

AN AVOIDABLE HEALTH DISASTER

Tobacco smoking continues to place an extraordinarily heavy burden on global health. By **Richard Hodson**; infographic by **Mohamed Ashour**

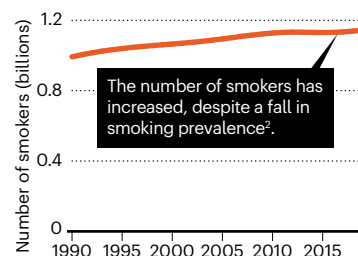
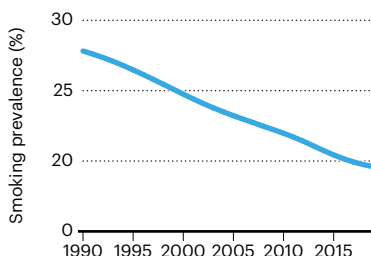
DEFYING PROGRESS

Efforts to discourage smoking have steadily reduced its prevalence from 27.8% of the global population in 1990 to 19.6% in 2019 (ref. 1). However, the total number of people who smoke has actually increased over the same period, owing to population growth.

1.14

Global number of smokers in 2019

BILLION PEOPLE



PREVENTABLE DEATHS

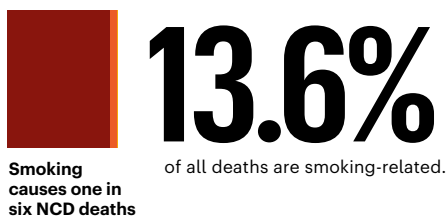
More than one in ten deaths can be attributed to smoking². Most smoking-related deaths stem from one of just four non-communicable diseases (NCDs): ischaemic heart disease, chronic obstructive pulmonary disease, stroke and cancer of the trachea, bronchi and lungs.

- Non-communicable diseases **74.4%**
- Communicable, maternal, neonatal and nutritional diseases **18%**
- Injuries **7.6%**

ALL DEATHS



SMOKING-RELATED DEATHS



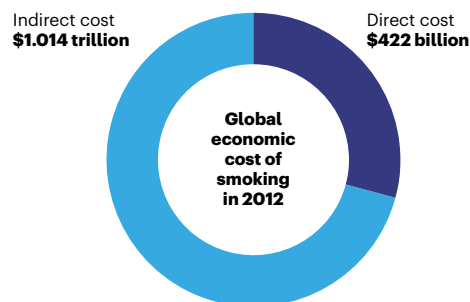
200

MILLION YEARS

of healthy life were lost to disability and death in 2019 as a result of smoking².

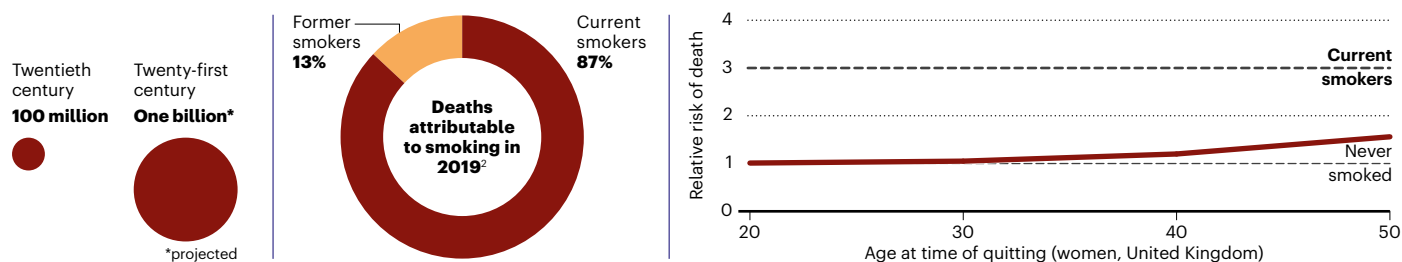
ECONOMIC STRAIN

Direct health expenditure on smoking-related diseases, as well as indirect costs of smoking such as lost labour due to disability and death, cost the world more than US\$1.4 trillion in 2012 (ref. 3). These costs outweigh the value generated by the sale of cigarettes.



