Health Factsheet

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World No Tobacco Day Information Paper

Smoking is a contributory factor to many cancers and diseases. Local data shows that there is a higher proportion of smokers amongst cancer, heart attack and stroke patients than in the general population. On this World No Tobacco Day, learn more about the health effects of tobacco use and encourage smokers around you to quit.

BACKGROUND

Smoking is the most preventable cause of death globally. Tobacco kills nearly 6 million people each year, of which more than 600,000 are non-smokers dying from breathing second-hand smoke. If nothing is done to address tobacco use especially in developing economies, it is on track to kill more than 8 million people by year 2030\(^1,2\).

IMPACT OF SMOKING IN SINGAPORE

A higher percentage of smokers are observed among heart attack and stroke patients as compared to the general population of Singapore residents in 2010 (Figures 1 and 2)\(^3,7\).
Figure 1: Percentage of smokers among Singapore residents and patients

![Bar chart showing percentage of smokers among different groups: General population (14%), Cancer patients (14%), Heart attack patients (24%), Stroke patients (23%), Patients with kidney failure (11%).]

Figure 2: Percentage of smokers among Singapore residents and patients by gender

![Bar chart showing percentage of smokers by gender among different groups: General population (Male 25%, Female 4%), Cancer patients (Male 25%, Female 3%), Heart attack patients (Male 35%, Female 4%), Stroke patients (Male 36%, Female 5%), Patients with kidney failure (Male 20%, Female 1%).]

Sources:
- National Health Survey 2010
- National Registry of Disease Office 2011 and 2012
TOBACCO PRODUCTS IN SINGAPORE

The most common form of tobacco product in Singapore is cigarettes. There are also other forms of tobacco products in Singapore\(^8\).

**Cigars** contain higher amounts of tobacco than cigarettes. As the majority of the cigar smoke remains in the oral cavity, cigar smoking is usually associated with oral cavity cancer, throat cancer, larynx cancer, chronic heart disease and lung disease\(^9\).

**Roll-your-own cigarettes**, also known as *ang hoon*, are cheaper than cigarettes. They may be thinner but they contain the same harmful chemicals as found in cigarettes. As such, *ang hoon* and cigarette smokers face similar risk of smoking-related diseases\(^10\)\(^-\)\(^12\).

**Shisha smoking** is smoking from a waterpipe with partially burned flavoured tobacco. It is a popular social activity among youth smokers who view it as a harmless recreational activity. However, the smoke from shisha contains more harmful substances than cigarette; one session of shisha smoking is approximately equivalent to smoking 100 cigarettes\(^13\).
ADVERSE HEALTH EFFECTS OF TOBACCO PRODUCTS

Cigarette smoking increases the risk of cancer. Current smokers are more likely to be diagnosed with cancer as compared to never-smokers\(^\text{14}\). Specifically for lung cancer, compared with never-smokers, the risk of getting it is higher among former smokers and it is even higher among current smokers. For current smokers, the risk of getting lung cancer increases with the number of cigarettes smoked per day\(^\text{14}\).

Smoking leads to cancers such as cancer of the lung, blood, cervix, colo-rectum, esophagus, kidney and other urinary cancers, throat, liver, pancreas, stomach\(^\text{15,16}\). Some of these cancers are among the leading cancers affecting men and women in Singapore for the 5-year period 2008 to 2012\(^\text{17}\).

**Figure 3: Leading cancers for adult male 1968 - 2012**

* refers to smoking-related cancers
Smoking is also related to some of the leading causes of death, such as heart disease, pneumonia, stroke, chronic obstructive lung disease and diabetes in Singapore in the 5-year period 2008-2012\textsuperscript{18-21}. In addition,

\begin{itemize}
  \item Smoking is estimated to increase the risk of coronary heart disease and stroke by 2 to 4 times\textsuperscript{15}.
  \item Smokers had a 30\% higher chance of kidney failure as compared to never-smokers\textsuperscript{22}.
  \item Smoking affects fertility, inborn baby's health, bone density, oral health, vision, diabetes development and control, immune function and arthritis\textsuperscript{15,23}.
  \item Second hand smoke is harmful to health. Exposure to second-hand smoke causes deaths from ischaemic heart disease, lower respiratory infections, asthma and lung cancer\textsuperscript{24}.
\end{itemize}
**BENEFITS OF QUITTING SMOKING**

Ex-smokers live longer than those who continue to smoke. In fact, quitting smoking lowers the chance of lung cancer to 5.1 normal risks (i.e. a person who is a never-smoker) within 6 years of quitting.

Similarly, quitting smoking can reduce the risk of all-cause death significantly. Smoking quitters reduced their risk of dying from lung cancer and it is more beneficial with longer smoke-free years. Even for smokers who are sick, quitting smoking can improve their health. Quitting smoking improves women’s fertility, and for mothers who have just given birth, the survival rate and birth weight of their newborns.

**THE NATIONAL TOBACCO CONTROL PROGRAMME**

The National Tobacco Control Programme (NTCP) adopts a multipronged, whole-of-government strategy including taxation, tobacco control legislation, public education, collaborative partnerships and smoking cessation services to address tobacco use in the population. These strategies aim to reduce the supply of and demand for tobacco.

The Health Promotion Board (HPB) has in place several tobacco control programmes to reduce smoking initiation among the young. These include:

- Educational co-curricular activities in educational institutions and on social / online media to raise tobacco awareness;
- Empowering teachers, youth workers, counsellors and parents to raise awareness of the benefits of a tobacco-free lifestyle among children and youth;
- Encouraging positive parental role modelling to prevent children from picking up smoking from their parents;
- Inclusion of tobacco-control messages in youth-centric premises, products, programmes or events; and
- Prohibition of under-aged smoking, in collaboration with the Health Sciences Authority, the Ministry of Education and its schools.
In 2011, the HPB introduced the I Quit campaign, a national anti-smoking campaign, which has a community-based but personalised approach to build a network of support to help smokers of all ages make their first or next attempt to quit smoking. The I Quit campaign was a marked shift from the usual scare tactics used in previous campaigns.

In 2014, the I Quit campaign will challenge smokers to weigh the pros and cons of smoking and inspire them to quit smoking by participating in a 28-day Countdown. The HPB will also step up infrastructural support for smokers to start their quit journey by increasing the number of smoking cessation touchpoints in the community and build the capacity of health professionals and HPB’s Health Ambassadors to support smokers who are quitting.

For more information on the I Quit 28-Day Countdown, please refer to the website: http://www.hpb.gov.sg/iquit
REFERENCES


