IN MEMORY OF


FOR THEIR LIFETIME ACHIEVEMENTS IN BATTLING THE TOBACCO PANDEMIC
THE TOBACCO ATLAS
THIRD EDITION

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THE CANCER ATLAS

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CONTENTS

Forewords 8
John R. Seffrin, CEO, American Cancer Society, and Peter Baldini, CEO, World Lung Foundation

Reviews 10

Preface 11

Acknowledgments 12

Photo Credits 14

About the Authors 15

Glossary 16

PART ONE: PREVALENCE AND HEALTH

Chapter 1 TYPES OF TOBACCO USE 18
Different forms of smoking and smokeless tobacco, e.g., cigarettes, pipes, bidis, kreteks.

Chapter 2 MALE SMOKING 22
Smoking prevalence among men. Trends in selected countries. Top ten countries with highest male smoking rates.

Chapter 3 FEMALE SMOKING 24
Smoking prevalence among women. Trends in selected countries with highest smoking rates among women.

Chapter 4 HEALTH PROFESSIONALS 26
Smoking prevalence: Smoking in health-care facilities. Counseling for smoking cessation.

Chapter 5 BOYS’ TOBACCO USE 28
Tobacco use prevalence among boys. Smoking initiation. Top ten countries.

Chapter 6 GIRLS’ TOBACCO USE 30

Chapter 7 CIGARETTE CONSUMPTION 32

Chapter 8 HEALTH RISKS 34
How smoking harms you. Smoking during pregnancy. Deadly chemicals. Time ticks away (every cigarette takes seven minutes off your life). Lung cancer risk.

Chapter 9 SECONDHAND SMOKING 36
Harm caused. Children exposed to passive smoking. Numbers affected by passive smoking.

Chapter 10 DEATHS 38
PART TWO: THE COSTS OF TOBACCO

Chapter 11 COSTS TO THE ECONOMY
Health-care costs attributable to tobacco. Sick days. Cost of fires caused by smoking in different countries.

Chapter 12 COSTS TO THE SMOKER
Cost and minutes of labor required to buy a pack of cigarettes. Bread, rice, Big Mac, and cigarette prices compared.

PART THREE: THE TOBACCO TRADE

Chapter 13 GROWING TOBACCO

Chapter 14 TOBACCO COMPANIES
Leading manufacturers by country. The Big Five. Global cigarette market share.

Chapter 15 TOBACCO TRADE

Chapter 16 ILLEGAL CIGARETTES

PART FOUR: PROMOTION

Chapter 17 MARKETING

Chapter 18 BUYING INFLUENCE
Buying influence: expenditures on lobbying and buying favors.

Chapter 19 TOBACCO INDUSTRY DOCUMENTS
Number of documents per country. Top five countries. Quotes from industry documents.

PART FIVE: TAKING ACTION

Chapter 20 RESEARCH
Recent research findings. NIH expenditure on tobacco compared with other health problems. Published research by Medline/PubMed search for tobacco compared with other journal topics.

Chapter 21 CAPACITY BUILDING
Country tobacco control capacity. Countries with the highest per capita government expenditure on tobacco control. Organizations funding tobacco control.

Chapter 22 WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL
Signatories and parties to the WHO FCTC. Main provisions of the WHO FCTC. Tobacco industry strategy. Initial protocols and guidelines.

Chapter 23 SMOKE-FREE AREAS

Chapter 24 MARKETING BANS
Advertising bans. Point-of-sale ad bans by region. Exerting control over media choices: R-rated movies. Compliance with ban on direct advertising. Decline in brand recognition after a ban on tobacco advertising on print, electronic media, and billboards. Hong Kong.

Chapter 25 PRODUCT LABELING
Size of warnings on tobacco packs. First countries to introduce graphic health warnings. Bans on terms such as “low tar,” “light,” “ultra-light,” or “mild.” Health warnings in high-, middle-, and low-resource countries. Examples of Canadian warnings.

Chapter 26 PUBLIC HEALTH CAMPAIGNS

Chapter 27 QUITTING SMOKING
NRT availability, with and without funding, and counseling. Effects of starting and quitting smoking on deaths. Smoking cessation: Recommendations. Reasons for quitting by gender. Quitting calendar.

Chapter 28 TOBACCO PRICES AND TAXES
Tobacco tax as a proportion of cigarette price. Smoking goes down as price goes up. Real cigarette tax revenues go up as real cigarette taxes go up.

Chapter 29 LITIGATION
Lawsuits, by country. Global litigation. Range of lawsuits and number of cases.