NEVER TOO LATE

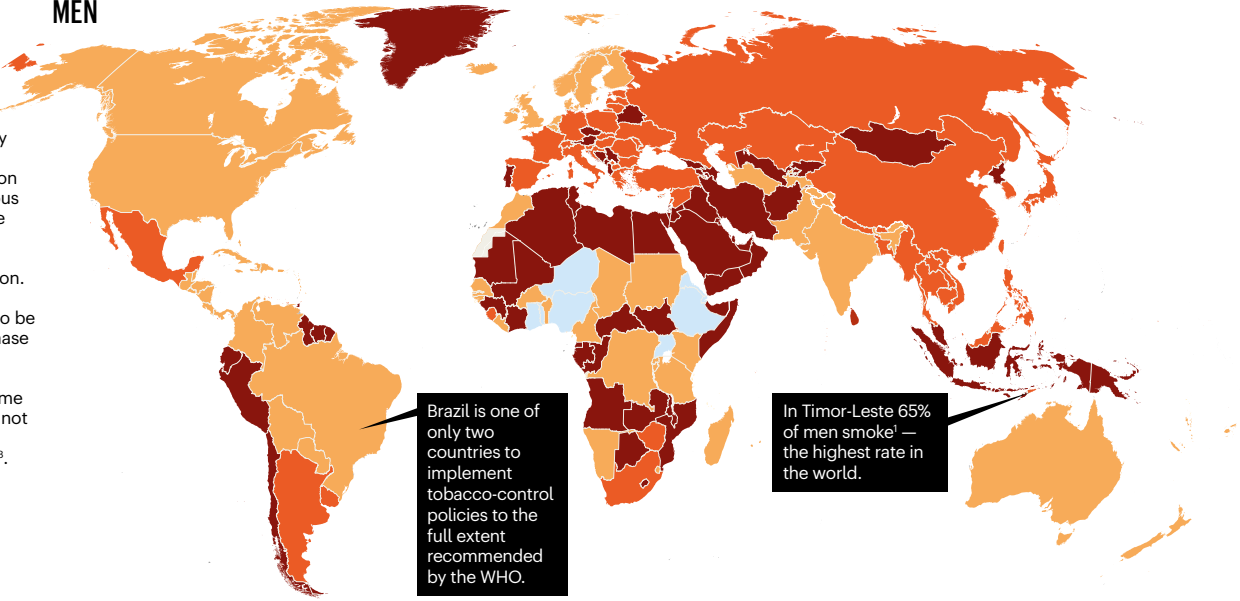
If current smoking patterns do not change, by the end of the twenty-first century ten times as many people will have died from smoking as during the whole of the twentieth century⁵. The vast majority of people who will die will be those who continue to smoke; quitting at any age reduces the risk of a smoking-related death considerably⁶.



BATTLING AN EPIDEMIC

MEN

The fight against tobacco smoking has reached different stages in various parts of the world. In many high-income countries (HICs), smoking rates are on the way down from previous highs, thanks in part to the adoption of anti-smoking policies such as plain packaging and high taxation. Low- and middle-income countries are more likely to be experiencing an earlier phase of the epidemic, in which smoking rates are yet to decline. In some low-income countries, smoking might not yet have taken hold at all, especially among women⁸.



Brazil is one of only two countries to implement tobacco-control policies to the full extent recommended by the WHO.

In Timor-Leste 65% of men smoke¹ — the highest rate in the world.

