

Global Tobacco Use: Current Status and Future Challenges

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A decorative graphic consisting of several sets of concentric circles, resembling ripples in water, is positioned in the bottom right corner of the slide. The circles are light blue and vary in size and opacity, creating a subtle background element.

Preaching to the Converted



Singing to the Choir



Carrying Coals to Newcastle



“...With respect to modifiable risk factors for cancer, there is a consensus that tobacco use remains, by far, the most important at a global level”

Varmus and Kumar, 2013

A decorative graphic consisting of several sets of concentric circles in a lighter shade of blue, scattered across the bottom half of the slide.

“...It is easy to lose sight of the role that research has played in bringing international tobacco control to the fore.”

Ken Warner, 2005

A decorative graphic consisting of several sets of concentric circles, resembling ripples in water, located in the bottom right corner of the slide.





*The Disease
Consequences of
Tobacco Use Are
Universal*



FORMS of TOBACCO

- Cigarettes
- Smokeless tobacco (chewing tobacco, oral snuff)
- Pipes
- Cigars
- Clove cigarettes
- Bidis
- Hookah (waterpipe smoking)
- Electronic cigarettes (“e-cigarettes”)*



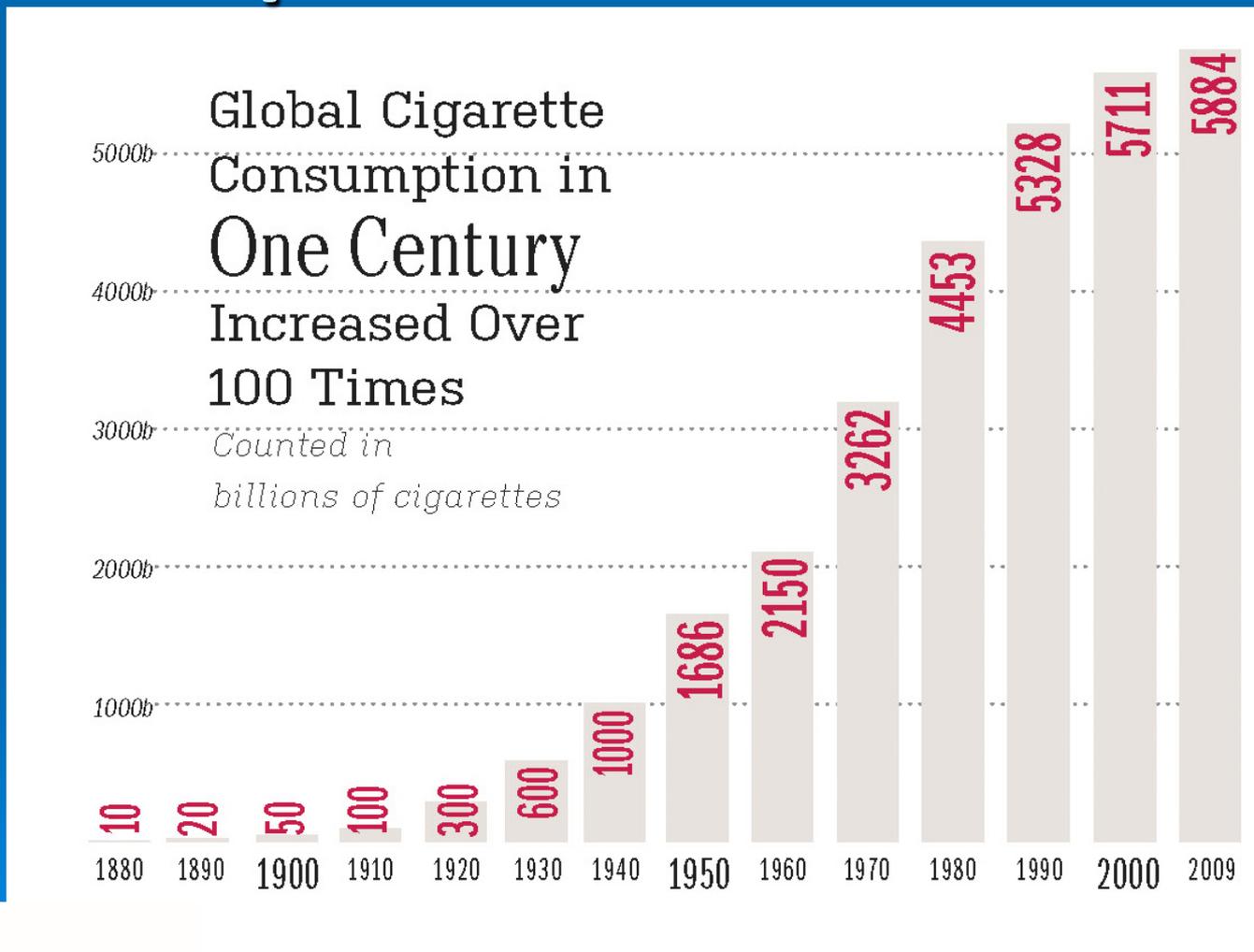
Global Smoking Prevalence



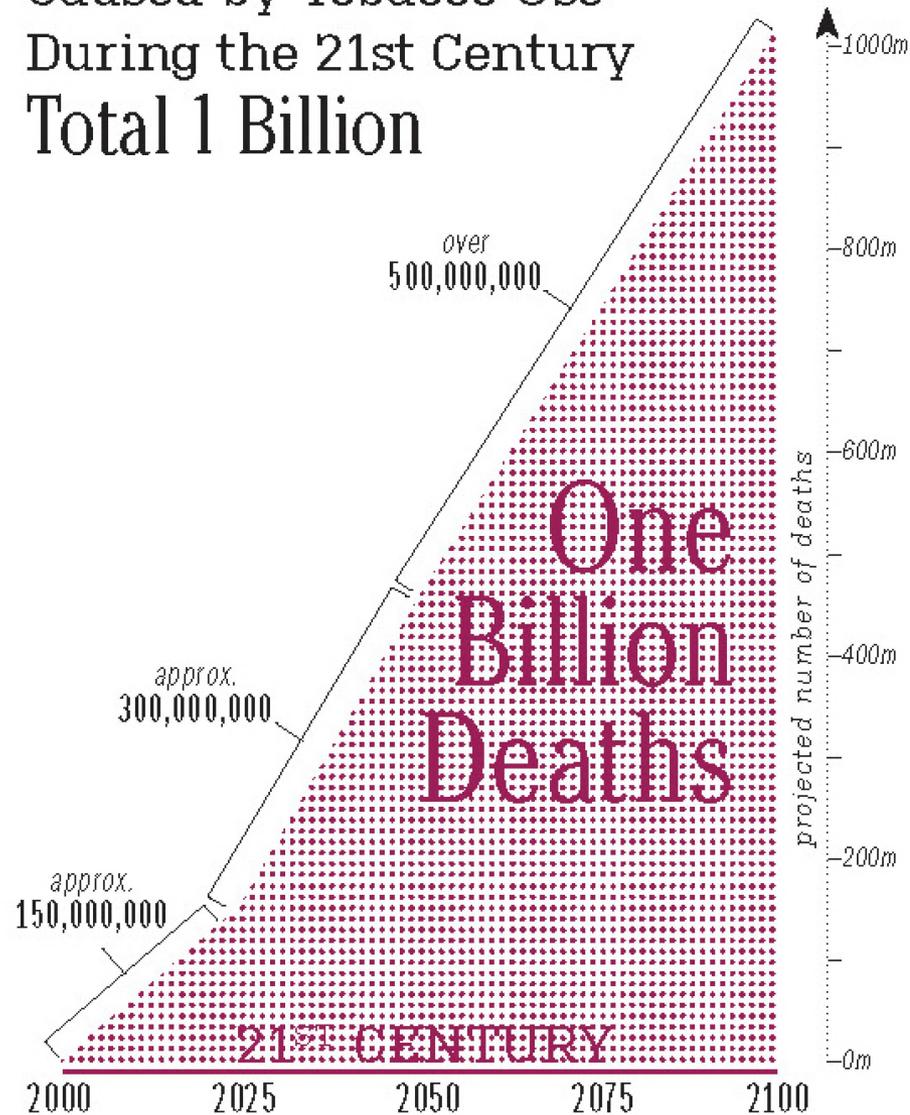
- There are currently 1.3 billion smokers in the world – there will be 1.7 billion in 2025
- Asia has the highest smoking rates in the world with overall country rates of up to 40%. China alone has over 300 million smokers who consume more than 1.7 trillion cigarettes a year – about 60% of the male population and 4% of the female population are smokers
- One-third of the global population aged 15 and older smokes



Cigarette smoking is a 20th century phenomenon...

