

## Tobacco Free Life – A Step towards Cleaner and Healthier India

- According to the Global Adult Tobacco Survey (GATS) 2016-17, the prevalence of tobacco usage in India is about 28.6% in adult population
- India is the second largest producer and consumer of the tobacco
- Indian population has more inclination towards the use of smokeless tobacco products

### TYPES OF TOBACCO PRODUCTS USED IN INDIA

**Cigarette smoking** is common in urban areas. Both locally manufactured and imported brands of cigarettes are available.

**Beedi** is a cheap smoking stick, handmade by rolling a dried, rectangular piece of temburni leaf

**Hooka** (a hubble bubble Indian pipe) is an indigenous device, made out of wooden and metallic pipes, used for smoking tobacco.

**Hookli** is a short clay pipe-like device, being about 7 cm long, and is used for smoking tobacco in some parts of the country.

**Chhutta** is a coarsely prepared roll of tobacco (cheroot), smoked with the burning end inside the mouth (reverse chhutta smoking). Its use is prevalent in coastal areas of the province of Andhra Pradesh in south-eastern India.

**Dhumti** is a cigar-like product made by rolling tobacco leaves inside the leaf of jackfruit tree. popular in the Goa province of the Western India.

**Chillum** is a conical clay-pipe of about 10 cm long. The narrow end is put inside the mouth, often wrapped in a wet cloth that acts as a filter. This is used to smoke tobacco alone or tobacco mixed with ganja (marijuana) in northern parts of the country.

#### Smokeless tobacco use

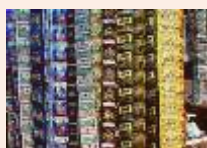
Tobacco is used in a number of smokeless forms in India, which include betel quid chewing, mishri, khaini, gutka, snuff, and as an ingredient of pan masala.

**Betel quid** is a combination of betel leaf, areca nut, slaked lime, tobacco, catechu and condiments according to individual preferences. Tobacco is an optional component. Its use is prevalent all over India. However, there are differences in the components used in different regions of India.

**Khaini** consists of roasted tobacco flakes mixed with slaked lime. Its use is common in eastern India.

**Mawa** is a mixture of areca nut, tobacco and slaked lime and is chewed. Its use is common in rural areas of Gujarat province. It is quite popular among the young population of ages.

**Snuff** is a black-brown powder obtained from tobacco through roasting and pulverization. Snuff is used via nasal insufflation and is popular in eastern parts of the country.





**Gutkha** is a manufactured smokeless tobacco product (MSTP), a mixture of areca nut, tobacco and some condiments, marketed in different flavours in colourful pouches.

**Pan masala** is a betel quid mixture, which contains areca nut and some condiments, but may or may not contain tobacco. The mixture is chewed and sucked.

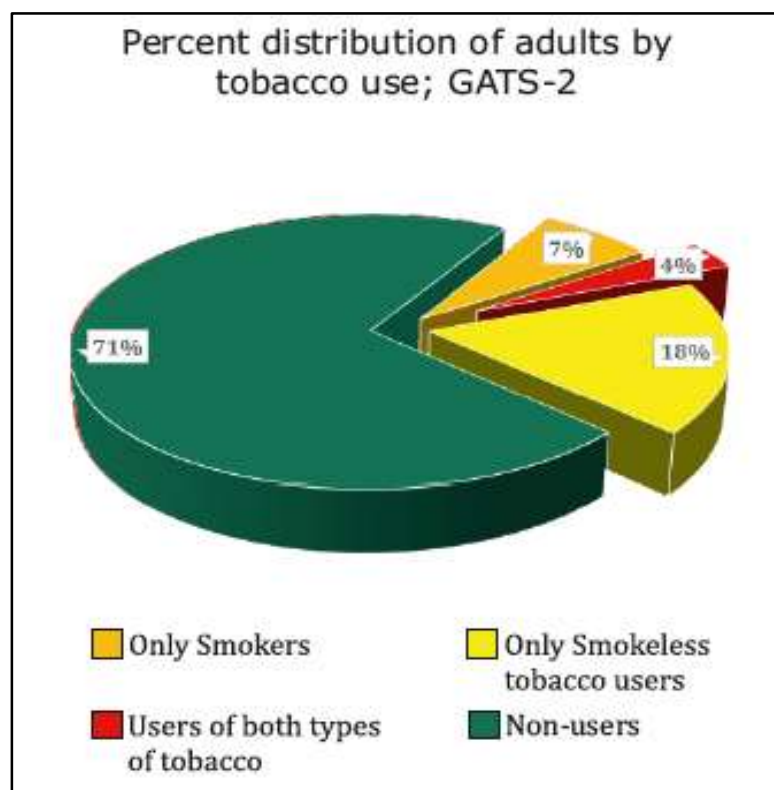
**Tobacco Water (Tuibur)** – Tobacco water has been part of various North Eastern tribes of India. In Mizo society, tobacco water is served to visitors as a part of their social customs. The pipe is made of clay, and is fitted with a bamboo receptacle for water to get impregnated with the fumes of the smoke and the oil of the tobacco, then sipped from time to time through gourds or bamboo tubes and kept in the mouth of the smokers for few seconds before spitting it out. Long term users of tuibur have shown higher prevalence of stomach cancer.



