## Prevalence of smoking in Brazil: additional measures for smoking control should be a priority in the Year of the Lung

Prevalência de tabagismo no Brasil: medidas adicionais para o controle da doença devem ser priorizadas no Ano do Pulmão

## Irma Godoy

Brazil is currently going through a special phase of smoking control, with a sharp reduction in the prevalence of current smoking among adults living in urban areas. The results regarding the adult populations of 27 cities evaluated by the Sistema de Vigilância de Fatores de Risco e Proteção para Doenças Crônicas por Inquérito Telefônico (VIGITEL, Telephone-based System for the Surveillance of Risk and Protective Factors for Chronic Diseases), published in this issue of the Brazilian Journal of Pulmonology, showed the mean prevalence of current smoking to be 16.1%.<sup>(1)</sup> The prevalence was higher among the male individuals interviewed (20.5%) than among the female individuals interviewed (12.4%). In addition, it was particularly high among individuals who had less than nine years of schooling. Data collected in Brazil between 1989 and 2003, for the Pesquisa Nacional de Saúde e Nutrição (PNSN, National Health and Nutrition Survey) and the World Health Survey, showed a decrease of 35% in the prevalence of current smoking during the period of the study, from 34.8% to 22.4%.<sup>(2)</sup> However, the income affected this decrease, and the relationship between smokers with low purchasing power and smokers with higher personal income increased by 100% between 1989 and 2003. Therefore, 40.9% of the males and 29.0% of the females with low purchasing power were still smoking in 2003, whereas the mean rate for the general population was 22.4%. Similarly, the prevalence of current smoking among individuals residing in rural areas was higher than was that among individuals residing in urban areas (25.5% vs. 21.8%).(2)

The results above show that the measures adopted by the National Program for Smoking Control are effective. In addition, they underscore the fact that many people stop smoking despite the inadequate number of treatment centers, limited pharmacological support and lack of commitment on the part of Brazilian health care professionals regarding patient counseling.<sup>(3)</sup> However, certain indicators, which might allow estimates for the future of the pandemic, have yet to be thoroughly investigated. The prevalence of current smoking among Brazilian children and young Brazilians was not investigated in the studies cited above and remains mostly unknown; in addition, this information was not included in the 2002 or 2004 edition of the World Health Organization Tobacco Atlas.<sup>(4,5)</sup> Only regional data are available: in the city of Rio de Janeiro, the prevalence of current smoking among boys was reported to be 9.1%. In addition, the prevalence and the characteristics of current smoking by individuals residing in rural areas (including the smoking of hand-rolled cigarettes) are not well known. The smoking of hand-rolled cigarettes becomes especially important when we observe that the prevalence of current smoking is higher among individuals with lower purchasing power and lower levels of education.<sup>(1,2)</sup>

According to the recommendations of the World Health Organization, the six measures that are considered the most efficient for smoking control include the following<sup>(6)</sup>:

- 1. Monitoring tobacco use and establishing prevention policies
- 2. Protecting the population from exposure to cigarette smoke
- 3. Offering assistance for smoking cessation
- 4. Warning about the damage caused by smoking
- 5. Banning tobacco advertising and promotion, as well as tobacco company sponsorships
- 6. Raising taxes on tobacco

In Brazil, much has been done in the past 15 years to control the tobacco epidemic. The results are clearly positive, which motivates us to fight new battles. Among these, preference should be given to measures that protect individuals who are less privileged from a financial or educational standpoint. Laws establishing smoke-free environments, successfully adopted in some cities and states of Brazil, and the revision of law 9294/96 by the national congress, with the same objective, are measures that aim to protect the entire population, regardless of socioeconomic status or level of education. Increasing cigarette prices is also a highly effective measure to reduce tobacco consumption, particularly among adolescents.<sup>(7)</sup>

The approval of national legislation that ensures that public internal and external environments are smoke-free environments, without designated smoking areas, and increases in cigarette prices should be accompanied by an increase in the number of treatment centers offering all available resources with a level of efficacy recognized by the guidelines on this topic.<sup>(8)</sup> The treatment of smokers is extremely important in order to reduce the effects of smoking on the health of the smokers and to reduce the financial costs of the treatment of smoking-related diseases.<sup>(5)</sup>

In 2010, The Year of the Lung, it is imperative that all health care professionals, particularly pulmonologists, join efforts to spread information, as well as supporting and implementing new measures that contribute to the prevention, control and treatment of smoking. Expanding the current surveillance system toward monitoring the prevalence of current smoking in the population, including children and adolescents residing in rural areas of the country, will allow more reliable evaluation of the effects of the current measures and of any new measures that might be implemented.

## Irma Godoy

Adjunct Professor of Pulmonology, Department of Clinical Medicine, Paulista State University Botucatu School of Medicine, Botucatu, Brazil Coordinator of the Brazilian Thoracic Society Commission on Smoking

## References

- Malta DC, Moura EC, Silva SA, Oliveira PP, Costa e Silva VL. Prevalence of smoking among adults residing in the Federal District of Brasília and in the state capitals of Brazil, 2008. J Bras Pneumol. 2010;36(1):527-34.
- Monteiro CA, Cavalcante TM, Moura EC, Claro RM, Szwarcwald CL. Population-based evidence of a strong decline in the prevalence of smokers in Brazil (1989-2003). Bull World Health Organ. 2007;85(7):527-34.
- 3. Tanni SE, Iritsu NI, Tani M, de Camargo PA, Sampaio MG, Godoy I, et al. Risk perceptions and behavior among hospitalized patients with smoking-related diseases. Prev Chronic Dis. 2009;6(4):A138.
- 4. Mackay J, Eriksen M. The Tobacco Atlas. Geneva: WHO Press; 2002.
- 5. Shafey O, Eriksen M, Ross H, Mackay J. The Tobacco Atlas. 3rd ed. Geneva: WHO Press; 2008.
- World Health Organization. WHO report on the global tobacco epidemic 2009: Implementing Smoke-Free Environments. Geneva: WHO Press; 2009.
- DiFranza JR, Savageau JA, Fletcher KE. Enforcement of underage sales laws as a predictor of daily smoking among adolescents: a national study. BMC Public Health. 2009;9:107.
- Reichert J, Araújo AJ, Gonçalves CM, Godoy I, Chatkin JM, Sales MP, et al. Smoking cessation guidelines--2008. J Bras Pneumol. 2008;34(10):845-80.