

causes premature wrinkles, bad breath, stained teeth and fingernails, gum disease, dental problems, a hoarse voice, and chronic cough.

“Women only”

The question of why women start and continue to smoke is explored in a special chapter of the book which reveals the importance of gender difference in the physiology and social psychology of smoking. Details range from the impact of tobacco products and advertising targeted at women, through the need to address the fear of weight gain when helping women to stop smoking.

The tobacco industry has increased both the amount and variety of products and promotion designed to appeal to women. The industry has even created “women only” brands, using particular colours, shapes, sizes, names and tastes to give women the impression that smoking will make them successful, youthful, happy and slim.

It is well known that psychosocial factors influencing the maintenance of smoking can be negative, such as to cope with stress, or positive, such as to obtain pleasure. The former seem to be the major influence in women, the latter in men. Women smokers report that smoking helps them cope with loneliness, sadness, grief, anger and frustration.

Another gender-specific feature is that once women start smoking, they may find it more difficult to quit than men, including because of fear of weight gain. Disadvantaged women who live in particularly difficult circumstances are also less likely to give up smoking than better-off, middle-class women.

Moreover, although many women manage to refrain from smoking for a long time, they may relapse in situations involving negative emotions, such as conflicts, stress or loss. Men, on the contrary, tend to relapse in positive situations, such as social events.

Action urgently needed

In its conclusion, the study describes the actions that need to be taken by governments, policy-makers, health professionals and women’s groups to protect girls and women from starting to smoke and to plan cessation programmes specifically designed to reach and influence women. It stresses the urgent need for each country to develop a strategy for preventing female tobacco consumption, thus morbidity and mortality caused by tobacco, from reaching the levels observed in men.

In this respect, preventing girls from taking up the smoking habit is certainly the most efficient measure. It requires a combination of improving their knowledge of the effects of tobacco, developing personal and social skills which will enable them to resist social pressure to smoke, and involving family, schools and other youth networks in promoting healthy life-styles.

This first worldwide study of the scale and health impact of tobacco use by women will undoubtedly become a major tool in WHO’s efforts to promote a tobacco free society.

World Health Organization, Geneva

Let us help the developing countries avoid dependence on tobacco!

The Eighth World Conference on Tobacco or Health opened on Monday, 30 March 1992 in Buenos Aires, Argentina, in the presence of the Argentine President Carlos Menem, many ministers of health, and several hundred specialists from all over the world.

In his opening address Dr. Hiroshi Nakajima, Director-General of the World Health Organization (WHO), painted a candid picture of the world situation regarding the control of smoking and its adverse effects on health, while stressing the progress made towards a tobacco-free society.

“Over the past few years the movement for the protection and promotion of health has gained momentum”, he commented. “Yet still each year three million people die as a result of tobacco-related diseases. It is projected that, if control measures on a wider scale are not undertaken urgently, within the next few decades the annual death rate will be ten million”.

This first conference on tobacco or health held in a Latin American country was devoted specifically to the planning and implementation at regional level of strategies for the prevention and control of smoking. The task is particularly arduous in the developing countries, where the tobacco industry is trying to conquer new markets to make up for those it is losing through the decline in smoking in many developed countries.

Dr. Nakajima said that the profits at stake for the tobacco industry are enormous, but so too are the health risks for the population of the world. “It is not acceptable that, together, the five largest multinational tobacco companies have annual revenues that are more than 60 times the annual budget of WHO”. The gross revenue of the largest of these companies from its international tobacco operations is equal to the gross domestic product of Bangladesh, a country of 115 million inhabitants. “But the industry is losing over 8000 of its con-

sumers every day”, Dr. Nakajima went on, “which means that, to survive, it must advertise its products to encourage young people to consider smoking as glamorous and socially acceptable behaviour”. Moreover, the multinational companies, with their headquarters located in the most developed countries, are investing large amounts in the development of tobacco growing and manufacturing industries in developing countries. This produces two-fold dependence: to the biological dependence of smokers on nicotine is added the economic dependence of the producer countries on tobacco growing. Indeed, the prospect of short-term financial returns often overshadows the harmful longer-term consequences for health and for many governments produces a dependence on tobacco just as serious as a smoker’s dependence on cigarettes. A special effort must therefore be made on behalf of developing countries. “WHO is striving to protect the populations of these countries from tobacco consumption and its consequences, before epidemic proportions are reached”, Dr. Nakajima said. At the same time, assistance is needed for those developing countries where tobacco production is a

major source of income for economic and health development. Dr. Nakajima stressed that development agencies should assist these countries to introduce the necessary economic changes and to diversify their agriculture, particularly through crop substitution.

One of the important items on the agenda of the Buenos Aires Conference is the need to take a wide variety of measures simultaneously to control smoking. Education, information, restrictions on advertising, encouraging people to stop smoking: these are all elements which, combined with an array of economic and social measures, can reduce morbidity and mortality attributable to smoking.

Reaffirming the importance he attaches to the fight for a smoke-free society, the WHO Director-General concluded his opening address by stating: “Tobacco should not be allowed to damage the precarious economic and health equilibrium of the world in which we live ... I appeal once again for a joining of forces, in a way that has already been successful, so that we can work together for peace and health”.

World Health Organization, Geneva