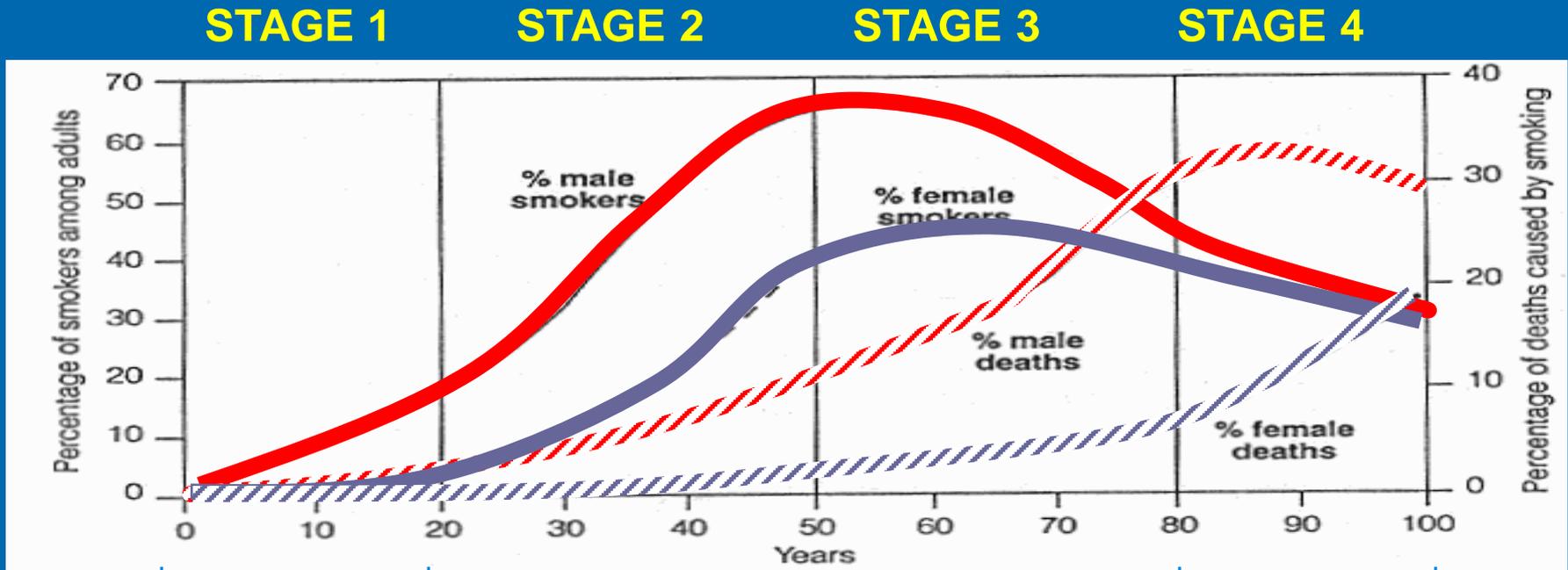


Projected Deaths Caused by Tobacco Use During the 21st Century Total 1 Billion



source: Tobacco Atlas 4th edition; tobaccoatlas.org

Four Stages of the Tobacco Pandemic



Countries in each stage

- Sub-Saharan Africa

- China
- Japan
- Southeast Asia
- Latin America
- North Africa

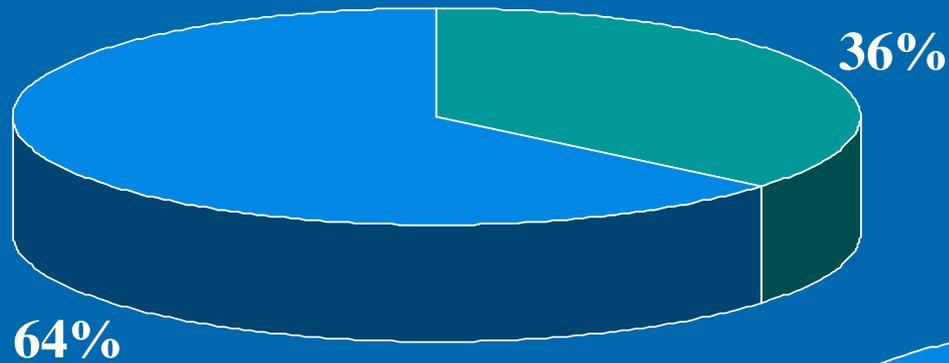
- Eastern Europe
- Southern Europe

- Western Europe, UK
- USA
- Canada
- Australia

Adapted from: Lopez AD, Collishaw NE, Piha T. A descriptive model of the cigarette epidemic in developed countries. *Tobacco Control*, 1994, 3:242-247.

