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RESEARCH AND PREVENTION PERSPECTIVES ON SMOKING IN ROMANIA

Abstract:

Smoking reduces the lifetime and is responsible for the death of ten thousand persons daily. In spite of the harmful effects of tobacco use, in Europe the number of smoked cigarettes is about two thousand cigarettes per year per person, while the smoking-related statistics are unfavourable in women and children.

The high prevalence of active and secondhand smoking in Romania, the high number of daily smoked cigarettes, the increasing percentage of cessation attempts with a limited success stresses the importance of tobacco research, preventive activities and cessation interventions.

Davidson College (USA) and University of Medicine and Pharmacy from Tîrgu-Mureş have just launched a five-year common project in order to study tobacco concerns specific to Romania and to build the local capacity for tobacco research in Romania.

Keywords:

smoking, prevention, cessation, tobacco research, cooperation, secondhand smoking

JEL Classification: I19, I00

Introduction

Smoking is one of risk behaviours with serious and long-lasting effects on health. As such, it has come to the attention of public health authorities both nationally and globally. The World Health Organisation data show that 1.1 billion people worldwide regularly smoke tobacco products, smoking being responsible for a total of 10,000 deaths per day (1).

According to European statistics, cigarette smoking per capita per year reaches around 2,000 cigarettes. Despite the harmful effects that smoking has on the human body, the indicators show us that smoking is extremely bad for women and young people (2, 3).

Compared with the different worldwide and European trends an increase in consumption of legal incentive substances can be noticed in Romania, as well as the increasing smoking of cigarettes (4).

This study aims to provide some epidemiological data on smoking habits in Romania, compared with data from the European Union in order to draw attention to preventing and stopping smoking and to the usefulness of research and programmes related to smoking.

Material and method

A starting point in our research is the analysis of the results of national and international studies conducted in recent years.

In 2004 and 2009 the Global Youth Tobacco Survey (GYTS) study was conducted in Romania and in states of the European Union (5). This international study observed children and young people; those over 15 years of age were evaluated in Romania in 2011 within the international study Global Adults Tobacco Survey (GATS) (6). In order to compare the results of the study in the European Union a Special Eurobarometer study proved to be ideal. This was conducted in the states of the EU at different time intervals during the past years and it was conducted in Romania in 2009 (7).

The project entitled *Developing Research Capacity on Smoking in Romania* was released in October 2012 (8, 9).

Results

Smoking caused the death of approximately 100 million people in the twentieth century. Smoking is currently responsible for the loss of 4-5 million human lives per year. If current global trends do not change, tobacco smoking may cause approximately 1 billion deaths in the 21st century (Table 1).

Period	Estimated number of deaths
2000-2025	~ 150 million
2025-2050	~ 300 million
2050-2100	> 500 million
Total in the 21 st century	~ 1000 million (1 billion)
Total in the 20 th century	~ 100 million

Table 1. Estimated value of deaths caused by smoking if current smoking practices continue

According to the Special Eurobarometer survey conducted among the population over 15 years of age, almost a third (29%) of the EU population smokes (cigarettes, cigars, pipes). The most smokers are in Southern Europe, especially Greece, where the figure stands at over 40%. The situation is similar in the Cyprus territories inhabited by Turks. Bulgaria (39%) and Hungary (38%) follow on the list. The prevalence of smoking is lowest in Sweden (16%) and Finland (21%). While in the EU27 the average is 29%, in Romania the prevalence reaches 30%, which ranks us 12-14 (Figure 1).

Within three years the ratio of smokers in the European Union decreased by three percent, while between 2006 and 2009 in Romania it only decreased by one percent (Figure 2).

The percentage of people who once smoked was determined: the EU27 average is 22%. The highest percentages of former smokers is in the Netherlands (33%), Sweden (31%) and Denmark (31%) and lowest percentages are in Romania (12%), Portugal (13%) and Greece (14%) (Figure 3).

