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From smoking to vaping

Ahmed Ali, 33, a MBBS student, started smoking in 2017. He became addicted to smoking as he gradually increased the consumption of cigarettes and started more than 20 cigarettes a day. Consequently, his health deteriorated. "I have health issues like acidity, cough attacks and an upset stomach." He told the Alternative Research Initiative (ARI), in an interview at Jinnah Super Market, Islamabad. He tried to quit smoking. For this, he has given a chance to Velo but the product has not helped him. Further, he noticed that it has serious side effects on health. "By using Velo, I became a diarrhea patient and have continued stomach issues."

According to estimates, there are 31 million tobacco users in Pakistan. Out of them 17 million are cigarette smokers. Smoking causes 160,189 deaths a year in the country while the total cost of smoking-related diseases and deaths was Rs 615.07 billion, equal to 1.6% of Pakistan's GDP in 2019. On the other side the revenue generated from the cigarette industry was 135 million in 2020-2021.

Last year, he visited a doctor in Rawalpindi for the treatment of diarrhea, cough attacks and stomach issues. The doctor advised him to give vaping a try for giving up smoking and overcoming the health issues as all of these diseases are induced by the smoking habit. "The doctor advised me to start using e-cigarette to give up smoking as it is less harmful than regular cigarettes." He says switching from smoking to e-cigarette has worked as he never used a cigarette after switching to vaping.

According to a research study by the ARI, for most of the vapers (64.5%), friends are the first source of introduction to vaping while for 25.2% vapers, they came to know about vaping through social media platforms. Further, 91% of vapers in the country do not consult with doctors in connection with switching to e-cigarette to quit smoking. That is why only three percent of smokers successfully quit smoking in a year in Pakistan. If smokers want to give up smoking, they do not know where they should seek assistance.

Ahmed found e-cigarette a useful tool to quit smoking. He found switching to vaping a positive move to quit smoking. "I found vaping less harmful and a possible solution to giving up smoking." His health issues have been resolved after switching to vaping. "I have successfully overcome the health issues with the help of e-cigarette. Now, I do not have stomach problems, diarrhea and cough attacks."

After switching, Ahmed has started to decrease the level of nicotine in his vaping. "My nicotine use has dropped from 50mg to 25mg. Now, I use 25mg of nicotine in an e-cigarette. He said he would further reduce the level of nicotine to gradually give up vaping. "I have successfully stopped smoking. Now, I am trying to reduce the level of nicotine in an e-cigarette and stop using it as the purpose of switching to vaping has been successfully achieved."

He spent around Rs. 6000 on cigarette smoking a month in 2017. Then, it has jumped up to Rs. 10,000-12,000 a month. Now, he spends Rs. 6000-7000 on vaping a month which he believes is economical. When asked about the prices of vaping devices and juices. He said, "vaping devices are expensive but in the long run, they prove to be cheaper because once you buy a device, then you will have only to buy juices."

When asked about the negative effects of vaping, Ahmed says there are myths about the use of e-cigarette. In fact, it is far less harmful than combustible smoking. He says, "I did not feel any negative effects of vaping." He claimed that some substandard products are also available in the market. Pakistan has more than 450 vaping outlets in the upscale localities of major cities. E-cigarettes are legally imported but are being used without any regulations.

According to the Public Health England (PHE), e-cigarette is 95% less harmful than smoking. He believes that the government should sensibly regulate and promote the alternative products by making it part of the tobacco control efforts as vaping is helpful for the smokers who are unable to quit smoking.

A risky exclusion

Arshad Ali Syed

The tenth session of the Conference of Parties to the WHO Framework Convention on Tobacco Control, along with the third session of the Meeting of the Parties to the Protocol to Eliminate Illicit Trade in Tobacco Products, will be held in Panama next month. The tenth session of COP will be held from November 15 to 20 while the MOP3 will be held from November 27 to 30.