Distribution of world's smokers

2000

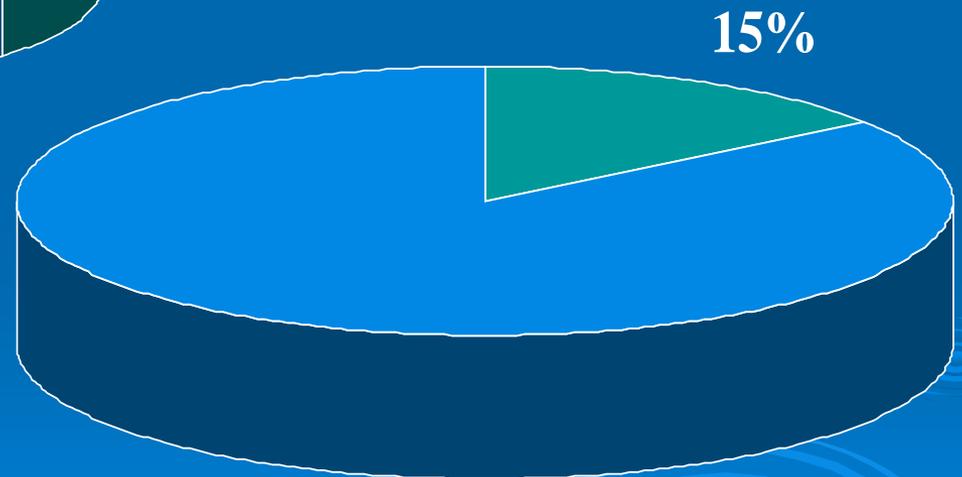


64%

36%

■ Industrialized countries
■ Developing countries

2025



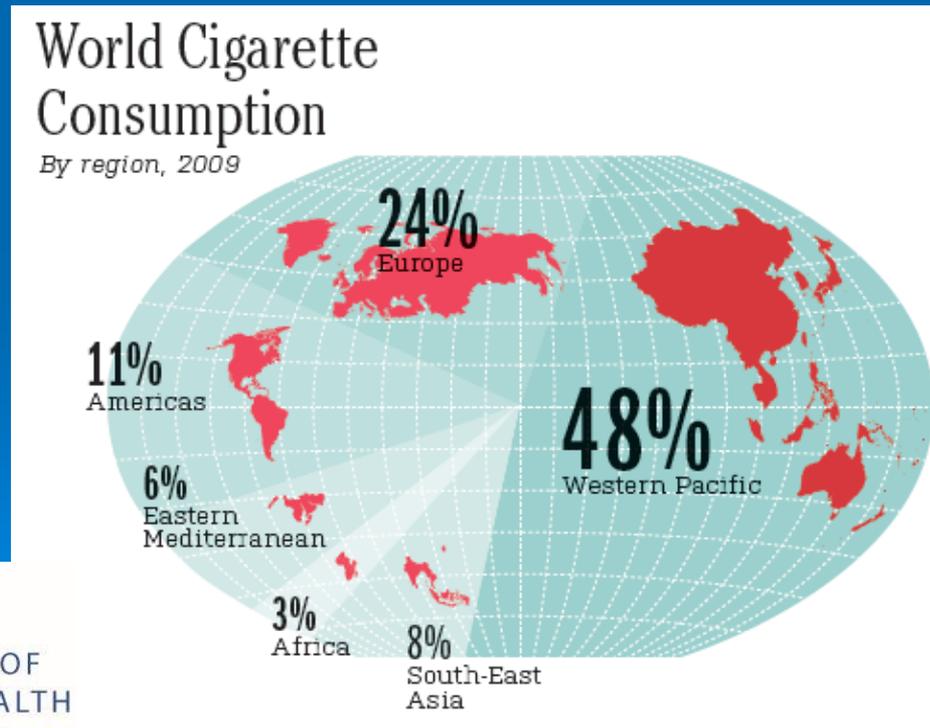
15%

85%

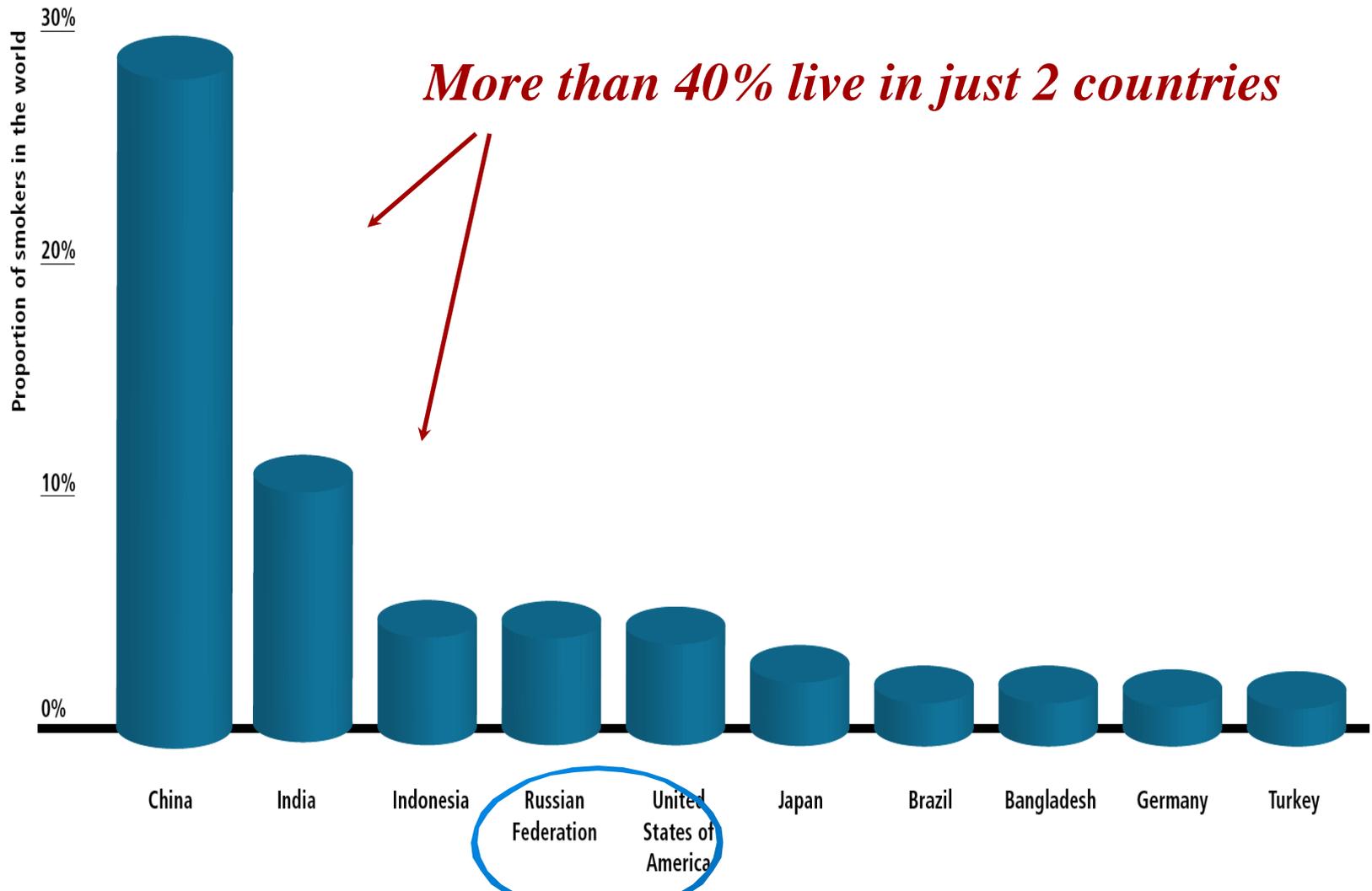
■ Industrialized countries
■ Developing countries

Cigarette consumption varies greatly by region...