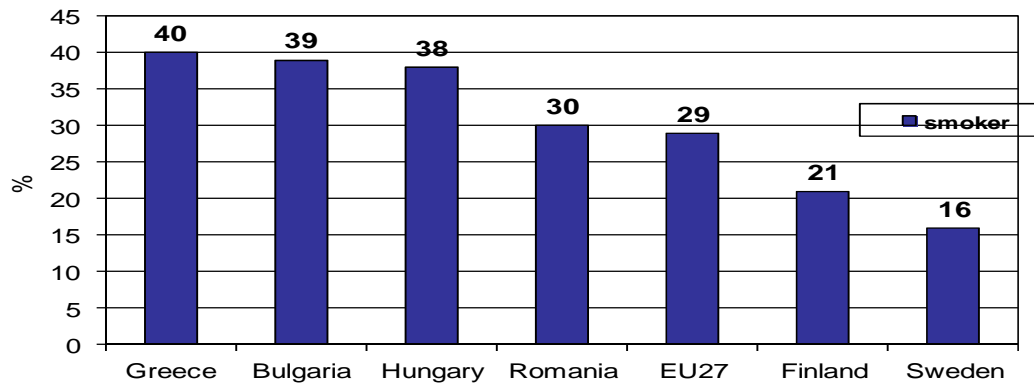


Fig. 1. Smoking prevalence in some countries from the European Union

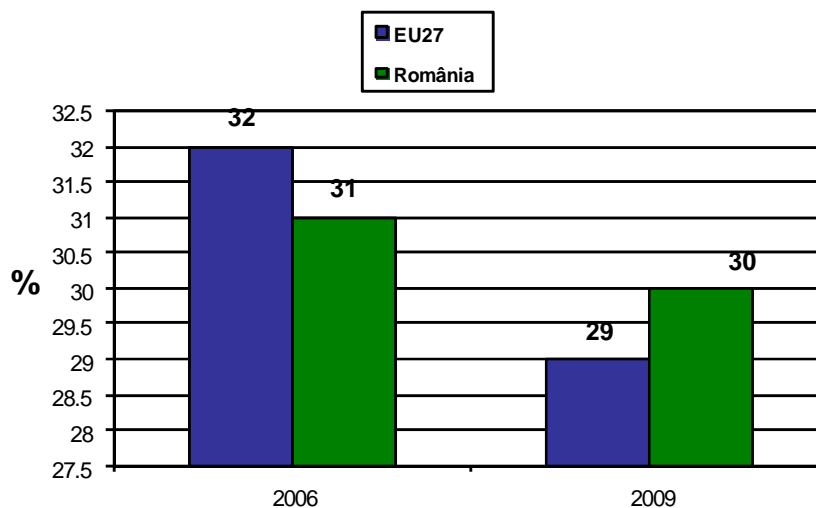


Fig. 2. Decrease of smoking between 2006-2009

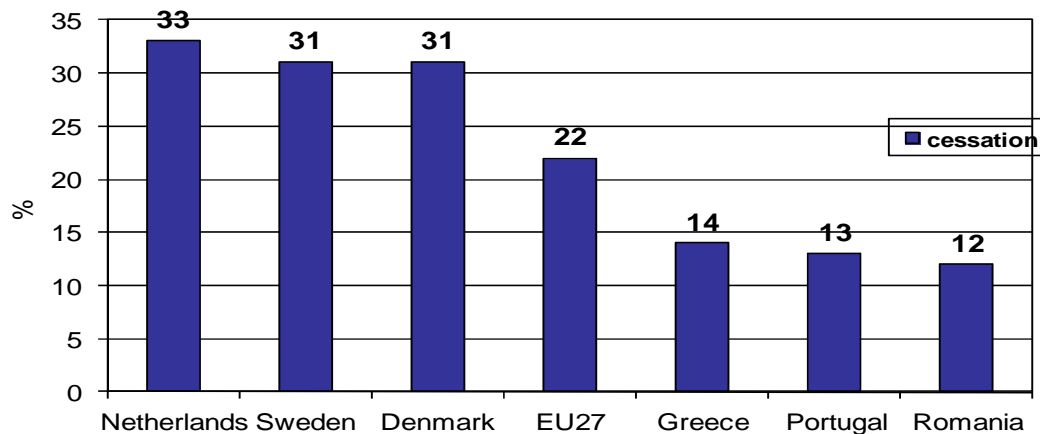


Fig. 3. The percentage of smoking cessation

The data also highlight the fact that although the percentages of women and men who have constantly tried to quit smoking soon after acquiring the habit up to the present are relatively equal; according to the number of attempts to stop smoking, female smokers have made more such attempts than male smokers.

Discussion

Davidson College (USA, North Carolina) and the University of Medicine and Pharmacy of Tîrgu Mureş started a five-year research project on smoking in 2012. The project is funded by the Fogarty Foundation and the National Institutes of Health of the USA. A similar project was finalised in Hungary (Semmelweis University, Budapest), having the same objective of training local capacity in the research on smoking.

The complex project includes multiple areas of research: investigating smoking in secondary and high school children and adolescents, youth in social institutions, pregnant women, and patients with cardiovascular diseases. The project aims to evaluate the effectiveness of the different methods of prevention and smoking cessation, macro and micro economic analysis of the impact of smoking as well as pollution monitoring caused by smoking in the most frequented public places (8).

The main objectives of scientific cooperation can be formulated as follows:

1. the study on smoking habits among different population groups;
2. implementation of programmes for smoking prevention and cessation;
3. pursuing the economic impact;
4. studying the impact of passive smoking on air quality;
5. counselling and influencing decision factors.

The project entitled *Developing Research Capacity on Smoking in Romania* opens possibilities for cooperation at both individual and institutional levels in order to achieve high rigour of scientific research, to communicate and participate in congresses, to

implement the most advanced intervention methods to prevent and stop smoking and improve policies and legislation on smoking in Romania (9).

Antismoking policies began to spread in Europe in 1980 and have led to more stringent restrictions (10, 11). The application of active and passive smoking policies has proven to be effective (12). The objective of the European Union is to become a world leader in restricting smoking; in this regard the Council of Europe published a recommendation on the non-smoking environment in 2009. Under this recommendation, the states of the Union should take effective measures to protect people from exposure to tobacco smoke (13).

Romania is one of those minority member states that do not yet have an extended regulation on protecting the public from exposure to tobacco smoke (14).

On June 8th 2011 the Senate of Romania adopted the bill amending Law 349/ 2002 on preventing and combating the effects of tobacco products, a project which prohibits smoking in public places, institutions, restaurants and bars. The bill was then sent to the Chamber of Deputies for debate and approval, the Chamber of Deputies being the decisive body in this case. Since then the project has not yet been discussed and thus has not been approved.

Conclusions

The high prevalence of active and passive smoking in Romania, the large number of cigarettes smoked daily, the large number of attempts to quit smoking with a low success rate support an extension and expedite research on smoking.

In order to avoid the harmful effects of smoking on the human body, restricting smoking is of paramount importance. Although efforts by adopting measures and restrictive legislation will have an impact on health only after one or two generations, the United States and the European Union have already recognised the importance of interventions on smoking.

Lately there have been great strides in the legislation on smoking restrictions by implementing anti-tobacco programmes, programmes which are expected to be implemented in Romania as well.

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