Although the global tobacco epidemic threatens more lives than any infectious disease, the solution to it does not require the discovery of a

breakthrough cure or vaccination. Instead, this epidemic can be solved through implementation of proven public policies. Government leaders

hold the cure for the tobacco epidemic. The actions they need to take to protect their people are outlined in the next section.



**Governments and civil society must take action now**