- Consumption shifting from West to East (1990-2009)
 - Western Europe dropped 26%
 - Middle East and Africa increased 57%

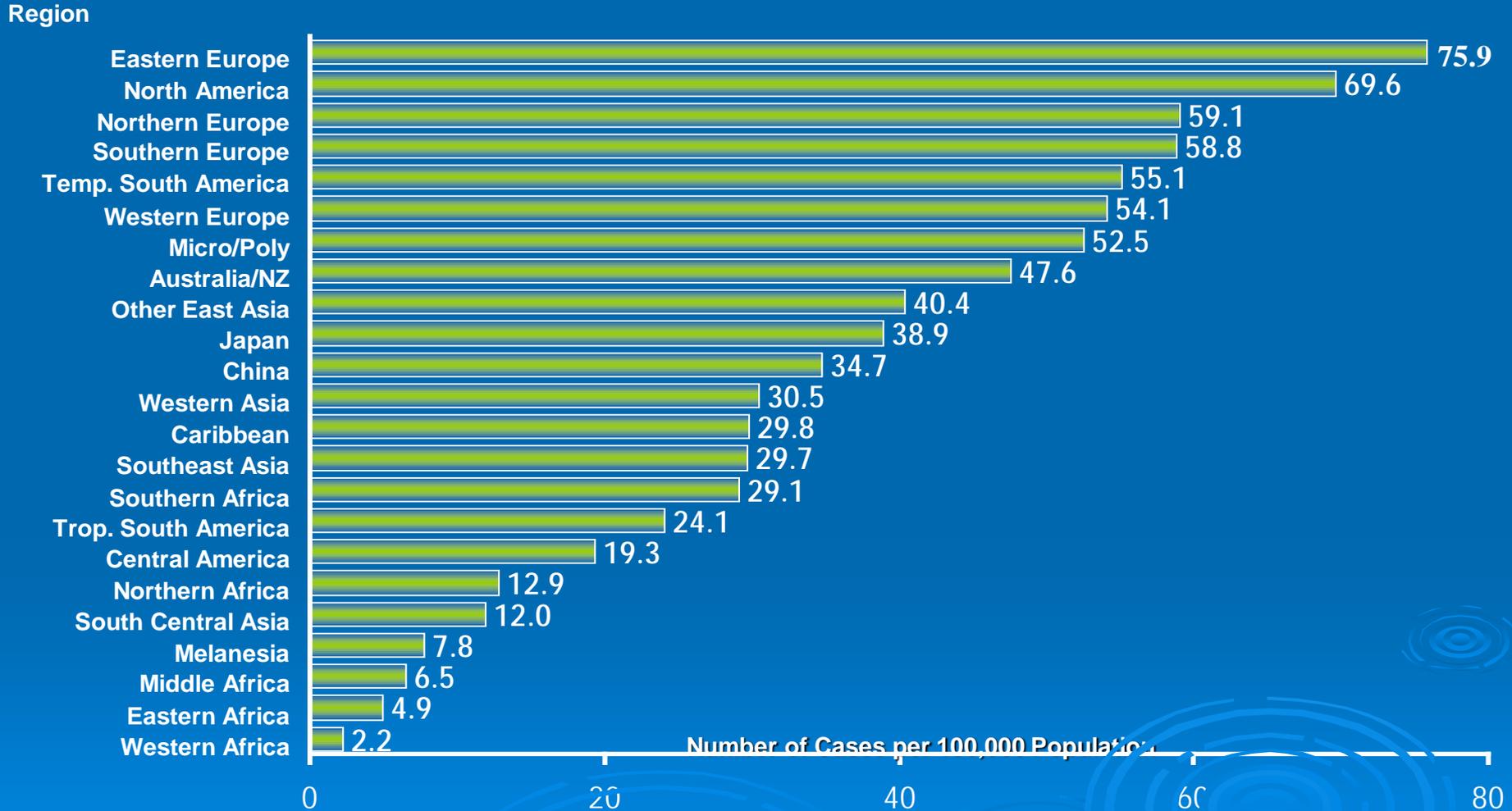


Nearly 2/3 of the World's Smokers Live in Just 10 Countries



Lung Cancer Incidence: Men

