Heart disease and stroke are the commonest ways by which tobacco kills people

QUIT TOBACCO USE NOW - FOR A HEALTHIER HEART

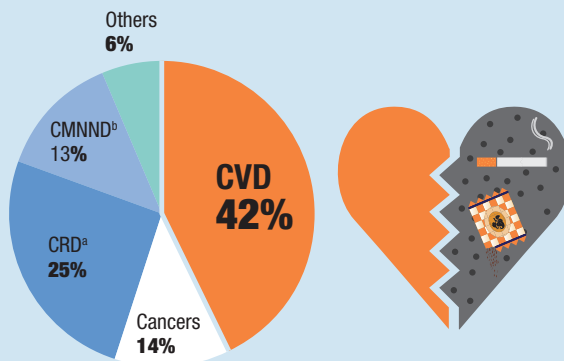| Gross national income per capita (lower middle-income country)	Total population	Youth population (13–17 years)	Economically productive population (30–69 years)
US$ 2510	808 000	73 000 = 9%	332 000 = 41%

Tobacco[1] kills estimated
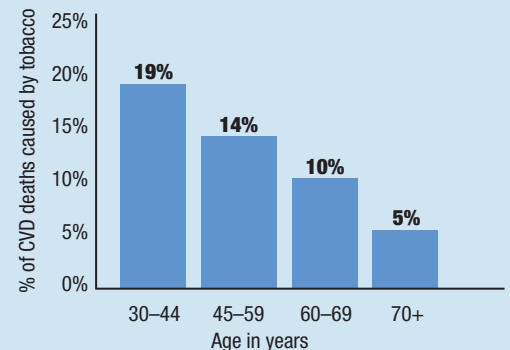**221**
people each year
5.7%
of all deaths

The most common way tobacco kills is from cardiovascular diseases (CVDs)[2]

Distribution of tobacco deaths by cause

- Others 6%
- CMNND[b] 13%
- CRD[a] 25%
- CVD 42%
- Cancers 14%

CVDs in younger people are more likely to be caused by tobacco use

% of CVD deaths caused by tobacco

- 30–44: 19%
- 45–59: 14%
- 60–69: 10%
- 70+: 5%

Age in years

CVDs are the number one cause of death, causing 1 141 (29.4%) (29.4% of all deaths), as well as of premature death

Top 5 causes of overall death
1. Ischemic heart disease
2. Chronic Obstructive pulmonary disease
3. Cerebrovascular disease
4. Lower respiratory infection
5. Diabetes

Top 5 causes of premature death (YLL–years of life lost)
1. Ischemic heart disease
2. Lower respiratory infection
3. Neonatal preterm birth
4. Cerebrovascular disease
5. Other neonatal

- ● Noncommunicable diseases
- ● Communicable, maternal, neonatal, and nutritional diseases

CVD deaths caused by tobacco use
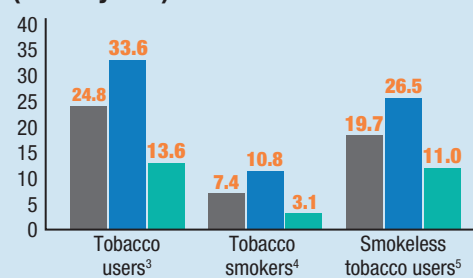**92 deaths**
8% of all CVD deaths each year

Tobacco control is essential for preventing and controlling deaths and disability caused by CVDs
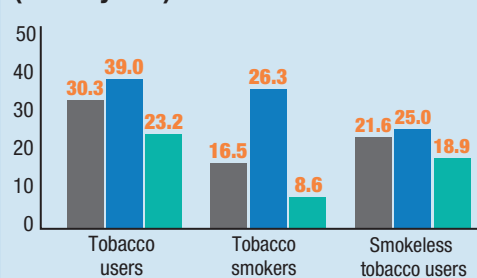

More than 120 000 current tobacco users and a substantial number of people exposed to secondhand smoke are at increased risk of CVDs
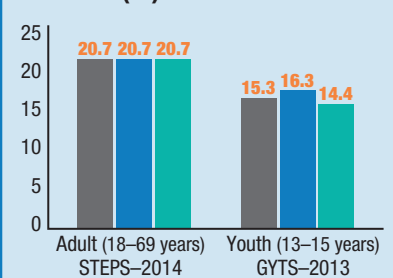
Current tobacco use among adults (%) (18–69 years) STEPS–2014

	Total	Male	Female
Tobacco users[3]	24.8	33.6	13.6
Tobacco smokers[4]	7.4	10.8	3.1
Smokeless tobacco users[5]	19.7	26.5	11.0

Current tobacco use among youth (%) (13–15 years) GYTS–2013

	Total	Male	Female
Tobacco users	30.3	39.0	23.2
Tobacco smokers	16.5	26.3	8.6
Smokeless tobacco users	21.6	25.0	18.9

Exposed to secondhand[6] smoke at home (%)

	Total	Male	Female
Adult (18–69 years) STEPS–2014	20.7	20.7	20.7
Youth (13–15 years) GYTS–2013	15.3	16.3	14.4