Both the meetings are critical to how the parties move forward with their agenda for a smoke-free world. With 182 parties to the convention, the FCTC is one of the “most widely embraced” UN treaties.

On the other hand, MOP3, according to the WHO, “builds upon and complements Article 15 of the WHO FCTC, which addresses means of countering illicit trade in tobacco products, a key aspect of a comprehensive tobacco control policy.” The world has come a long way from the days of accepting tobacco as part of everyday life to planning to completely end its use. Sadly, the high hopes regarding any significant outcomes vis-à-vis ending combustible smoking have already been dashed.

Tobacco harm reduction as a strategy to reduce the harm caused by tobacco use will be absent from the agenda of COP10. This will have a far-reaching impact on the future of safer nicotine products. THR has been defined as “a range of pragmatic policies, regulations and actions which either reduce health risks by providing safer forms of products or substances or encourage less risky behaviours.”

THR can make a life-saving difference for adult smokers — a choice to switch to safer alternatives and eventually quit smoking completely. Despite all the successes on the smoking prevalence front, reality remains grim. In 2023, there are still 1.1 billion smokers globally. Smoking causing 8.8 million deaths annually. 80 percent of the smokers live in low- and middle-income countries.

The WHO says MPOWER is helping 5.3 billion people from the harms of smoking, in LMICs bureaucratic hurdles, political processes, lack of effective tobacco control legislation along with lack of resources remain the main hurdles in achieving a smoke-free future.

Independent scientific evidence has shown some nicotine products to be much safer than combustible and oral tobacco products. The campaign against safer nicotine products only ensures that the adult smokers continue with their combustible smoking, with no chance of lowering risks to their health. This clearly goes against the interest of public health. A case in point is the use of snus and its role in making Sweden an EU country with lowest level of smoking among men. Snus or oral tobacco has traditionally been used for centuries. In the 20th Century, the manufacturing of snus became safe and in 1996 its use in Sweden “overtook smoking among men.”

According to the Global State of Tobacco Harm Reduction (GSTHR), “Sweden has the lowest level of smoking among men in the EU 5 percent against the EU average of 24 percent. Sweden also has the lowest death rate per 100,000 attributable to tobacco in men aged 30 or older.”

On the other hand, tobacco control is frozen in time in Pakistan. The number of tobacco users has risen past 31

million. While advertisements have been banned, smoking remains a major health issue.

If the potential of tobacco harm reduction is ignored, combustible smoking will persist and pervade. Unfortunately, in the run-up to the COP10 safer nicotine products have been presented as a “threat to tobacco control rather than potential tools to support a switch from smoking and reduce high-risk tobacco use.”

The WHO and the participants of the COP10 need to review and understand the “complementary role” of the THR in tobacco control. This can happen, according to GSTHR, “if the international tobacco control community, led by the WHO, can disaggregate combustible from non-combustible tobacco products in its policy and legislative deliberations.” This will only happen if the WHO and the rest of the tobacco control players are open to engagement with the stakeholders and affected communities and encourage smokers to switch to safer nicotine products.

<https://www.thenews.com.pk/tns/detail/1121419-a-risky-exclusion>

Tobacco harm reduction can help Pakistan become smoke free

ISLAMABAD: Pakistan needs to adopt tobacco harm reduction as one of the critical options to assist adult smokers who have been unable to quit and reduce the combustible smoking prevalence.

This demand was made by the Alternative Research Initiative and its partner organizations.

The statement said a smoke free Pakistan is possible provided the tobacco control efforts are diversified and redirected in the light of evidence-based initiatives for the good of public health. It said despite all the gains in the tobacco control efforts over the last two decades, tobacco consumption and especially combustible smoking remain a major health issue.