Image credits – [www.google.co.in](http://www.google.co.in)

## DETAILS OF INDIANS USING TOBACCO

- Male predominance (42.4%)
- Inclination towards smokeless tobacco
- Average Monthly expenditure by an Indian on Cigarette smoking ₹1192.5
- Average Monthly expenditure by an Indian on bidi smoking ₹284.1
- Average amount spent on a smokeless tobacco purchase ₹12.8
- 38% of current tobacco smokers in India attempted to quit and 35% of current smokeless tobacco (GATS 2016-17)



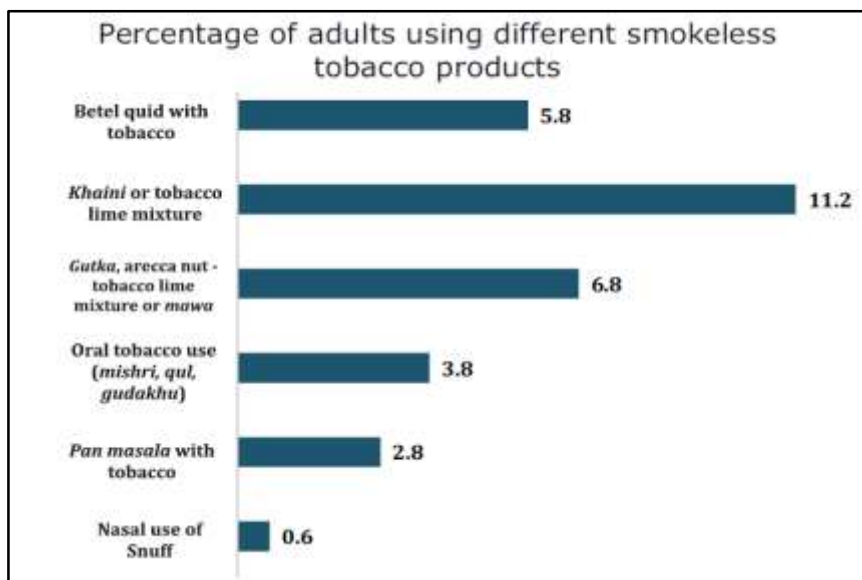


Image Courtesy – <https://mohfw.gov.in/sites/default/files/GATS-2%20FactSheet.pdf>

### TOBACCO PROBLEM IN YOUNG ADOLESCENTS

- According to survey done by National Sample Survey, about 20 million children age 10-14 are estimated to be tobacco- addicted.
- Approximately 5500 children and adolescents start using tobacco products daily in India.
- In India the prevalence of tobacco usage is very low among girls (1.1%) while for boys the ever smokers constituted 86%.
- The higher prevalence in boys is influenced by fathers smoking habit, peer pressure.
- Most of the young population in India is well informed about the general harmfulness of tobacco usage, but they lacked knowledge on specific health hazards

When we associate the tobacco habit with young children and adolescents, there are many social and psychological factors that influence use of tobacco

- *Peer Influence* – Many children start smoking for reasons like curiosity, desire for experimentation, or a remedy for stress and these early experimenters play a key role in motivating their peers to follow the trend
- *Easy Availability of tobacco products* – Tobacco products can be brought from every nook and corner throughout the country and there is always a cheaper alternative available
- *Promotion by tobacco companies* - Advertisements of various tobacco products are very common in all forms of media including the print media, television, and the roadside hoardings and banners. Tobacco advertising and promotion effectively target the young people with images of smokers as trendy, sporty and successful.

