



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)

US\$ 3400

Total population

264.0 million

Youth population
(13–17 years)

23.4 million = 9%

Economically productive
population (30–69 years)

117.3 million = 44%

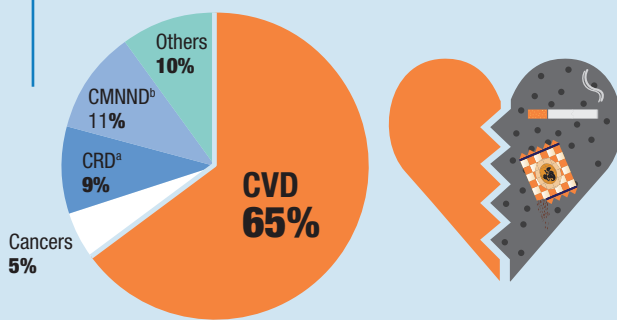
Tobacco¹ kills

225 720
people each year

14.7%
of all deaths

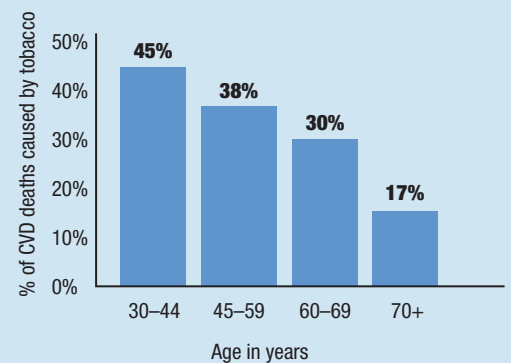


The most common way tobacco kills is
from cardiovascular diseases (CVDs)²



Distribution of tobacco deaths by cause

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



CVDs are the number one cause of death, causing **558 736** each year
(36.3% of all deaths), as well as of premature death

Top 5 causes of overall death

- 1 Ischemic heart disease
- 2 Cerebrovascular disease
- 3 Tuberculosis
- 4 Diabetes
- 5 Chronic obstructive pulmonary disease

Top 5 causes of premature death
(YLL—years of life lost)

- 1 Ischemic heart disease
- 2 Cerebrovascular disease
- 3 Tuberculosis
- 4 Diabetes
- 5 Neonatal preterm birth

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

CVD deaths caused by tobacco use

147 510 deaths

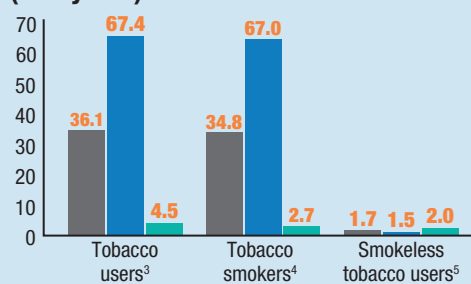
26% of all CVD deaths each year



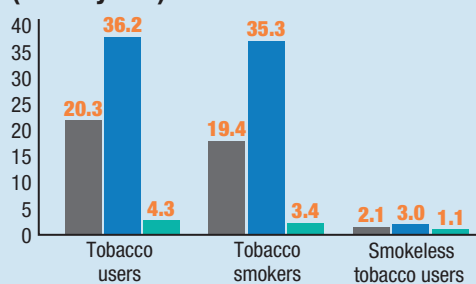
Tobacco control is essential for
preventing and controlling deaths
and disability caused by CVDs

61.4 m current tobacco users and a substantial number of people exposed to secondhand smoke are at increased risk of CVDs

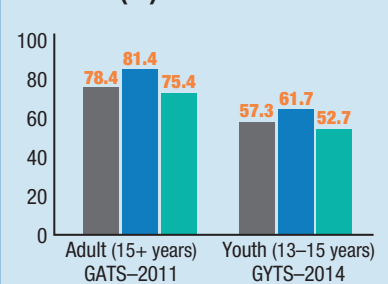
Current tobacco use among adults (%)
(15+ years) GATS–2011



Current tobacco use among youth (%)
(13–15 years) GYTS–2014



Exposed to secondhand⁶ smoke
at home (%)



● Total ● Male ● Female



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

Mean age at initiation of daily smoking: **17.6** years

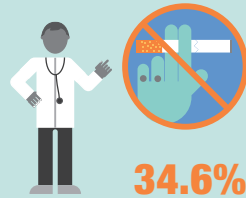
Despite strong evidence that quitting both smoked and smokeless tobacco helps to immediately reduce the risk of CVDs, FEW tobacco users are quitting, requiring more programmatic effort

Quit attempt by current smokers ⁷



30.4%

Users advised to quit tobacco smoking by healthcare provider ⁸



34.6%

People who quit tobacco use (former daily smokers⁹)



9.5%

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, trans-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 (*cigarettes, kretek, cigars, pipes*) and smokeless (*sirih, betel quid, tobacco leaf, tobacco leaf and betel nut mixture*).
 - 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.
 - 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

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; mean age at initiation of tobacco use, tobacco quitting, and secondhand exposure for adults data : Global Adult Tobacco Survey (GATS, 2011)* (http://www.searo.who.int/tobacco/data/ino_rtc_reports, accessed 7 May 2018).
5. *Youth tobacco use prevalence and secondhand exposure among 13–15 year old population*: Global Youth Tobacco survey (2014) (http://www.searo.who.int/tobacco/data/ino_rtc_reports, accessed 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]

For more information refer to Website <http://www.searo.who.int/nts>

For technical information, please contact: Dr Manju Rani, Regional Adviser, NCD and Tobacco Surveillance, Email: ranim@who.int; Mr Naveen Agarwal, Surveillance Management Associate, Email: agarwaln@who.int