

WORLD NO TOBACCO DAY: TOBACCO BREAKS HEARTS

A JOINT MEDIA BRIEF FROM COLLABORATING PARTNERS: NATIONAL COUNCIL AGAINST SMOKING, HEART AND STROKE FOUNDATION SOUTH AFRICA AND DEPARTMENT OF MEDICINE, UNIVERSITY OF CAPE TOWN



Background: Staggering statistics

The international theme for World No Tobacco Day on 31st May 2018 is: ***Tobacco breaks hearts***, a theme which calls on the global community to focus on the ill-effects of tobacco use, including tobacco smoking, on heart health.

Professor Pamela Naidoo, CEO of the Heart and Stroke Foundation South Africa (HSFSA) notes: “Smoking triples the risk of having a heart attack and doubles the risk of having a stroke”. Cardiovascular disease (CVD) is the single most important cause of death in many countries. “Even people who smoke fewer than five cigarettes a day may show signs of early CVD, with the risk of heart disease increasing with number of cigarettes smoked per day and duration of smoking. Exposure to second-hand smoke also causes CVD in non-smokers”, adds Professor Ntusi, Chair of the Department of Medicine, University of Cape Town (UCT).

- 1 in 8 deaths globally are tobacco related
- Twice as many women in the world die of exposure to second-hand smoke as men do (an estimated 600 000 women died from second-hand smoke-related deaths in 2016)
- More men smoke worldwide but many women get exposed to smoke from their partners within the household

In South Africa the prevalence of smoking is 16.5%, with 44,000 smoking-related deaths each year. That is equivalent to 121 avoidable deaths each day. Savera Kalideen, Executive Director of the National Council Against Smoking (NCAS) says that “The nicotine in cigarette smoke results in an increase in blood clotting, blood pressure and heart rate. It also results in a decrease in oxygen reaching the heart.”

A recent study in the Western Cape found that over a 3rd of women in a local township were exposed to passive smoking, putting them at a high risk of CVD and other complications. In the Drakenstein Child Health Study, one in five babies surveyed in two townships had the same level of nicotine in their system as active smokers. Many infants face the consequences of high smoking rates among pregnant women, including being underweight and developing lung problems such as asthma.

SA proposed changes to anti-tobacco legislation

Savera Kalideen (NCAS) says that the Department of Health has proposed significant and welcome changes to the existing tobacco legislation, which aims to reduce consumption of tobacco products, and protect non-smokers from second hand smoke. These changes include the proposal to make all public places, including stadiums, beaches and parks smoke-free. E-cigarettes will be legislated in exactly the same way as combustible cigarettes and all cigarette packaging will have uniform in colour and font used on the packets (plain packaging).

Tobacco and heart health

Both active and passive cigarette smoke exposure increase the risk of heart attacks, stroke, heart failure, peripheral arterial disease and atrial fibrillation. Evidence suggests that there is a distinct direct dose-dependent relationship between cigarette smoke exposure and risk of CVD. Professor Ntusi (UCT) remarks that “On a positive note, the excess risk of CVD is rapidly reversible, and stopping smoking following a heart attack reduces an individual's risk of heart disease by 36% in 2 years.

Harm-reduction and tobacco cessation

Despite the decline in smoking rates since the introduction of anti-smoking legislation and taxation in SA, CVD remains the second biggest killer in the country. This means that the country needs to address the genetic and modifiable risk factors that contribute to this burden of disease. ***Tobacco smoking remains, by far, the strongest risk factor and predictor of heart disease and stroke.***

Professor Pamela Naidoo adds that the optimal target for heart health harm reduction through tobacco smoking should be a no-smoking policy at an individual and at population levels. She further “urges South Africans, whether at an individual or organisation level, to help facilitate government’s commitment to harm reduction through tobacco control policies and make an effort to keep themselves and their environment smoke-free.”

In addition, Prof. Ntusi (UCT) suggests that “doctors and other health professionals should contribute as role models and advocates. As role models, they should not use tobacco products themselves. As advocates, they should call for their hospitals to adopt smoke-free policies and make tobacco treatments available and affordable. Doctors in academic settings should advocate with medical schools to teach tobacco treatment methods to the next generation of physicians.”

Ends

Contact details for interview requests:

The Heart and Stroke Foundation South Africa:

Pamela Naidoo: +27(0)837761144 or

Nuraan Cader: nuraan.cader@heartfoundation.co.za , 021 422 1586

University of Cape Town:

Department of Medicine, University of Cape Town

Ntobeko Ntusi; Tel: 0214066200; Email: ntobeko.ntusi@uct.ac.za

National Council Against Smoking

Savera Kalideen: 071 227 0939/ 011 7251514

saverak@iafrica.com