### HARMFUL EFFECTS OF TOBACCO:

**Tobacco in any form (smoke, smokeless) in any concentration (filtered, mild, ultra-mild) is harmful to the body:**

*Some people believe that smoking 'light' or 'low tar' cigarettes is less harmful than regular cigarettes. However, there is little difference between the amount of chemicals inhaled by people who smoke 'light' cigarettes and those who smoke regular ones.*

The picture below depicts the various ill effects of tobacco on different organs and systems of the body

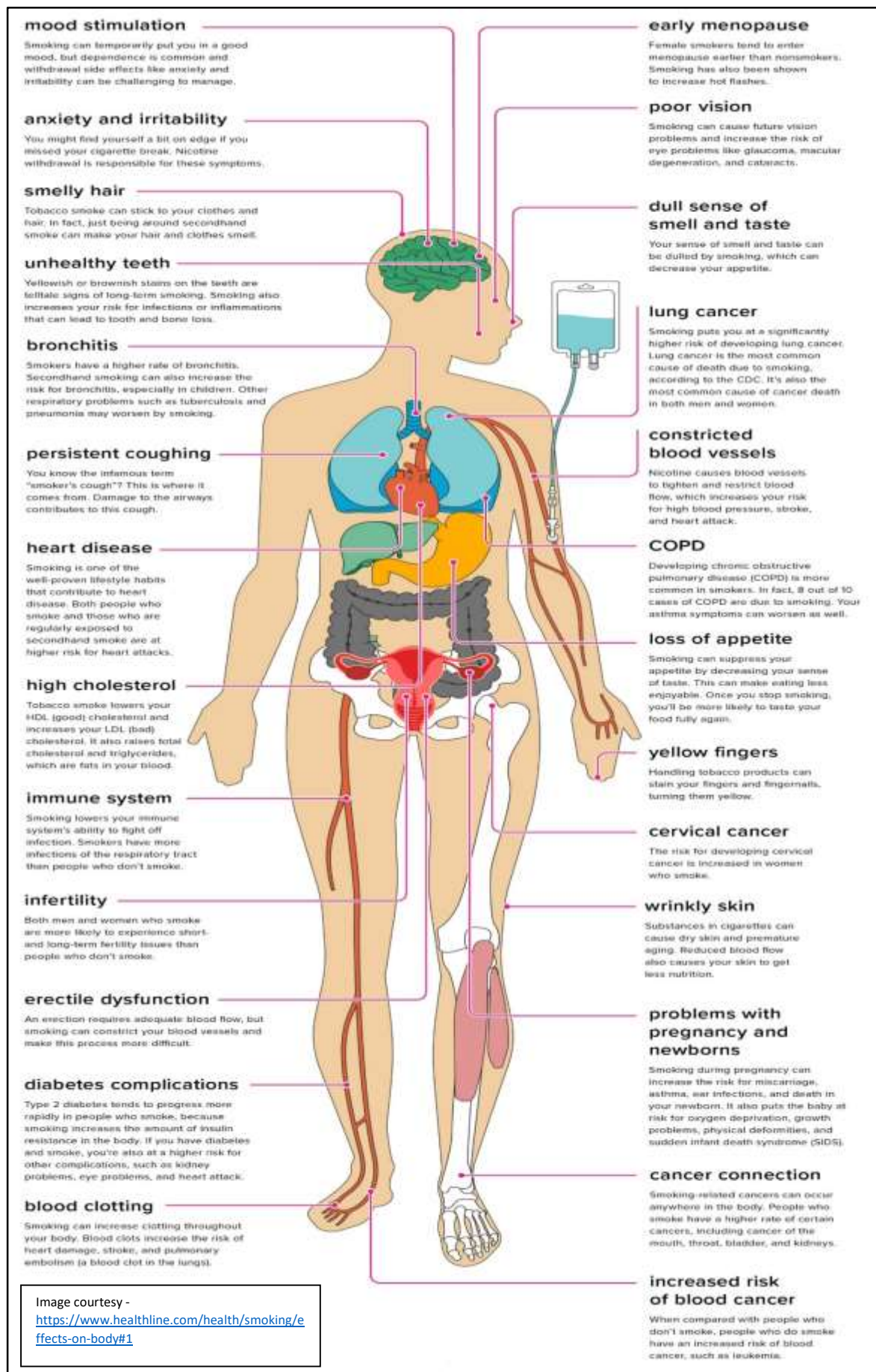


Image courtesy - <https://www.healthline.com/health/smoking/effects-on-body#1>

## Tobacco and Non Communicable diseases (NCDs)

- By 2030 NCDs are projected to account for 75% of deaths worldwide
- Tobacco use is the single largest preventable cause of NCDs