Chapter 30 RELIGION
Majority and plurality religions. World religions by population. Quotes from religious leaders. Major religions’ views on tobacco.

Chapter 31 THE FUTURE
Epidemiology, health, economics, the tobacco industry, action taken, 2000–2050.

Chapter 32 THE HISTORY OF TOBACCO
Historical highlights, key events, and action taken to curb the pandemic.

PART SIX: WORLD TABLES

Table A: THE DEMOGRAPHICS OF TOBACCO
Table B: THE BUSINESS OF TOBACCO
Sources
Useful Contacts
Index
Tobacco alone is predicted to kill a billion people this century, 10 times the toll it took in the 20th century, if current trends hold. Of the approximately 650 million smokers alive today—10 percent of the current world population—one in two of those who continue to smoke will die of smoking-related diseases. An increasing proportion of those deaths will occur in low- and middle-income countries, which will be faced with the severe financial, social, and political consequences. There is no doubt that tobacco use and its health effects have created an epidemic on a global scale.

Yet the extraordinary level of suffering and death from this epidemic is not inevitable. With comprehensive and concerted action, we can reduce or eliminate many of the dangers associated with tobacco, and in so doing, we can save hundreds of millions of lives. But in order to be successful in our fight against tobacco, we must know what this enemy looks like throughout the world.

That’s why the information contained in The Tobacco Atlas is so crucial. Along with detailed tobacco statistics on nearly every country around the globe, this publication offers in-depth information on the prevalence of tobacco and health, the costs of tobacco, the tobacco trade throughout the world, how tobacco is promoted and marketed, and the tobacco control efforts already under way. The scope of this timely and compelling data means that this single resource can help advocates in every nation get the knowledge they need to combat the scourge of tobacco in their communities and on the worldwide stage.

The Tobacco Atlas also provides a more intangible, but no less powerful, weapon in the fight against tobacco—hope. The significant updates and exciting developments chronicled in this publication prove that we are indeed making progress against tobacco and they pave the way for greater strides in the future.

Tobacco is a serious foe. But armed with comprehensive information like that found in this publication, we are better prepared to repel the industry’s relentless assault and move ever closer to a day when we can finally declare victory over tobacco.

John R. Seffrin, PhD, Chief Executive Officer, American Cancer Society
Reviews of previous editions of *The Tobacco Atlas*

“*The Tobacco Atlas* is the best thing of its kind I’ve ever seen.”
—C. Everett Koop, Former U.S. Surgeon General

“Informative, so easy to read, beautiful to look at.”
—Dr. Annie J. Sasco

“I profited from reading the 2006 second edition of *The Tobacco Atlas***.
—Dr. R. F. Gillam, Faith-Based and Community Organizations, Centers for Disease Control and Prevention

“It’s really helpful and an informative guide for tobacco control advocates.”
—Syed Mahbubul Alam Tahin

“Excellent.”
—Professor Gérard Dubois

“*The Tobacco Atlas* is intended for readers interested in the effect tobacco has on health, politics, economics, big business, corporate behavior, globalization, smuggling, tax, religion, allocation of resources, poverty, gender issues, human rights, children, human development, and the future.

This third edition of *The Tobacco Atlas* maps the history, documents the current situation, and predicts the future of the tobacco epidemic. The chapters illustrate that tobacco is not simply a matter of personal choice, but also involves a political and economic panorama of global social and demographic change, government policy, and corporate strategies, including tobacco industry activities such as smuggling, deceptive marketing, and evasion of corporate responsibility. This Atlas reflects the importance of multilateral approaches to reduce the epidemic, requiring action by the World Health Organization, other UN agencies, governmental and non-governmental organizations (NGOs), the private sector, and concerned individuals—in fact, the whole of civil society.

Since the previous edition of *The Tobacco Atlas* was published in 2006, there have been several significant developments in global tobacco control. To date, 162 countries have ratified the WHO Framework Convention on Tobacco Control, the first application of international law to further public health. In 2008, the World Health Organization issued the MPower report, a comprehensive analysis of global tobacco use and control efforts. The MPower report provides an unprecedented level of detail and a roadmap for effective solutions. The recent contributions of major international donors, such as the Bloomberg Philanthropies and the Bill and Melinda Gates Foundation, have improved the global tobacco control environment by significantly increasing levels of funding for tobacco control efforts in low- and middle-resource countries.

