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RESEARCH ARTICLE

REVIEW ARTICLE ON KNOWLEDGE AND ATTITUDE ON ILL-EFFECTS OF SMOKING

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ABSTRACT

Cigarette smoking is the leading cause of preventable diseases and premature death. Smoking can increase the risk of cardiovascular disease, respiratory disease, and 10 different forms of cancer. Cigarette smoking is said to be responsible for over 25 diseases in humans some of which include chronic bronchitis, ischaemic heart disease and cancers of the lung, oral cavity, urinary bladder, pancreas, and larynx. Smokers also face a much greater risk of premature death than non-smokers. Cigarette smoking is an important risk factor for periodontal disease. Cigarette smoking is considered to be the single most important factor responsible for the high prevalence of cancer and for death related to cancer. The aim of this study was to review the literature on knowledge and attitudes of ill-effects of smoking.

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INTRODUCTION

Cigarette smoking is the leading cause of preventable diseases and premature death (Askarian *et al.*, 2013) and it is responsible for more than 5 million deaths every year (Mathers and Loncar, 2006). Smoking can increase the risk of cardiovascular disease, respiratory disease, and 10 different forms of cancer (Hammond *et al.*, 2006; National Center for Chronic Disease Prevention and Health Promotion, 2014). In many low-and middle-income countries, women smoke much less than men. According to the survey, worldwide it was estimated that men smoked nearly five times as much as women (Guindon *et al.*, 2003). Cigarette smoking is said to be responsible for over 25 diseases in humans some of which include chronic bronchitis, ischaemic heart disease and cancers of the lung, oral cavity, urinary bladder, pancreas, and larynx (Atawodi *et al.*, 1955; Desalu *et al.*, 2008). Smokers also face a much greater risk of premature death than non-smokers (Hammond and Horn, 1988). Cigarette smoking is an important risk factor for periodontal disease (Bergstrom, 2006; Heasman *et al.*, 2006; Bergstrom, 2004). Studies show that parental smoking is associated with higher youth smoking (http://articles.timesofindia.indiatimes.com/2009-08_27/india/28156183_1_female-smokers-tobacco-industry-world-lung-foundation). Cigarette smoking is considered to be the single most important factor responsible for the high prevalence of cancer and for death related to cancer (Lee *et al.*, 2006). At least, 4000 chemical compounds are found in a cigarette, of which 60 are known carcinogens (Das, 2003).

The aim of this study was to review the literature on knowledge and attitudes of ill-effects of smoking.

Review of literature

A cross-sectional study (Xianglong *et al.*, 2015) was conducted in four municipal areas of Chongqing using a questionnaire administered to 536 natives young male smokers aged 18–45 years old. The research showed that young adult males with higher education was more likely to have a better understanding of smoking being harmful to health, and showed more positive attitudes towards smoking-related hazards among young adult male smokers. These findings further confirm that awareness of the health hazards posed by smoking was correlated with education (Demaio *et al.*, 2014). The results further confirmed that smokers of different education levels have certain differences on smoking-related attitudes (Lim *et al.*, 2009). This survey revealed that male smokers' attitude of smoking's related hazards among high educational level was more positive than those of low education level. However, no significant difference was observed between the level of education and smoking-related attitudes in many aspects, such as "quitting smoking would improve my health" and "support the provisions that establish smoking bans in public places/workplace". Despite higher awareness of the disadvantages of smoking and a positive attitude towards quitting smoking, it did not necessarily affect some practices in a sample of young adult male smokers. Higher education has higher awareness of the disadvantages of smoking and a positive attitude towards smoking. The results found that no statistically significant correlation was observed between smoking cognition and positive behavior to quit

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smoking in a sample of higher education, and no statistically significant correlation was observed between smoking cognition and positive behavior to quit smoking in a sample of higher education. Most of the young smokers in a study (Catherine *et al.*, 2016) interviewed could actually mention some of the long term effects of smoking e.g. the risk of various types of cancer. Nevertheless, some smokers also believed that these risks can be reduced by a reduction in cigarette consumption and/or by eating healthy. On the other hand, some actually made efforts to reduce the number of cigarettes they consume per day as a way of protecting themselves from the negative health consequences of smoking. Some of the smokers also seem to have resigned themselves to fate. They had even constructed a slogan; anything can kill a man to express this resignation in their own way. Consequently, these smokers expressed the belief that cigarette smoking is not the only source of death and should not carry as much concern as it presently does. A total of 500 college going students participated in this study (Shilpi Singh *et al.*, 2015). Only 4% of the study subjects had an awareness about the effects of smoking on oral health while 40 % had moderate awareness and 56% of the students had poor awareness. The prevalence of signs of oral cancer was found among 4% of the study population. Out of the total study population, 20% of students had good chances of succeeding in quitting the habit of smoking, 70 % had moderate and 10 % had poor chances. Regarding the awareness about *nicotine replacement therapy* (NRT), 4 % of the students had moderate awareness while the remaining 96% of the students had poor awareness. A study (Kevin Silas Christian, 2014) was conducted to assess the knowledge and attitude regarding cigarette smoking among undergraduate students of selected colleges of Pune city. 31% believe that smoking must be banned everywhere in spite of being a smoker. This implies the easy availability of the cigarette had impact on their habit of cigarette smoking. 16% of the respondents have a wrong attitude that passive smoking is not injurious to health. 69% of the respondents have positive attitude that one should not encourage others for smoking. 11% of the students are frightened about their habit of smoking and have social stigma for smoking. More than half of the students (52%) believe that they can leave the habit of smoking. 64% of the smokers have positive attitude that they don't like to smoke in „no smoking zone“ area. 80% of the smokers agree on the statement „Money spent on cigarette can be spent on buying nutritious food“. More than half of the students (57%) regret on their habit of smoking justifying the need of deaddiction.