- Smoking tobacco cause lung cancer, cancers of throat as well cancer in diverse sites like bladder, kidney, stomach and uterine cervix
- Smokeless tobacco causes oral cancer, hypertension, heart diseases, oral sub mucous fibrosis
- Smoking increases the risk of heart disease and stroke by several folds
- Smoking is an independent risk factor for diabetes, cardiovascular diseases, chronic obstructive pulmonary diseases, ischemic heart disease.
- The data from National Cancer Registry in India shows that, cancer of lung, mouth, lip, tongue, oropharynx, hypopharynx, pharynx, larynx, and urinary bladder are common cancer sites specific to tobacco use.
- Lung cancer is the most common followed by oesophagus and mouth across both the genders

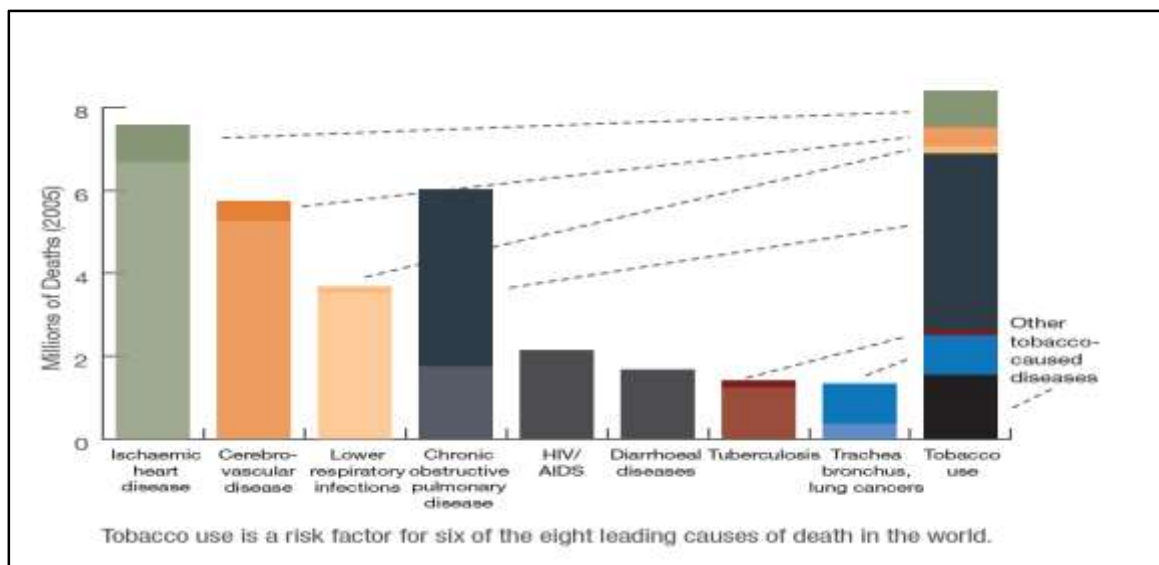
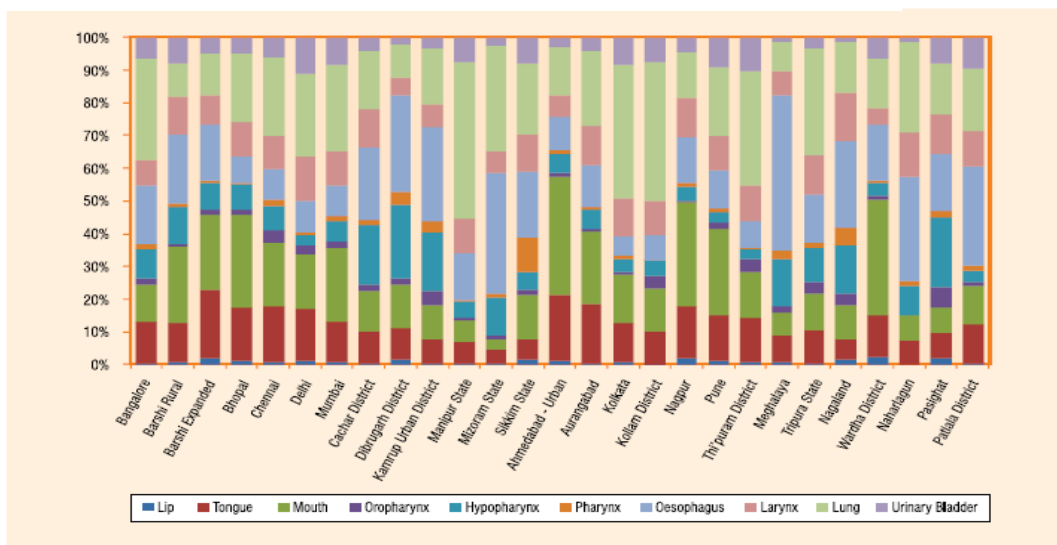