As the costs of tobacco have been more carefully studied in different national economies, policy makers and the public are realizing that tobacco control benefits the health and wealth of nations and individuals. More countries have passed legislation to increase tobacco taxes, ban tobacco promotion, require health warnings, and create smoke-free areas in public places. In many countries, tobacco industry documents are being analyzed to expose the harmful activities of the tobacco industry and hold it responsible for damages. The most effective national tobacco control plans integrate comprehensive tobacco control activities into existing health and education programs. Despite progress in policy development and public awareness, the world’s total number of smokers and the number of tobacco-related deaths continues to grow. This unfortunate trend, due largely to global population increases, is likely to continue for the foreseeable future. Tragically, the tobacco burden is falling increasingly on low- and middle-resource countries, and the concern that more women are smoking cannot be underestimated.

The publication of this third edition of the atlas marks a critical juncture in the unfolding pandemic. With an eye on the past century and the remainder of this century ahead, we can choose to stand by idly while the tobacco industry causes another one billion deaths this century. We can choose to stand by idly and watch the tobacco industry cause another one billion deaths this century or we can embrace the spirit of the Framework Convention on Tobacco Control by implementing robust and effective measures to protect people’s health and the wealth of nations. Millions of lives, trillions of dollars, and the world’s prospects for an equitable future hang in the balance.

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Judith Mackay, World Lung Foundation, Hong Kong, SAR China
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**Chapter 3: Female Smoking**
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- Anatomy figure: Tony De Feria

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**GLOSSARY**

- Addiction – A physiological or psychological depend- ence on a substance characterized by behavioral or physio- logical symptoms, such as tolerance, withdrawal symptoms, uncontrolled use, and the desire or inability to control the use of or take the substance.

- Advertising – Any commercial effort to promote tobacco consumption, including the display of trade- marks, brand names, and manufacturer logos, mar- keting of tobacco products, sponsorship of sports and other social and cultural activities, and other methods.

- BCEE – Before the Common Era

- Billion – 1,000 million

- Bupropion – An antidepressant pharmaceutical sold as a smoking cessation aid and dopamine reuptake inhibitor as well as a nicotine replacement therapy. It was first approved for smoking cessation in 1997.

- Cancer – A type of disease in which abnormal cells divide uncontrollably. Cancer cells can invade nearby tissues and spread through the bloodstream and lymphatic system to other parts of the body. Tobacco consumption significantly increases incidence and mortality due to many types of cancer, especially cancers of the large and oral cavity. Tobacco is also a causative factor of many diseases such as hospital services, physician and outpatient services, prescription drugs, nursing home services, home health aid, dental care, changed expenditures due to increased utilization of services.

- Costs – Monetary costs associated with tobacco use.

- Direct costs – Health-related costs due to diseases caused by smoking, healthcare costs, such as hospital services, physician and outpatient services, prescription drugs, nursing home services, home health aid, dental care, changed expenditures due to increased utilization of services.

- Indirect costs – Productivity costs caused by tobacco-related illness or premature death of workers.

- Total costs – The sum of direct and indirect tobacco-attributable costs to society.

- Coronary artery disease – Also known as coronary artery disease when the walls of the coronary arteries become scarred and thickened due to the progression of atherosclerosis.

- Coronary artery disease – A pathological condition of the coronary arteries that results in the narrowing or blockage of the blood vessel, preventing blood from reaching the heart muscle. It can lead to heart muscle damage or death.

- Cotinine – A substance produced by the liver as a result of the body's metabolism of nicotine.

- Cotinine measurement – The measurement of cotinine levels in various bodily fluids, such as blood, urine, or saliva, to estimate tobacco use.

- Cost of illness – The cost of direct and indirect costs associated with tobacco use.

- Cost of smoking – The total cost of tobacco-related illness or premature death; loss of productivity and earnings.

- Cardiovascular health – The health of the heart and blood vessels, including the circulatory system, which includes the heart, arteries, veins, and capillaries.

- Cardiovascular disease – A group of diseases that affect the heart and blood vessels, including coronary artery disease, heart attack, stroke, and other conditions.

- Cardiovascular health – A type of disease characterized by abnormalities in the heart and blood vessels, leading to conditions such as coronary artery disease, heart attack, stroke, and other related conditions.

- Cardiovascular disease – The disease caused by the accumulation of plaque or fatty deposits in the arteries, leading to narrowing or blockage of the arteries.

- Chronic obstructive pulmonary disease (COPD) – A chronic lung disease, such as asthma or chronic bronchitis, that causes inflammation and hypersecretion of mucus, resulting in symptoms such as shortness of breath, coughing, and frequent respiratory infections.

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