

# World No Tobacco Day Webcast

## 31<sup>st</sup> May, 2019

### Faculty



**Dr. Sundeep Salvi**

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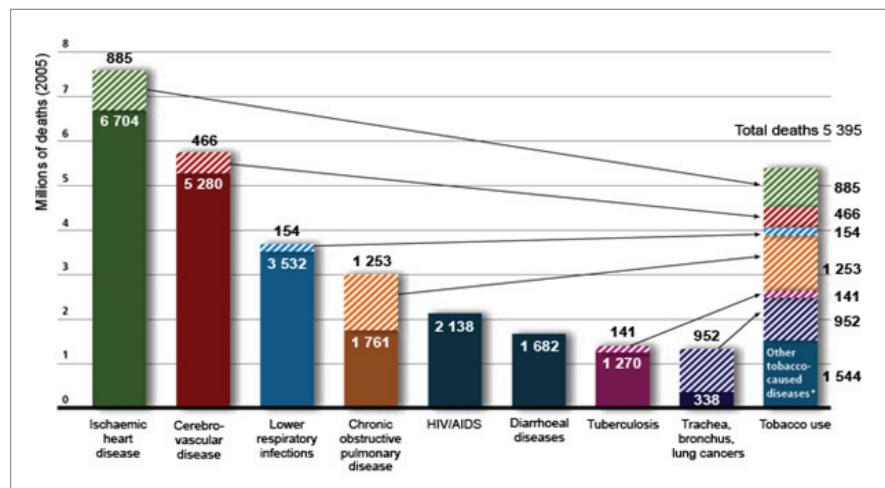
### Key Highlights

On the occasion of World No Tobacco Day, **Dr. Sundeep Salvi**, MD, PhD, Director – Chest Research Foundation, took session on burden of tobacco use.

**Following are the key highlights of the presentation:**

- **Nicotine present in the tobacco causes addiction** by affecting mesolimbic dopaminergic pathway & locus coeruleus.
- China, India and USA are the top 3 countries with highest deaths in both male and female attributed by tobacco.
- In India, more than 100 million adults and 0.6 million children are using tobacco daily. **In 2016, ~ 9.3 lakh people were killed by tobacco use.**

**Tobacco use is a risk factor for six of the eight leading causes of death in the world.**



- Tobacco smoking is the **major cause for COPD worldwide**.
- **Tobacco is also associated with cancer** of respiratory tract, upper gastrointestinal tract, liver, pancreas, kidney, etc.
- **Tobacco could attribute in the development of chronic diseases** such as stroke, heart disease, chronic pulmonary disease and asthma, reduction in bone density, etc.
- A smoker possesses high bacterial abundance in their airways majorly *streptococcus pneumoniae* due to reduced phagocytic capacity of macrophages, thereby increasing risk of TB.
- According to WHO, tobacco is world's **single greatest preventable cause of death**.

In continued session, **Dr. Lancelot Pinto**, MD, Consultant Respirologist, P. D. Hinduja National Hospital and Medical Research Center spoke on smoking cessation with NRTs.



## Dr. Lancelot Pinto

MBBS, DNB, MSc, FCCP (USA), ECFMG Certified (USA)

Consultant, P. D. Hinduja National Hospital, Mumbai

### Following are the key highlights:

- **Tobacco cessation is need of the hour in India** for early prevention and treatment of tobacco attributed diseases.
- Tobacco smoking is a chronic disease with organic and structural basis and not just a function of will power.
- Counselling does help smokers but also it **needs more than just counselling**.
- Assess the level of nicotine addiction and assist patients who are willing to quit. At least assist the individuals, who wants to cut-down the use of tobacco but is not ready to quit.
- Before considering any cessation therapy **assessment of nicotine dependency is important**.
- **Fagerstrom test for nicotine dependence is most preferred test** for the assessment of nicotine dependency.
- If needed, pharmacological intervention such as **Nicotine Replacement Therapy (NRT) could be used**.
- NRTs increase the rate of quitting by 50% to 60%.
- Combined NRT strategies have shown better quit rates than intervention by any single NRT.
- Special population such as pregnant or breast-feeding mothers, patients with CVD and respiratory diseases should be handled carefully.

### Model for treatment of tobacco use and dependence