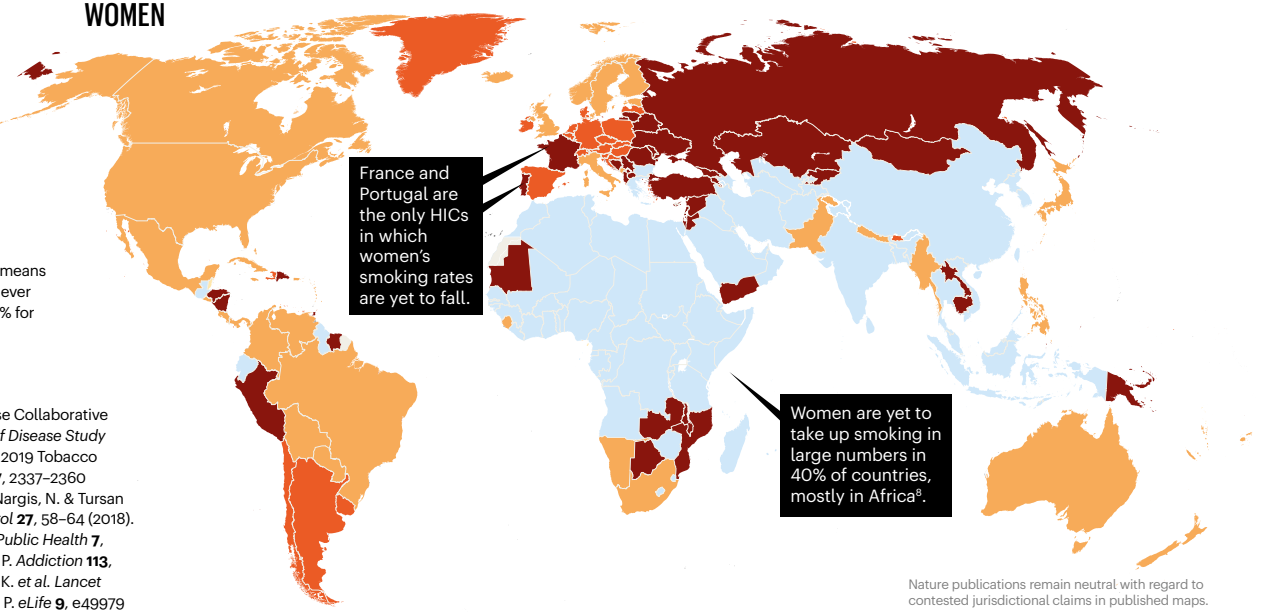
- Phase 1: high prevalence and not declining
- Phase 2: high prevalence and declining
- Phase 3: low prevalence and declining
- Phase 0: never had high prevalence

'Not declining' in phase 1 means that smoking rates have never declined by more than 10% for men and 5% for women.

REFERENCES

1. Global Burden of Disease Collaborative Network. *Global Burden of Disease Study 2019* (IHME, 2021). 2. GBD 2019 Tobacco Collaborators. *Lancet* **397**, 2337–2360 (2021). 3. Goodchild, M., Nargis, N. & Tursan d'Espaignet, E. *Tob. Control* **27**, 58–64 (2018). 4. Nargis, N. *et al. Lancet Public Health* **7**, E834–E843 (2022). 5. Jha, P. *Addiction* **113**, 1392–1393 (2018). 6. Pirie, K. *et al. Lancet* **381**, 133–141 (2013). 7. Jha, P. *eLife* **9**, e49979 (2020). 8. Dai, X., Gakidou, E. & Lopez, A. D. *Tob. Control* **31**, 129–137 (2022).

WOMEN



France and Portugal are the only HICs in which women's smoking rates are yet to fall.

Women are yet to take up smoking in large numbers in 40% of countries, mostly in Africa⁸.

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90%

Quitting smoking before the age of 40 avoids more than 90% of the excess risk of death⁷.

A TURNING TIDE?

Policies that promote smoking cessation are common in countries with high economic and social development, and have led to roughly equal numbers of current and former smokers. In nations with lower development, where an increase in smoking might have occurred more recently, cessation efforts are yet to have as significant an effect⁸.

