



Smoking is still a major problem and challenge worldwide

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Smoke-free future is the goal

In this autumn, the new analyses on the global burden of diseases (GBD) was published. They showed that smoking is still the number one risk factor high income countries for years of lost life and years with disability. In lower income countries, smoking is also an important risk factor – but even higher risks originate from child/maternal malnutrition and general dietary risks as well as environmental risks such as air pollution and unsafe water (1).

Good news

The good news is that prevalence of smoking has been reduced globally; thus, the related risk of lost years has also been reduced significantly over the last 25 years; i.e. since the present GBD collaboration began. The age-adjusted prevalence of daily smoking is 25 % for men and 5% for women. Those results are based on data from 2015. When compared to 1990 the new analyses identified a clear smoking reduction of 28% for men and 34% in women. However, this total reduction is based on a large variety, including even increase in a few countries (2).

The plan for smoking reduction in 2025

In 2010 the 194 member states in WHO had a daily smoking prevalence of 22% (37% for men and 7% for women). With a plan for an overall reduction of 30% for smokers at the year of 2025, the prevalence was projected to around 15% in total; 26% and 5%, respectively (3).

Those numbers are not far away from the good news above; never-the-less, as the data originates from different collections and methods the prevalences are not di-

rectly comparable and should be interpreted with cautions. Anyway, we seem to be on the track.

The WHO FCTC and MPOWER

In 2015, altogether 180 parties have ratified the WHO Framework Convention on Tobacco Control (FCTC), that covers about 90% of the global population. FCTC was initiated back in 2003 to fight the global smoking and went into force in 2005. The parties signed up to regulate tobacco industry marketing and sales, reduce the demand for tobacco, and provide agricultural alternatives for the farmers. WHO launched an important tool to support the implementation of FCTC. That was the MPOWER, which is an acronym for Monitoring tobacco use and prevention policies, Protecting people from tobacco smoke, Offering help to quit tobacco use, Warning about the dangers of tobacco, Enforcing bans on tobacco advertising, promotion and sponsorship, and Raising taxes on tobacco (4).

New goal: Tobacco Endgame (TE)

TE is an international strategy aiming at phasing out smoking on long term. The ambitious goal of TE means a change of perspectives – going from reducing smoking to becoming smoke-free. TE is often defined by a smoking prevalence below 5% (5). It requires both political decisions and full implementation of FCTC.

Around the world, many parties, especially counties, municipalities and organizations are targeting the smoke-free future by deciding and implementing smoking ban in specific areas and raising smoke-free new generations.



Editorial

Some brave member states of WHO have taken the strong political decision of implementing TE and phase out smoking within the next decade or two. For now, they are New Zealand and Ireland (2025), Finland (2030) and Scotland (2034) - and countries are under-way.

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