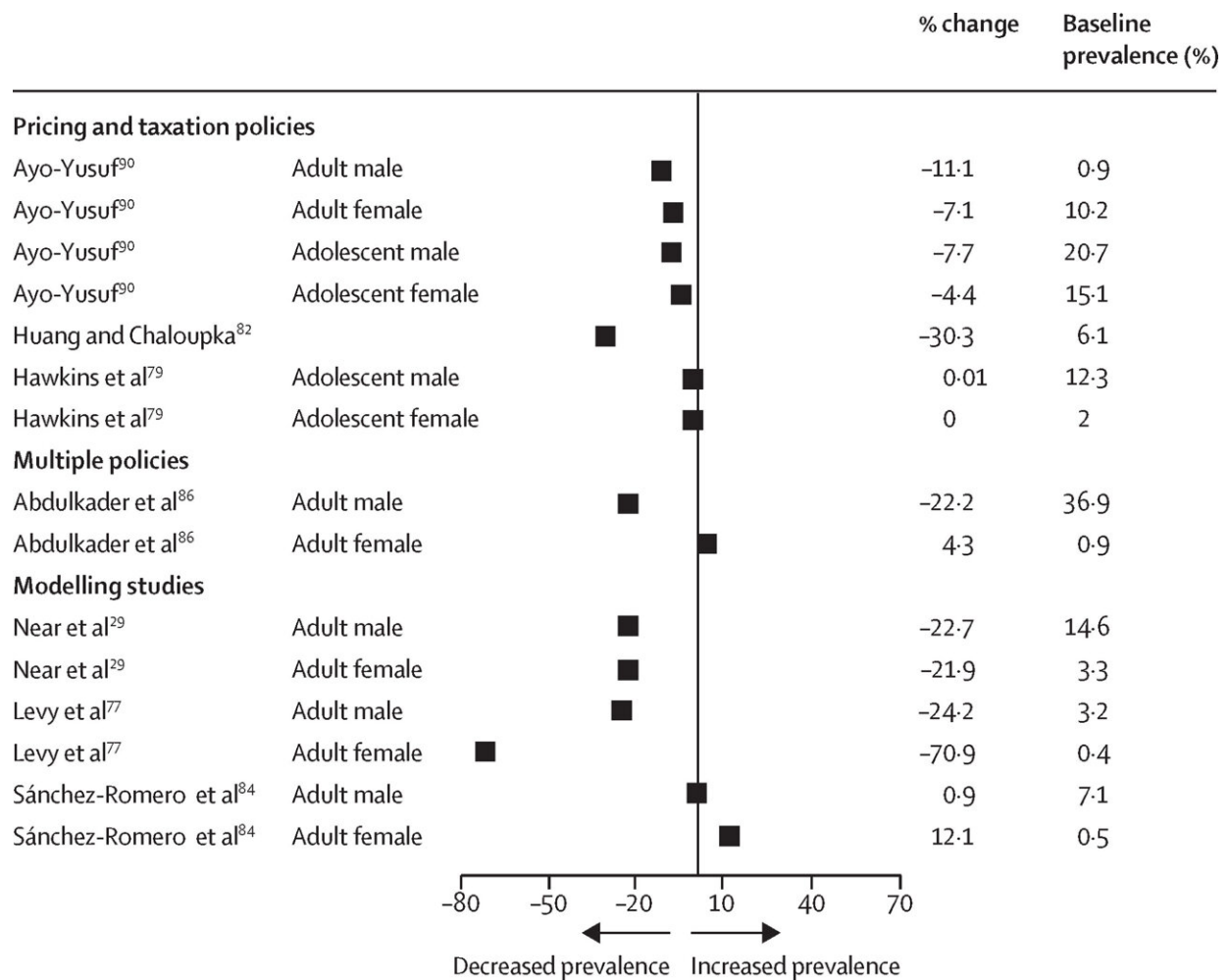


# Research highlights global impact of smokeless tobacco use

May 31 2023



Percentage change in smokeless tobacco prevalence following implementation of smokeless tobacco policies. Credit: *The Lancet Global Health* (2023). DOI: 10.1016/S2214-109X(23)00205-X

A team from the University of York and Public Health Foundation of India (PHFI), in collaboration with the ASTRA (Addressing Smokeless Tobacco and Building Research Capacity in South Asia) consortium, conducted a comprehensive review focusing on policies related to smokeless tobacco, exploring their context, and investigating their impact on smokeless tobacco use.

The research examined data from 2005 to 2021, which showed that 57 countries have implemented policies specifically targeting smokeless tobacco, with 17 of them having policies beyond the scope of the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC).

The review, published in *The Lancet Global Health*, demonstrates that policy initiatives based on the WHO FCTC have led to reductions in smokeless tobacco prevalence, ranging from 4.4% to 30.3% for policies related to taxation and 22.2% to 70.9% for multifaceted policies, which may include [advertising campaigns](#) for example.

Professor Kamran Siddiqi, from the University of York's Department of Health Sciences, said, "Despite being one of the most important causes of head and neck cancers, smokeless tobacco use has been overlooked.

"This paper shows that there is enough evidence for rapid and comprehensive policy action. Such action can make a significant difference in preventing cancers in South Asia."

The review identified several countries, including Bhutan, Singapore, and Sri Lanka, that have enforced a complete ban on smokeless tobacco, including cultivation, manufacture, distribution, and sale of such products.

Partial import and sale bans on specific forms of smokeless tobacco

were reported by Australia, Bahrain, Brazil, India, Iran, Tanzania, Thailand, New Zealand, and the UK. Bans on tobacco use in [public places](#) were implemented in Guam, India, Myanmar, Nepal, Pakistan, and the U.S..

India, in particular, has taken a comprehensive approach to tackle the use of smokeless tobacco products. These measures include taxation, regulation of contents, labeling and packaging, education campaigns, cessation services, restrictions on sale to and by minors, and a ban on the sale and manufacture of smokeless tobacco products.

The review, however, also revealed significant research gaps in some areas and limited evidence regarding smokeless tobacco policies, their descriptions, and impact evaluations. It emphasized the need for continuous updating of guidelines and frameworks to incorporate new evidence on effective smokeless [tobacco control](#) measures.

Professor Monika Arora, from Health Related Information Dissemination Amongst Youth (HRIDAY) and Public Health Foundation of India (PHFI), said, "Countries have enforced measures to restrict smokeless tobacco use but these are not mentioned prominently in important reports and scientific publications. They appear somewhere in the appendix, and this limits further research and policy action to tackle use of smokeless tobacco."

The review highlights the critical need to establish standardized outcome measures, including adverse health outcomes and prevalence of smokeless [tobacco](#) use, to effectively evaluate the impact of policies and monitor the global [smokeless tobacco](#) epidemic.

**More information:** Aastha Chugh et al, The global impact of tobacco control policies on smokeless tobacco use: a systematic review, *The Lancet Global Health* (2023). [DOI: 10.1016/S2214-109X\(23\)00205-X](https://doi.org/10.1016/S2214-109X(23)00205-X)

Provided by University of York

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