The statement said with more than 31 million tobacco users, Pakistan was facing an uphill task in addressing the prevalence of combustible smoking. Of the 31 million, 17 million are cigarette smokers. Less than 3% adult smokers successfully quit smoking in a year because of lack of smoking cessation services. It said ARI and its partners support the government’s plans and efforts for tobacco control. However, there is a need to look at and review the emerging evidence regarding the role of tobacco harm reduction in reducing smoking prevalence. It said Sweden is set to become the world’s first “smoke-free” country, which is defined as less than 5% of the adult population smoking. Sweden is going to achieve the target 17 years ahead of the European Union’s 2040 target, as smoking prevalence rate has come down to 5.6% from 15% over the past 15 years. Sweden’s groundbreaking strategy includes assisting smokers switch to “less harmful” alternatives, such as snus, nicotine pouches and vapes.

For achieving a smoke-free Pakistan by 2030, the government should ensure provision of effective, accessible and affordable cessation services and make tobacco harm reduction part of the national tobacco control policy. The safer nicotine alternatives should be sensibly regulated and the health professionals should be made part of the smoking cessation efforts.

THR can save 1.2m lives in Pakistan, study finds

Pakistan can save the lives of 1.2 million people through the widespread adoption of THR and related measures, according to a new study.

According to estimates, there are 31 million tobacco users in Pakistan. Out of them 17 million are cigarette smokers. Smoking causes 160,189 deaths a year in the country while the total cost of smoking-related diseases and deaths was Rs 615.07 billion, equal to 1.6% of Pakistan's GDP in 2019. Pakistan remains divided or opposed to the use of tobacco harm reduction as one of the solutions to reducing the prevalence of combustible smoking. Therefore, e-cigarettes are legally imported but are being used without any regulations.

The study - Integrating harm reduction into tobacco control. How many lives could be saved by accelerating tobacco control policies in Kazakhstan, Pakistan, South Africa, and Bangladesh?" – maintains that the awareness and use of THR, better diagnosis, greater access to more effective cessation services and treatment of lung cancer would help Pakistan to reduce the smoking prevalence and premature deaths from tobacco use.

According to the study, adopting Sweden's THR strategies could save 2.6 million lives in four developing countries by 2060. This landmark study, launched at an event held by tobaccoharmreduction.net in London, provides compelling evidence for the integration of harm reduction measures as a cornerstone of comprehensive tobacco control.

Dr. Derek Yach, principal author of the report, said:

"Traditional measures for tobacco control have hit a plateau, despite smoking remaining the primary preventable cause of premature death globally. Governments already possess the tools for transformation; they only need to recognize that tobacco harm reduction products—already used by 150 million people worldwide—are instrumental in resolving this crisis."

Currently, smoking claims more than 8.5 million lives annually, a toll that the World Health Organization (WHO) predicts will surge to 10 million. Yet, "Integrating harm reduction into tobacco control. How many lives could be saved by accelerating tobacco control policies in Kazakhstan, Pakistan, South Africa, and Bangladesh?" highlights the promise of a different

path, showing that considerable loss of life can be prevented in Kazakhstan, Pakistan, South Africa and Bangladesh by embracing THR.

Dr. Delon Human, a key contributor to the report, states: "Tobacco control alone is insufficient in combating the deeply entrenched cigarette epidemic. It must be augmented by a comprehensive set of harm reduction measures. This includes the acceptance, availability, and affordability of less harmful alternatives like vaping and nicotine pouches, as well as proactive measures for early cancer diagnosis and treatment." Sweden provides the most compelling example of what THR can achieve. The country is on track to become virtually "smoke-free," with smoking rates falling to nearly 5%. This is not only a badge of honour but also translates into the lowest cancer rates in Europe and reduced mortality from smoking. A significant part of this success story is Sweden's thoughtful approach to THR, as highlighted by its recent decision to cut taxes on snus, a less harmful tobacco alternative.