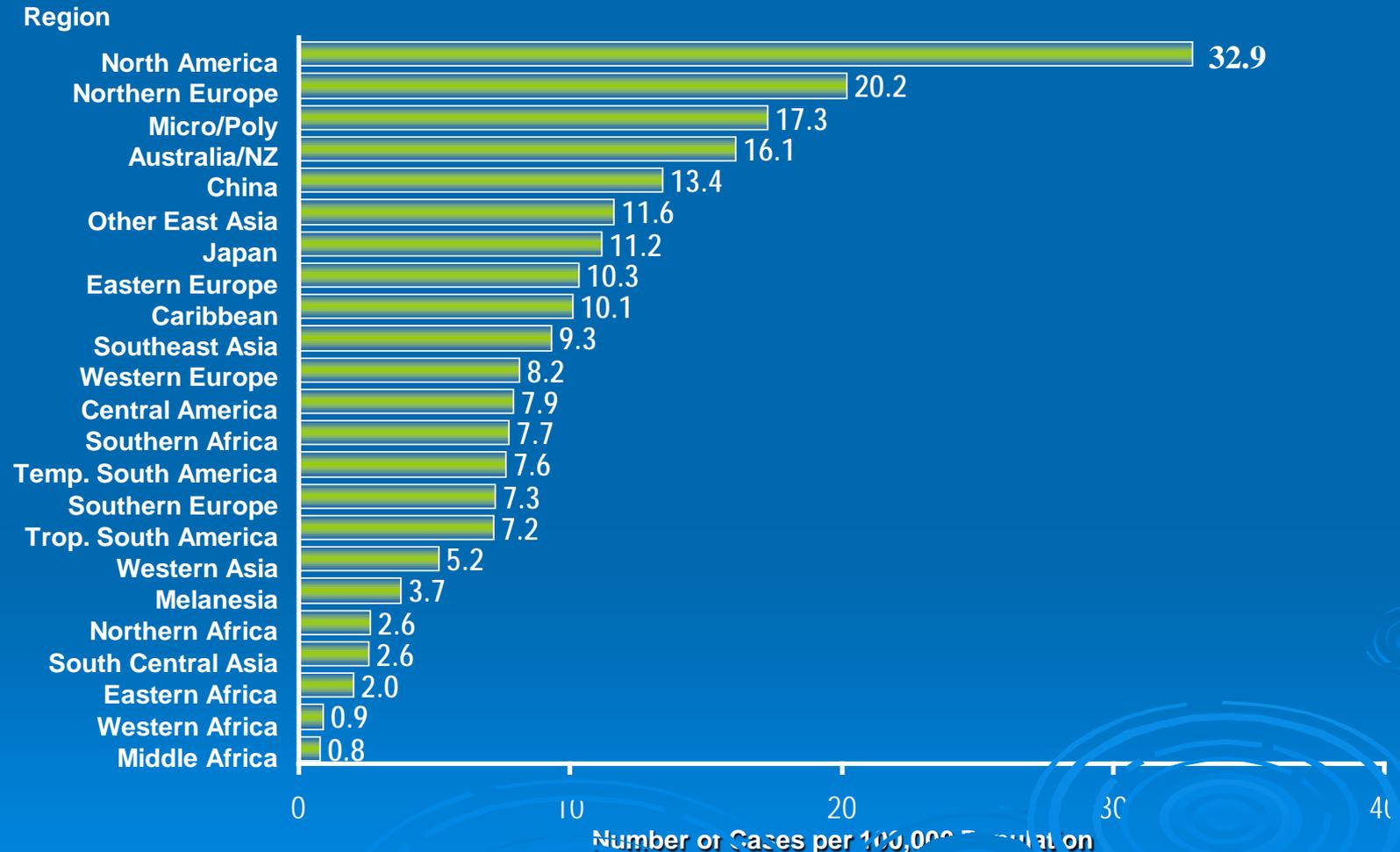
Incidence of Lung Cancer in Men by World Region



Micro/Poly=Micronesia/Polynesia; NZ=New Zealand; Temp=Temperate; Trop=Tropical
Adapted from Parkin et al. *CA Cancer J Clin.* 1999;49(1):33-64.