- ● Total
- ● Male
- ● Female

Most people start early, increasing the risk of heart disease in younger people

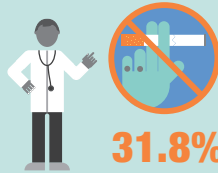**Mean age at initiation of daily smoking: 18.9 years**

Despite strong evidence that quitting both smoked and smokeless tobacco helps to immediately reduce the risk of CVDs, FEW tobacco users are quitting, requiring more programmatic effort

Quit attempt by current smokers [7]	Users advised to quit tobacco smoking by healthcare provider [8]	People who quit tobacco use
69.0%	**31.8%**	Former daily smokers [9] **75.7%** Former daily smokeless users [10] **38.4%**

Preventing and controlling sickness, death and disability from cardiovascular diseases

Help current tobacco users to quit tobacco for a healthier heart:

- Quitting immediately reduces the risk of heart attack and/or stroke;
- Quitting helps even if a person has already had a heart attack and/or stroke, irrespective of his/her age;
- Train health providers to ask about tobacco use at each encounter with their patients and advise them to quit.

Prevent people from starting tobacco use:

- Tobacco use starts early;
- Prevent them from starting tobacco use by fully implementing WHO Framework Convention on Tobacco Control: raising taxes; informing people of tobacco risk through tobacco package warnings and information campaigns; and imposing a comprehensive ban on tobacco advertising and promotion in any form.

Combine tobacco control with the following strategies for effective prevention of CVDs:

- Help people to reduce salt, sugar, tans-fat in their diet, reduce harmful use of alcohol and create opportunities for regular physical activity;
- Provide early screening and effective treatment for raised blood pressure and raised blood sugar levels.

Technical notes and key definitions:

1 Tobacco use includes use of both smoked *(cigarette, bidi, cigars, cheroots, cigarillos)* and smokeless *(snuff, chewing tobacco, betel quid).*

2 Cardiovascular diseases include all the diseases of the heart and circulation such as coronary heart disease, angina, heart attacks and stroke (cerebrovascular disease).

3 Current tobacco user is defined as a person reporting use of any smoked or smokeless tobacco product daily or less than daily at the time of survey.

4 Current tobacco smoker is a person who reports smoking any tobacco product on a daily or less-than-daily basis at the time of survey at the time of survey.

5 Smokeless tobacco user is a person who reports the use of any smokeless tobacco product on a daily or less-than-daily basis at the time of survey.

6 A person passively exposed to tobacco smoke from other people using it around him/her.

7 Among current smokers and former smokers who have been abstinent for less than 12 months in the past 12 months.

8 Among those smokers who visited a healthcare provider in the past 12 months.

9 Among ever daily smokers, also known as quit ratio for daily smoking.

10 Among ever daily smokeless users, also known as quit ratio for daily smokeless users.

a. CRD – chronic respiratory diseases; **b.** CMNND – communicable, maternal, neonatal, and nutritional diseases
GATS – Global Adult Tobacco Survey; GYTS – Global Youth Tobacco Survey; STEPS – WHO STEPwise approach to noncommunicable disease risk factor surveillance

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Sources of data:

1. *Total population, youth population and population in economically productive age group:* United Nations, Department of Economic and Social Affairs, Population Division. World population prospects: the 2017 revision (for the reference date as of 1 July 2017). New York: United Nations; 2017.

2. *Gross national income per capita 2016 (by Atlas method) and current country economic classification:* World Bank, 2017. (http://data.worldbank.org/data-catalog/world-development-indicators, accessed 7 May 2018)

3. *Data on total and proportional deaths from CVDs, tobacco use and proportion of total tobacco deaths due to CVDs:* Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2016 (GBD 2016) Results. Seattle, United States: Institute for Health Metrics and Evaluation (IHME): 2017(http://ghdx.healthdata.org/gbd-results-tool, accessed 7 May 2018).

4. *Adult tobacco use prevalence; secondhand tobacco exposure; mean age at initiation of tobacco use, quitting rates:* National survey for noncommunicable diseases risk factors and mental health using WHO STEPS approach in Bhutan 2014 (http://www.who.int/ncds/surveillance/steps/bhutan) accessed on 7 May 2018.

5. *Youth tobacco use prevalence and secondhand exposure among 13 –15 year old population:* Global Youth Tobacco Survey (GYTS–2013) http://www.searo.who.int/entity/noncommunicable_ diseases/data/bhu_ncd_reports accessed on 7 May 2018.

Key references:

1. United States Department of Health and Human Services. The health consequences of smoking: 50 years of progress: a report of the Surgeon General. Atlanta, GA: United States Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; 2014.

2. Catlin MC, Deng R, Martinez RS, Sharma R, Grossblatt N. Secondhand smoke exposure and cardiovascular effects: making sense of the evidence. Washington (DC): Institute of Medicine of the National Academies; 2009.

3. Gupta R, Gupta S, Sharma S, Sinha DN, Mehrotra R. Risk of coronary heart disease among smokeless tobacco users: results of systematic review and meta-analysis of global data. Nicotine Tob Res. 2018 [e-pub ahead of print]