Image courtesy - [http://www.fctc.org/images/stories/NCDs\\_and\\_tobacco\\_Health.pdf](http://www.fctc.org/images/stories/NCDs_and_tobacco_Health.pdf)

Proportion of tobacco specific cancer sites prevalent amongst males in different parts of India



Proportion of tobacco specific cancer sites prevalent amongst females in different parts of India

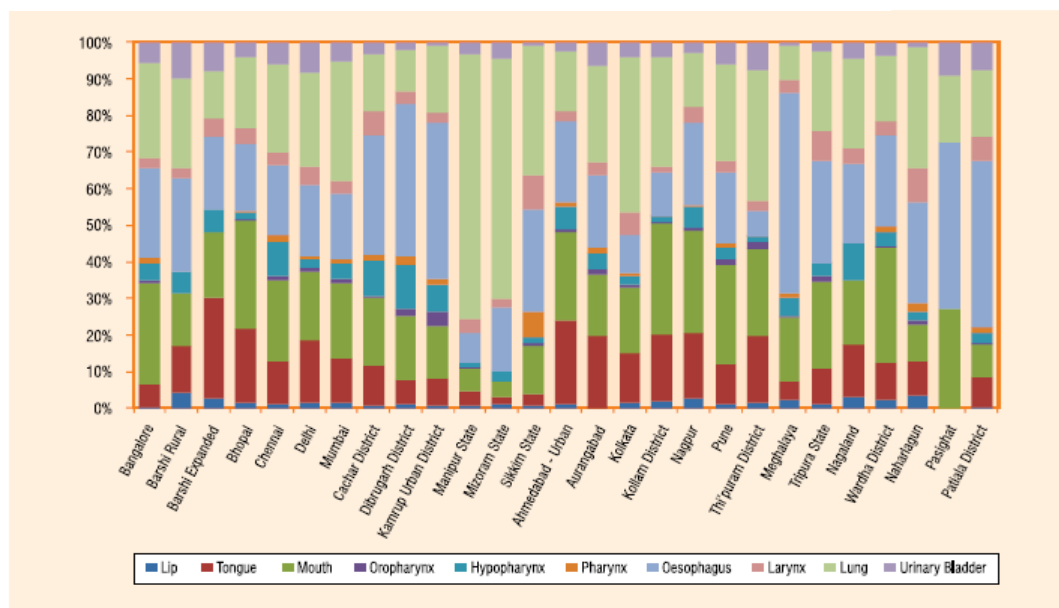


Image courtesy [http://ncdirindia.org/NCRP/ALL\\_NCRP\\_REPORTS/PBCR\\_REPORT\\_2012\\_2014/ALL\\_CONTENT/PDF\\_Printed\\_Version/Chapter3\\_Printed.pdf](http://ncdirindia.org/NCRP/ALL_NCRP_REPORTS/PBCR_REPORT_2012_2014/ALL_CONTENT/PDF_Printed_Version/Chapter3_Printed.pdf)

### PLAN TO QUIT TOBACCO?

- If you are planning to quit your tobacco habit or ever tried of quitting and failed, the you can call 011-22901701 or register yourself at <https://www.nhp.gov.in/quit-tobacco> for **mCessation Programme**.
- mCessation Programme is a mobile based initiative using technology for tobacco cessation.
- The programme is developed by “Centre for Addiction Medicine, National Institute of Mental Health and Neuro Sciences (NIMHANS), Bangalore” with partnership of Ministry of Health and Family Welfare, Government of India, World Health Organization and the International Telecommunications Union.
- The initiative, aims to reach out to tobacco users of all categories who want to quit tobacco use and support them towards successful quitting through constant text messaging on mobile phones.

For More information log on to <https://www.nhp.gov.in/quit-tobacco>