**Review article**

**An overview of the tobacco addiction in India and its impact over social perspectives**

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**Abstract:**

Tobacco is a major preventable cause of death in today’s context. Patterns and Issues associated with tobacco use are very complex. Many tobacco products are manufactured in small scale industry especially bidis, gutkha with a variety of mixtures and manufacturing processes, etc. In a real sense, tobacco use in both smoked, as well as nonsmoked forms, is common worldwide.

We collected information from various sources like newspapers, online search, television media news, research articles search, etc. We used the GOOGLE search engine for information search. We used PUBMED central database for healthcare-related references collection. From the Google search engine, we collected information from different reference sites. Thus the information was collected on the basis of major diversity.

In India, smoking is a common habit prevalent in both urban and rural area irrespective of the item smoked i.e. cigarettes, bidis, pipes, cigar, hookah, etc. About 17% of smokers in the world live in India. Presently nearly 2200 people per day and 9 lacks every year die in India due to tobacco-related diseases. The Health Ministry estimates that 40 % of India’s health problems stem from tobacco use. In India, it is mandatory to display a statutory health warning on all packages and advertisements of cigarettes because of the Cigarettes (Regulation of Production, Supply, and Distribution) Act, enacted by the Government of India (GOI) since 1975 and in today’s practice asked to print it in large size with a picture showing the severity of hazards, hence the people can sensitize easily. Present study comprehensively summarizes the tobacco addiction pattern and its impact over social perspectives.

**Keywords:** Tobacco addiction, smoking, world health organization

**Introduction:**

Tobacco is a major preventable cause of death in today’s context. Patterns and Issues associated with tobacco use are very complex. Many tobacco products are manufactured in small scale industry especially bidis, gutkha with a variety of mixtures and manufacturing processes, etc. (1) In a real sense, tobacco use in both smoked as well as nonsmoked forms, is common worldwide. (2)  Largest population of India is facing with oral cancer morbidity associated with tobacco use. (3)  Tobacco smoke is increasing showing cases of lung cancer (4) Cigarette smokers are reported to have higher rates of absenteeism, impaired perceptual and motor skills, and poorer endurance than non-smokers. (5) Tobacco addiction is found strongly associated with genes and the environment. (6)  Nicotine is one of the active content of tobacco leading to physical as well as psychological dependence. Tobacco users have to overcome nicotine dependence before they are successful in quitting tobacco usually leads to experimentation with other drugs of abuse too. (7) With this view present study was planned to assess an overview of the tobacco addiction and its impact on social perspectives in the Indian context.

**Study Methodology:**

With this background, the present research article was planned and studied to highlight an overview of tobacco addiction and its impact on social perspectives in the Indian context.

We collected information from various sources like newspapers, online search, television media news, research articles search, etc. We used the GOOGLE search engine for information search. We used PUBMED central database for the healthcare-related reference collection. From the Google search engine, we collected information from different reference sites. Thus the information was collected on the basis of major diversity.

The literature search was carried out in the last two months. All information was compiled and literature was finalized .Our intention was to highlight an overview of tobacco addiction and its impact on social perspectives in the Indian context.

**Tobacco consumption patterns in India:**

In the 17th century early Portuguese traders introduced tobacco in India. Since thereafter use of tobacco spread very rapidly in all sections of society in India.(8)

Tobacco is an agricultural product processed from the fresh leaves of plants in the genus ***Nicotiana*.** These leaves are harvested and cured to allow for the slow oxidation and degradation of carotenoids in tobacco leaf. The product is then processed, packaged, and shipped to consumer markets.

**Tobacco chewing**: Initially was a very common form of tobacco use. Nowadays it is used in the form of Gutka, mishri, etc. However, in rural India tobacco chewing is the most commonly observed addiction. Gutkha is the second most common pattern of consumption.

**Beedi:** It produces higher levels of carbon monoxide, nicotine, and tar. is found in rural India. Most of the bidis are produced from small scale industries.

**Cigars:** These are tightly rolled bundles of dried and fermented tobacco which are ignited so that smoke may be drawn into the smoker’s mouth. These are popular in Urban sectors.

**Cigarettes:** Cigarettes are ignited and inhaled, usually through a cellulose acetate filter. These are though found more in urban populations; the treads are shifting towards the rural areas.

**Electronic cigarettes:** Theseare an alternative to tobacco smoking, although no tobacco is consumed. It is a battery-powered device that provides inhaled doses of nicotine by delivering a vaporized propylene glycol/nicotine solution. It is popular in the higher class in India.

**Hookah:** Hookah is a single or multi-stemmed (often glass-based) water pipe for smoking, originally from India.

**Kretek :** Kretek are cigarettes made with a complex blend of tobacco, cloves, and a flavoring "sauce".

**Passive smoking:** Passive smokingis the usually involuntary consumption of smoked tobacco.

**Pipe smoking:** typically consists of a small chamber (the bowl) for the combustion of the tobacco to be smoked and a thin stem (shank) that ends in a mouthpiece (the bit).

