



## 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\$ 3780**

Total population

**20.9 million**

Youth population  
(13–17 years)

**1.7 million = 8%**

Economically productive  
population (30–69 years)

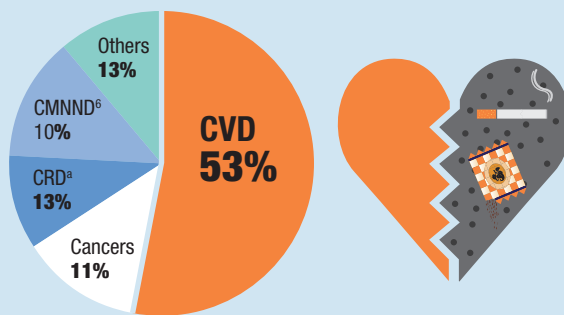
**10.1 million = 48%**

Tobacco<sup>1</sup> kills  
**12 351**  
people each year

**10%**  
of all deaths

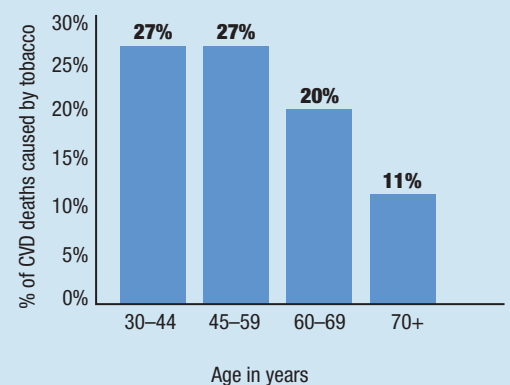


The most common way tobacco kills is  
from cardiovascular diseases (CVDs)<sup>2</sup>



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 **42 376** each year  
(34.5% of all deaths), as well as of premature death

Top 5 causes of overall death

- 1 Ischemic heart disease
- 2 Cerebrovascular disease
- 3 Diabetes
- 4 Alzheimer disease
- 5 Asthma

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

- 1 Ischemic heart disease
- 2 Self-harm
- 3 Diabetes
- 4 Cerebrovascular disease
- 5 Road injuries

● Noncommunicable diseases ● Injuries

CVD deaths caused by tobacco use

**6 530 deaths**

**15%** of all CVD deaths each year

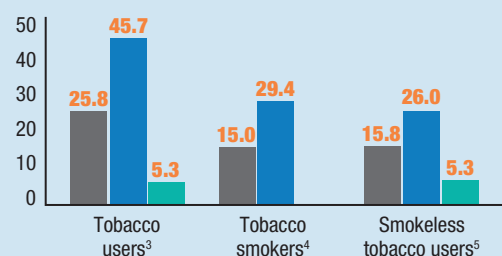


Tobacco control is essential for  
preventing and controlling deaths  
and disability caused by CVDs

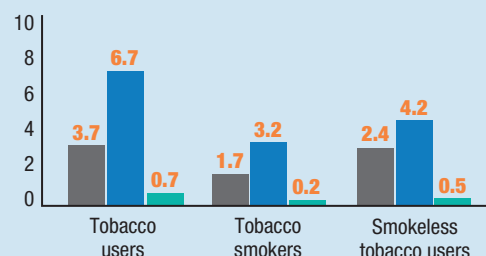
**2.1m**

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

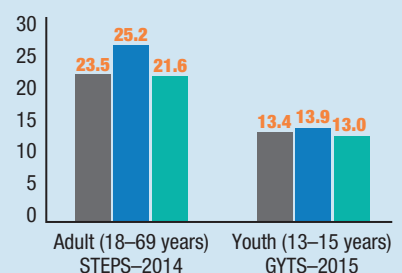
Current tobacco use among adults (%)  
(18–69 years) STEPS–2014



Current tobacco use among youth (%)  
(13–15 years) GYTS–2015



Exposed to secondhand<sup>6</sup> 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: **20.6 years**

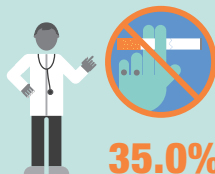
**Despite strong evidence that quitting both smoked and smokeless tobacco helps to immediately reduce the risk of CVDs, FEW tobacco users are quitting, requiring more programmatic effort**

**Quit attempt by current smokers <sup>7</sup>**



**51.8%**

**Users advised to quit tobacco smoking by healthcare provider <sup>8</sup>**



**35.0%**

**People who quit tobacco use**



**Former daily smokers <sup>9</sup>**

**34.4%**



**Former daily smokeless users <sup>10</sup>**

**16.0%**

## 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 (*cigarette, bidi, cigars, pipes*) and smokeless (*chewing tobacco, betel with tobacco, babul, snuff*).
- 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*: Noncommunicable disease risk factor survey Sri Lanka 2015, (<http://www.who.int/ncds/surveillance/steps/STEPS-report-2015-Sri-Lanka.pdf> accessed 7 May 2018).
5. *Youth tobacco use prevalence and exposure to secondhand smoke*: Global Youth Tobacco Survey (GYTS, 2015): [http://www.searo.who.int/tobacco/data/srl\\_rtc\\_reports](http://www.searo.who.int/tobacco/data/srl_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>

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