Another study (Yash Paul *et al.*, 2014) reported that 56% of the students have poor awareness about the different ill effects of smoking on oral health. Only 4% of the total student knows about the different NRT's available. An overwhelming majority (96%) has no idea about NRT. In a study in Africa (Nsereko *et al.*, 2008) the respondents were asked about their knowledge of diseases caused by tobacco consumption and the results were as follows: lung cancer and other forms of cancer 54.9% of the respondents, heart diseases 13.9%, tuberculosis 20.4%, bronchitis 8.1%, and brain retardation 2.4%. All the respondents were asked if they were aware of strategies that may be useful to help quit smoking and 37.7% were aware of strategies with 61.4% indicating they were unaware of useful strategies to use. Most (73%) of the current female smokers as well as the majority (46%) of current male smokers started at

the age of 17–19 years. Of the current smokers, the reasons given for smoking were that tobacco is an absolute need (n=6), five said that tobacco gives pleasure, for another one respondent tobacco diminishes anxiety. For two respondents tobacco diminishes anxiety and is an absolute need, and for one respondent tobacco was used to diminish anxiety and to give pleasure. Of the current smokers, the majority (n=11) expressed the need to give up smoking, whereas four respondents did not want to stop smoking. Of the current smokers, 14 needed help to give up smoking, and only one did not need help in their struggle to stop smoking. More than half of the smokers (n=8) reported to have tried several times to give up smoking. The majority of the smokers (n=10) were willing to give up smoking because they feared the health consequences, and five of the respondents wanted to give up smoking because of the cost of cigarettes.

A survey (Richard *et al.*, 2001) was administered to all of the children present in the fifth and sixth grade classes at all four schools located in the Los Pinos area during November 1996 and the findings suggest that pre-adolescent school children in Honduras are aware of the health risks posed by smoking. The survey suggests that friends and family are an important source of information. In a study in Vietnam (Dao Thi Minh An *et al.*, 2013) only 51.5% of interviewees answered correctly to all three specific health consequences (stroke, heart attack, and lung cancer). The most common health consequence was lung cancer (95.8%), while strokes and heart attacks were found to be much lower (67.6 and 60.9%, respectively) There were significant differences in the knowledge of health consequences for those who have access to positive information and those who did not. Adults at lower secondary, upper secondary, and college or above were more likely to have significantly better knowledge of health consequences of active smoking than those at primary school. A study in Jordan (Ayoub *et al.*, 2014) reported that the majority of participants (98.7%) recognized that smoking has adverse effects on health and that it causes cancer (95.7%), but a smaller proportion recognized the actual types of cancer. Knowledge of smoking-related cancers was high with regard to lung cancer (97.8%), but lower for other cancers. Most of the participants agreed that smoking is a cause of lung cancer (97.8%) More than half of the participants recognized the association between aero digestive tract cancers and smoking. The rate of awareness among university students concerning smoking and oral cancer was 83%. Less than half of the participants recognized smoking as a risk for blood, stomach, kidney, cervical, pancreatic, and bladder cancers. These results indicate that the depth of knowledge on smoking health hazards is inadequate among university students. Females were found to have significantly higher scores than males regarding the association between smoking and various types of cancer. A recent study found that 84% of Pakistani women reported that smoking has a harmful effect on their health and only 14% of them agreed that smoking can cause cancer (Ayoub *et al.*, 2011). Another study from northern Sudan reported that 96% of the participants agreed that smoking can cause cancer (Ahmed, 2013).

Conclusion

Efforts should be taken through mass media, including TV, radio, newspapers, as well as social networking websites such

as Facebook to provide information about the danger of tobacco smoking especially in relation to cancer. Health care professionals should increase the awareness regarding various health risks associated with smoking including different types of cancer. Awareness should be achieved by anti-smoking programs using various modalities including anti-smoking posters, campaigns and lectures

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