The report provides estimates on the lives that could be saved in the four countries studied, should tobacco control be complemented by harm reduction strategies:

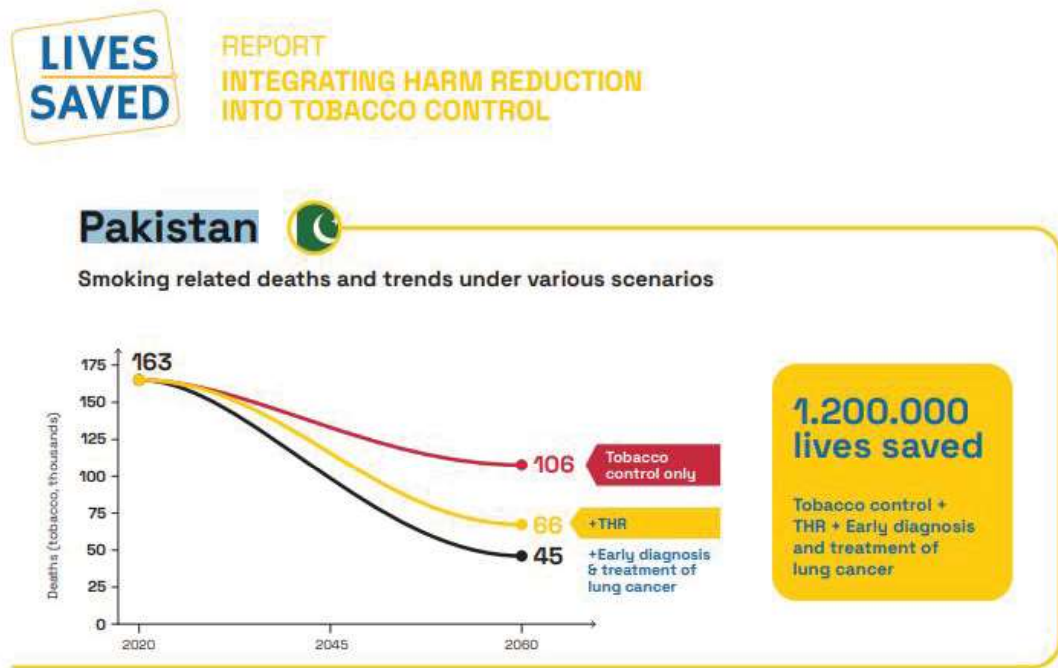


Figure 5: Pakistan potential lives saved by THR

South Africa: 320,000 lives Bangladesh: 920,000 lives Kazakhstan: 165,000 lives Pakistan: 1.2 million lives

Dr. Human adds, "Our message and recommendation are to not abandon tobacco control but enrich it with validated harm reduction strategies. Policymakers worldwide have both the moral obligation and the practical means to act. Adopting harm reduction strategies can radically rewrite the narrative, pivoting us from grim statistics to real stories of lives saved."

https://www.tobaccoharmreduction.net/en/article/more-than-25-million-lives-could-be-saved-in-four-lmics-countries-by-adopting-sweden-smoke-free-strategy?utm_id=1&utm_source=t.co&utm_medium=social&utm_campaign=biomarkers&fbclid=IwAR2QPPAdLH8cAnzn5C11Mefve9YS8BVA51GVaeklvjmbnvPYP522Bpa2NPNQ

Clifford E. Douglas new FSFW president

New York: The Foundation for a Smoke-Free World (FSFW) has named Clifford E. Douglas as President and Chief Executive Officer. Douglas has most recently served as Director of the University of Michigan Tobacco Research Network and as Adjunct Professor in the Department of Health Management and Policy at the University of Michigan School of Public Health. Prior to that he was the American Cancer Society Vice President for Tobacco Control. Early in his career Douglas worked to eliminate smoking on airline flights and was an attorney and advisor in landmark lawsuits against tobacco manufacturers.