Lung Cancer Incidence: Women

Incidence of Lung Cancer in Women by World Region

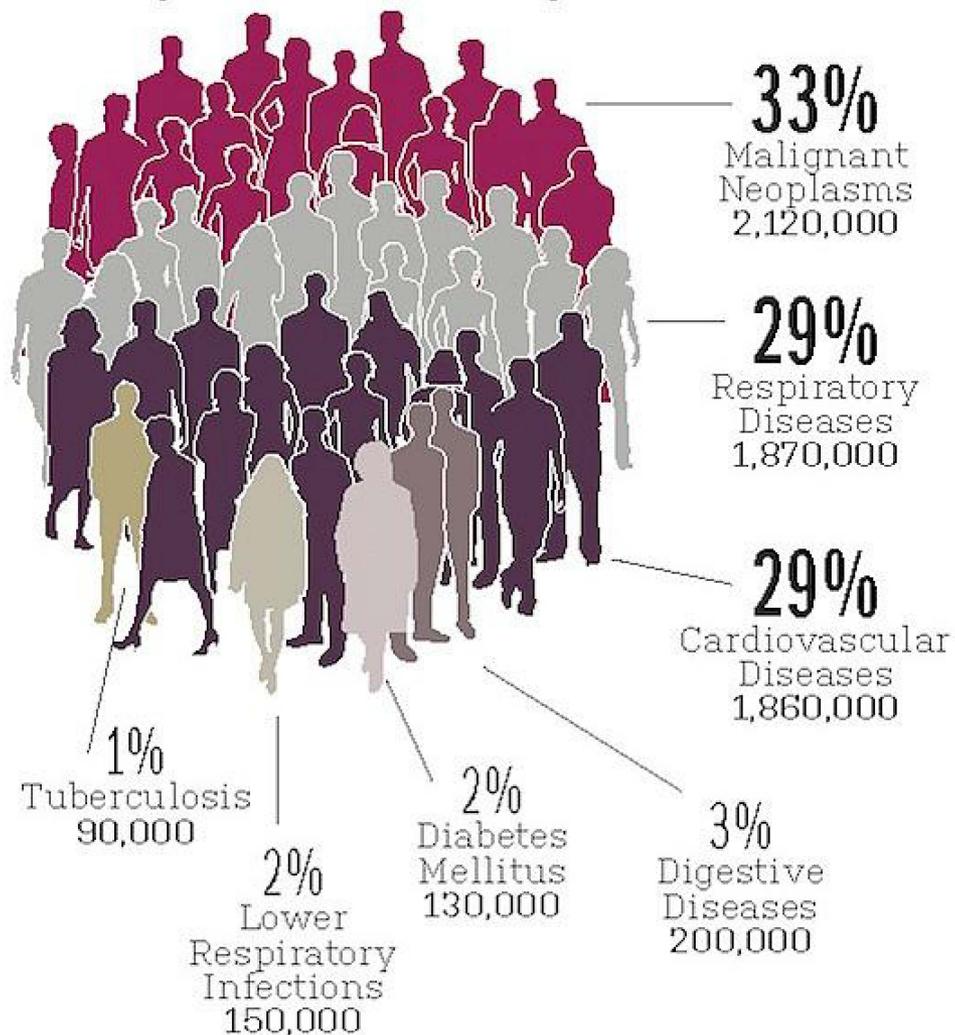


Micro/Poly=Micronesia/Polynesia; NZ=New Zealand; Temp=Temperate; Trop=
Parkin et al. *CA Cancer J Clin.* 1999; 49(1)

Projected Global Tobacco-Caused Deaths

By cause, 2015 baseline scenario

Totals might not sum due to rounding.



“Forced smoking” kills people...

- 600,000 deaths annually from secondhand smoke exposure (mostly women and children)
- Over 50% of the people in the Western Pacific region are exposed to secondhand smoke (highest rate in the world)

“...even limited secondhand smoke exposure delivers enough nicotine to the brain to alter its function.”

Nora Volkow, Director, National Institute on Drug Abuse, US, 2011

Number of Global Deaths Caused by Secondhand Smoke in Nonsmokers

2004

	MEN	WOMEN	CHILDREN
	26%	47%	28%
	156,000	281,000	166,000

Totals might not sum due to rounding



Economic Effects of Tobacco Use

- By 2015, the WHO estimates the annual global cost of tobacco to be US\$500 billion – a figure higher than the GDP of 174 of 192 UN members
- Smoking-related costs can contribute up to 15% of total health-care costs in developed countries
- Japanese male smokers, for example, incur 11% more medical costs than never smokers and have increased inpatient medical-care costs 33% higher in smokers than never smokers



Economic Effects of Tobacco Use (continued)

- As much as ten percent of family income in some parts of the world is spent on tobacco, limiting needed expenditures on food, clothing, education, and shelter
- A 1996 study – 18 years ago – estimated that total annual medical and social costs of tobacco use in Hong Kong were one-quarter of the total healthcare budget – and prevalence has risen since then
- For nearly 50% of the world's population, a pack of Marlboros can cost approximately half of a family's daily income



Why Hasn't Tobacco Control Received the Global Attention it Needs?

- 1) Tobacco use is viewed as a personal choice and a personal failing
- 2) Most victims of tobacco-related disease die and disappear quickly
- 3) Families and victims are often ashamed to discuss their tobacco use
- 4) The tobacco pandemic has developed slowly and insidiously



Why Hasn't Tobacco Control Received the Global Attention it Needs? (continued)

- 5) Tobacco is old news
- 6) Few strong tobacco control advocacy groups have arisen
- 7) The global effects of tobacco use – health and economic – are not well known
- 8) The multinational tobacco companies have controlled the playing field



“Tobacco use is unlike other threats to global health. Infectious diseases do not employ multinational public relations firms. There are no front groups to promote the spread of cholera. Mosquitoes have no lobbyists.”

WHO Zeltner Report, 2000

Tobacco is very big business...

- Global cigarette market valued at almost half a trillion dollars (taxes excluded)
 - Comparable to GDP of Poland and Sweden
- CNTC manufactured 2.1 trillion of the world's 5.9 trillion cigarettes (2008)