**Vaporizer:**  A vaporizer is a device used to sublimate the active ingredients of plant material.

In India, smoking is a common habit prevalent in both urban and rural area irrespective of the item smoked i.e. cigarettes, bidis, pipes, cigar, hookah, etc. About 17% of smokers in the world live in India. (9) Presently nearly 2200 people per day and 9 lacks every year die in India due to tobacco-related diseases. The Health Ministry estimates that 40 % of India’s health problems stem from tobacco use. (10) In India tobacco is consumed in a variety of both smoking and smokeless forms e.g. bidi, gutkha, khaini, paan-masala, hookah, cigarettes, cigars, chillum, chute, Jul, mawa, misri, etc. In Karnataka state 28% tobacco users.

**Economic of tobacco:**

Today the tobacco industry is a major contributor to the economy in terms of revenue as well as job creativity.  As per the World Bank Report, the tobacco industry estimates 33 million people are engaging in tobacco farming-related business, of which 3.5 million are in India. (11)

However, due to tobacco addiction-related morbidity and mortality affects more server burden than what it actually contribute.

As per the latest study report from economic times, It has been well known that about 45.7 million people in India depend on the tobacco sector for their livelihoods.

It comprises six million farmers, 20 million farm labors, four million leaf pluckers, 8.5 million workers in processing, manufacturing, and exports and 7.2 million workers in retailing and trading.(12)
**Legislation to control tobacco in India:**

In order to prevent morbidity and mortality associated with tobacco addiction, an International framework is popularly known as “convention on tobacco control (WHO FCTC)” is established by WHO. (13) The framework was adopted by the World Health Assembly in May 2003, and India was the eighth country to ratify it on 5 February 2004.  The framework is based on a scientific basis and it sets guidelines that easily approach to people to stop addiction with easy measures. (13)

**The framework included the following six measuring policies:** (1)

1.      Regular monitoring of tobacco use and prevention policies

2.      Protecting people from tobacco smoke

3.      Offering help to people to quit tobacco use

4.      Warning everyone about the dangers of tobacco

5.      Enforcing a ban on tobacco advertising

6.      promotion and sponsorship and Raising taxes on tobacco

In India, it is mandatory to display a statutory health warning on all packages and advertisements of cigarettes because of the Cigarettes (Regulation of Production, Supply, and Distribution) Act, enacted by the Government of India (GOI) since 1975 and in today’s practice asked to print it in large size with picture showing the severity of hazards, hence the people can sensitize easily.

The Indian Parliament passed the Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply, and Distribution) Bill, 2003 in April 2003. This Bill became an Act on 18 May 2003 – COTPA. (14)

According to this, prohibition of smoking in public places (including indoor workplaces) was legalized and this has been implemented from 2nd October 2008 in the whole of India.

The Ministry of Health and Family Welfare (MHFW), GOI, has launched the National tobacco control program (NTCP) in the XI Five Year Plan to facilitate the implementation of the Tobacco Control Laws, bring about greater awareness about the harmful effects of tobacco and to fulfill the obligations under the WHO-FCTC. (14)

**Impact of tobacco addiction over social perspectives:**

There are several policy measures of tobacco control being implemented at the national and international level to fight the battle against tobacco. However, these efforts may not directly benefit the current tobacco user as nicotine in tobacco is very addictive, making quitting difficult.

The overall impact of tobacco addiction over societal perspectives found highly rigorous. Social context is said to be key to understanding diverse sources of resistance to tobacco control. (15)  Smoking causes health, economical as well as social damages. (16)

Cigarette smoking, a major risk behavior adversely affecting public health, has reached epidemic proportions. Having crossed its peak in developed countries, tobacco menace is showing an upward trend in developing countries. Smoking and health are intimately related and thus, smoking among future health care personnel such as medical students is an important issue. (17)

Lifestyle practices are to be found a major context associated with tobacco consumption. These practices are so deeply rooted in a rural community that is far difficult to take away from these hazards. Like practices of mishri in the morning in a rural community is found from generation to generation.  Bidi smoking is found common practices in the tribal regions as well as in rural India. Cigarette smoking is found prestigious in the urban community.

Tobacco is the real legal drug that kills many of its users when used exactly as intended by manufacturers. India is the second-largest consumer of tobacco products next to China.(18)

**We found the following results associated with social context.**

1)      Influence of family the environment is to be found one of the major factors in association with tobacco practices.

2)      Friends circle is second most important influencing center to relate these practices.

3)      Wrong beliefs in rural community.

4)      Wrong beliefs in tribal community.

5)      Status  symbol in urban community

6)      Stress buster factor belief in the community.

7)      Poverty and illiteracy is found one of the most important issues in the lower socioeconomic class.

8)      Easy go attitude in community

9)      Smoking is linked with style symbol in the urban population.

**Easy measures to control tobacco addiction:**

1)      Counseling by health care providers to their patients during routine OPDs.

2)      Group counseling events in community.

3)      Use of mobile phone applications.

4)      Inclusion of addiction hazards in education especially higher education.

5)      Supporting and prompting addiction-related projects in higher education.

6)      Multimedia use

7)      Focusing issues in films and promotion by eminent personalities from the entertainment industry

8)      Increasing the focus of media over tobacco addiction and its consequences related to damage news.

**Conclusion:**

Present study comprehensively summarizes the tobacco addiction pattern and its impact over social perspectives.

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