Douglas has also managed a \$6 million campaign to eliminate smoking on college campuses, and worked to help Americans understand the relationship between smoking and Covid-19. Douglas has served as the Assistant Director of the Coalition on Smoking and Health; he was also the Associate Director of the American Lung Association national public affairs office and has been the tobacco control advisor to the US Assistant Secretary for Health and the US Surgeon General.

Pam Parizek, Chair of the Foundation Board of Directors said, "For decades Cliff Douglas has been a strong and influential voice in the work to eliminate smoking in America and globally. He understands both the science and societal elements of tobacco issues. His credentials are exceptional, and we are pleased he will lead our foundation effort to fund meaningful research and engage in evidence-based educa-

tion efforts that help those at greatest risk stop smoking." The Foundation is a nonprofit, independent grantmaking organization, dedicated to ending the illness and death caused by smoking, which remains the leading preventable cause of death around the world. Its charitable mission is to accelerate the decline in smoking and the harm it causes everywhere.

Douglas says the Foundation is uniquely positioned to reduce smoking globally, "Our mission is to help end smoking in this generation. I have committed myself to this mission for 35 years and look forward to leading this organization in innovative and impactful efforts to accelerate reductions in smoking prevalence and improve public understanding regarding the nature and health impact of nicotine, and as the U.S. Food and Drug Administration has highlighted, the continuum of risk among different tobacco and nicotine products. We will continue to be a strong and independent voice in helping people around the world find healthier lifestyles."



<https://www.smokefree-world.org/newsroom/Foundation-for-a-Smoke-Free-World-Names-Clifford-Douglas-CEO-as-National-Voice-in-Smoking-Cessation-Work/>

Webinar on role of THR in ending combustible smoking

Alternative Research Initiative (ARI) hosted a webinar on Friday on the role of tobacco harm reduction in reducing smoking prevalence in Pakistan.

Tobacco harm reduction is a public health strategy that is used to reduce the risk of tobacco products – combustible cigarettes – by switching to the lower-risk nicotine and tobacco products.

The webinar was first of its kind held to highlight the role of THR in ending or reducing the prevalence of smoking. It was attended by the partner organizations and individual members of the ARI from across the country.

ARI Research Analyst, Dr. Abdul Hameed Leghari highlighted that Pakistan is facing a heavy burden of deaths and diseases because of combustible smoking, with 31 million tobacco users. "Smoking causes 160,189 deaths a year in Pakistan while the total cost of annually smoking-related diseases and deaths is Rs 615.07 billion, equal to 1.6% of Pakistan's GDP"

He said that people spend Rs. 374 billion on smoking cigarettes a year but the revenue generated from the cigarette industry was Rs. 135 billion in the fiscal year 2020-2021.

Dr. Abdul Hameed said that tobacco harm reduction works as all of the disease risk related to smoking arises from the smoke which consists of tar, carbon monoxide and toxic gases that are entered into the human body after burning tobacco. "It is based on the idea that people smoke for nicotine but die from the tar"

According to the UK's National Health Services (UK's NHS) vaping or e-cigarettes are 95 percent less harmful than regular cigarettes. Therefore, many thousands of people in the UK have already stopped smoking by switching to an e-cigarette. Sweden is also on the path to become a world's first smoke-free country where the smoking ratio has been dropped down to 5.6% with the help of Snus and other less harmful alternatives. A country is considered smoke-free when the smoking ratio is less than 5 percent.

He said due to lack of cessation services only three percent of smokers successfully quit smoking in a year in Pakistan. "To achieve a smoke-free future, Pakistan needs to make tobacco harm reduction and smokers part of tobacco control efforts, ensure effective smoking cessation and sensibly regulate alternatives." He added.

Established in 2018, ARI is an initiative aimed at filling gaps in research and advocacy on ending combustible smoking in a generation. Supported by the Foundation for A Smoke-Free World (FSFW), ARI established the Pakistan Alliance for Nicotine and Tobacco Harm Reduction (PANTHR) in 2019 to promote innovative solutions for smoking cessation.

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