Value in billions (USD), 2010

\$91.7b



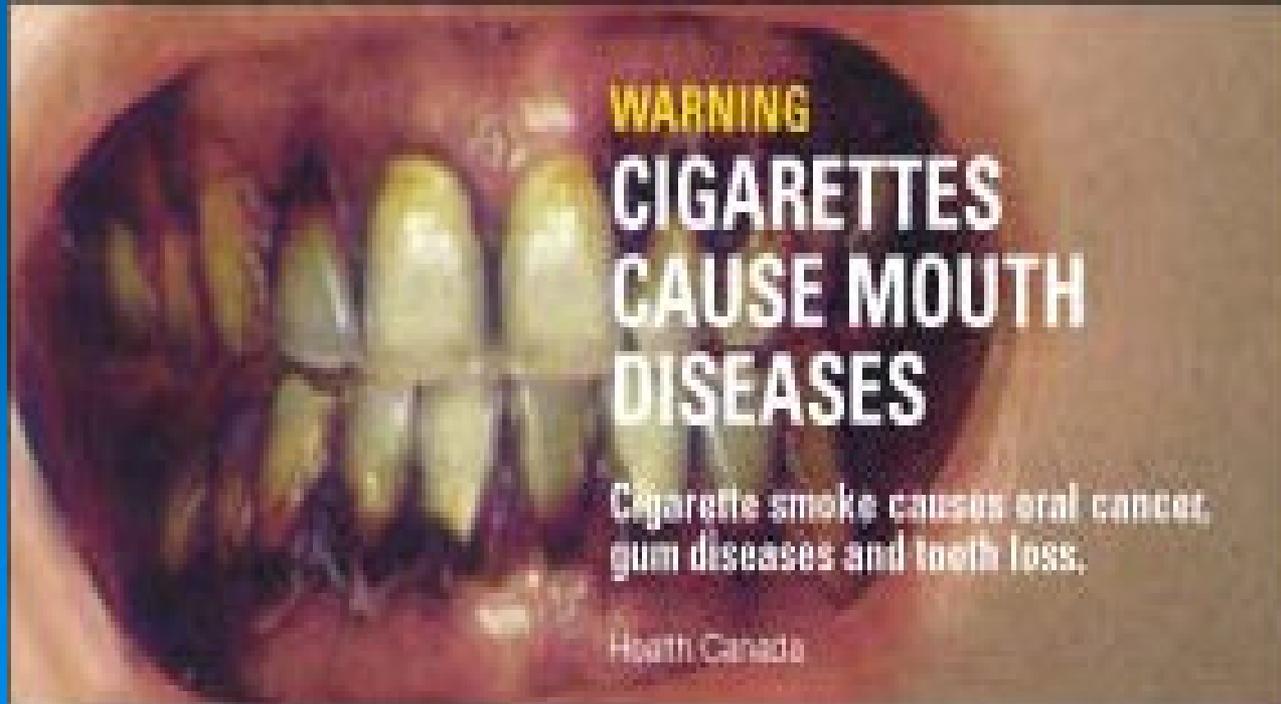
Total Revenue



สูบแล้ว เป็นมะเร็ง
กล่องเสียง

Canada

Thailand



WARNING

CIGARETTES
CAUSE MOUTH
DISEASES

Cigarette smoke causes oral cancer,
gum diseases and tooth loss.

Health Canada

Fumar causa câncer de pulmão



*Esta necrose foi causada pelo
consume do tabaco*



[Smoking causes lung cancer]

Brazil

*[This necrosis was caused
by tobacco consumption]*

Australian Plain Packaging



The Tobacco Industry Tries to Use Economic Agreements to Sell Cigarettes at the Expense of Health

Examples:

- Australia's plain packaging legislation – challenged in the World Trade Organization (WTO) and the Australia-Hong Kong bilateral investment treaty (BIT).
- Uruguay's warning labels and brand limitations challenged in the Switzerland-Uruguay BIT.



Framework Convention on Tobacco Control: The World's First Global Public Health Treaty

Objective: “to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to tobacco smoke”

Why is the FCTC important?

- The FCTC is the world's first treaty to address a public health issue.
- The FCTC offers the best change to address tobacco control globally.
- The FCTC has, and will continue to, generate tobacco control advocacy in every country in the world.

The impossible has happened



What would be the effects of turning the tide against global tobacco use?

- As many as 200 million premature deaths will be avoided in the next 50 years
- Lung cancer could virtually disappear as a public health menace
- Global heart disease risks would be reduced by as much as 25%
- Over time, global life expectancy could rise by 3-5 years
- Trillions of dollars will be saved from healthcare expenditures and redirected to research and public health



International Tobacco Control Research Criteria:

- Ability to influence population-level prevention/cessation
- Ability to address specific country/regional needs
- Ability to attract support for political and policy change

Broad International Tobacco Control Research Needs:

- Capacity building, i.e. infrastructure and training
- Funding (Gates/BI enormously useful, but not research)
- Establishing political will
- Awareness/PR re enormity of tobacco's effects – present/future

Specific International Tobacco Control Research Topics:

List is endless, but should include:

- FCTC implementation
- Price/tax increases
- Smokefree environments
- Surveillance
- Primacy of health in trade agreements
- Economic effects
- Access to tobacco dependence treatment
- Physician/health care provider tobacco use
- Tobacco package health warnings
- Media-based countermarketing campaigns

Specific International Tobacco Control Research Topics: (Continued)

- Regulatory schemes
- Targeting of women
- Targeting of youth
- Genetics of addiction
- Litigation effects
- Tobacco agriculture subsidies
- Tobacco crop substitution
- Illicit trade and smuggling
- Misleading claims/descriptors
- Duty-free and reduced-cost sales
- Advertising, promotions, and sponsorships
- Public education

Complementary Needs for International Tobacco Control Research

- Developing a new generation of tobacco control research leaders
- Raising the profile of tobacco control research on global health and development agendas
- Considering strategic alliances with NCD efforts
- Harnessing and integrating modern communications technology into global tobacco control research efforts

Complementary Needs for International Tobacco Control Research (Continued)

- Developing new and more sophisticated methods of tracking and countering the plans of the multinational tobacco companies
- Focusing more effort on linguistic needs and culturally-appropriate research
- Promoting the development of strong advocacy skills
- Obtaining additional resources, both financial and in-kind.

Proposal for a Global Consortium for Tobacco Control Research (GCTCR) – Varmus, Kumar, 2013

A GCTCR could:

- Provide an overarching structure for international research collaborations in LMICs specifically, but not exclusively;
- Aid in the development of research and communications networks;
- Facilitate the exchange and dissemination of information;

Proposal for a Global Consortium for Tobacco Control Research (GCTCR) – Varmus, Kumar, 2013 (Continued)

- Promote the use of common measures and protocols to facilitate cross-regional comparisons;
- Increase research capacity and infrastructure;
- Serve a convening function; and
- Promote tobacco control research as an essential element for development.



THE 4 FRENCH HEART TRANSPLANT PATIENTS MEET AT THE PALAIS de CHAILLOT

Thank you

