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Research Article

**INFECTION AND ROUTINENESS REPORTED WITH  
HEADACHE IN CLINICAL UNDER-STUDY CAUSED BY  
SMOKING CASTOFF**<sup>1</sup>Dr Maria Samraa, <sup>2</sup>Dr Ramsha Khalid, <sup>3</sup>Dr Khawaja Danish Ali<sup>1</sup>WMO BHU Bhangi Tehsil Hazro, <sup>2</sup>Nishter Hospital Multan, <sup>3</sup>CMO, BHU Bhata Mora Poonch**Article Received:** October 2020**Accepted:** November 2020**Published:** December 2020**Abstract:**

**Objective:** The paper is pointed principally to discover the recurrence and routineness identified with migraine in the understudies of clinical caused due to castoff smoking, moreover it likewise was additionally planned to notice the reaction of non-smoker clinical understudies for inactive smoking.

**Methods:** Assortment of segments were concentrated in three extraordinary and private schools. Our current research was conducted at Sir Ganga Ram Hospital, Lahore from March 2019 to February 2020. As far as possible characterized for the examination was restricted from 18 years to 25 years. In the chose test the understudies not dependent on smoking and do not smoke were considered presented to castoff smoking more than multiple times in a day. The clinical understudies were posed inquiries asking about their sex, age, span of presentation to smoking and the stretch that is recurrence of introduction. Presence of cerebral pain to the reaction of castoff smoking saw by whom don't smoke was noticed.

**Result:** A sum of 186 understudies out of 290 notifications, grumbled the issue being talked about, and felt uncomfortable because of quality of smokers around them. This nearly equivalents to the 64.1% of the aggregate on the off chance that we figure it observationally. Out of those 186 just about a sum of 172 had a place with clinical understudies. This nearly equivalents to 59% of the aggregate. An aggregate of 127 were presented to smoking generally multiple times each day. This equivalents 43% of the complete influenced understudies. Among 290 understudies 255 were of the assessment that smoking at any open spot should be restricted and represented. Smokers do reaction emphatically to the proposal sent by the influenced understudies.

**Conclusion:** It is clear that the difficult continues and understudies feel migraine straightforwardly identified with castoff smoking. The directing of the smokers for not to smoke at the public spot is proposed preparing them to try not to smoke at open public spots. The law ought to likewise assume its function in the recognition of the said recommendation.

**Keywords:** Infection and Routineness Reported, Headache, Smoking.

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**INTRODUCTION:**

The smoke in the air due to smoking is castoff smoking tobacco, often breathed in by the non-smokers. Unintentionally inhaled environmental smoke released by the smokers through pipes, cigars and cigarettes in the closed environment causes passive smoking. We also name it environmental tobacco smoke, breathed in the shape of passive smoking by the non-smokers [1]. This hazardous tobacco smoke in the air is dangerous for the public health, and indeed it is widespread. Many of us are exposed to the tobacco smoke released by the smokers in offices, homes, WorkCentre's, during travelling in the public transport and specially schools and colleges [2]. Ischemic, lung cancer, asthma and heart diseases are directly and openly associated to the effects of passive smoking [3]. It is startling that 4000 chemicals dangerous for human are breathed out by the smokers while smoking. Among them more than 40 are capable to cause cancer. This practice is common and omnipresent. 93 % of the world population is still managing to live without any smoke free regulation for the safety of general public [4]. Passive smoking roughly contributes in the problems related to public health as per a survey conducted in 2004 is as under:

- a) 40% of children
- b) 33% of male non-smokers
- c) 35% of female non-smokers

These many of us are directly affected by the cancer of passive smoking over the globe. More than 600,000 deaths per year are caused just because of this menace over the world. Whereas, headache is complained by the common people living in the city of Lahore. This problem is not threatening to life but still a major issue to address. The persistence of headache directly disturbs the mood and routine activities of an individual. Beside other issues, passive smoking inhaled through environment data reveals that it causes headache especially in students that is youngsters [5]. Due to non-adherence to laws it is a burning issue of public places especially the college of Lahore. In Spain the same lines were followed and they reported the same effects of headache and other respiratory problems directly caused by passive smoking. Rozen *et al.* in a survey opines about the United States of America (USA) that the severe problem of headache is evident in abundance to those children exposed to the cloud of smoke of tobacco. Non-smokers students of medicine are lacking in the field of awareness in this regard, they need to be educated on the subject matter because prevention is better than cure. We need to research and share the results about the passive smoking to the directly affected people. Due to non-adherence of law and

order the condition of smoking in public places in Pakistani Educational Institutions in particular and in Pakistan in general is worse. Law and required regulations are not sufficient and if they exist even then not implemented in true letter and spirit. People are in the habit of smoking in open, they even do not have curtesy for ladies, children and in certain cases people even do not care about the patient and age people. If a situation is there that someone feels allergic due to certain medical issues people often ignore them. If you forbade someone that not to smoke in public, chances are there that he will have a quarrel with you there and then. Resultantly, people suffer certain physical or mental shortcomings.

**METHODOLOGY:**

This potential study involving multiple and versatile factors and dimensions in 2017 is purely conducted to probe the issues and reasons behind the falling health specially the issue of the headache in medical students of medical colleges of Lahore. The aggregate strength of the colleges was near about 2000 which formed our population of the research. This study in general was of observational nature and supervisory. The population of roughly 2000 students was reduced to an exact of 300. Our current research was conducted at Sir Ganga Ram Hospital, Lahore from March 2019 to February 2020. These 300 were our Spartans, they were our every corner of the overall population and it was 20% of a total of 2000 medical students of the colleges of Lahore. While research we observed three colleges in total and selected one hundred students from every college. The random sampling technique for the data collection was adopted to complete the research paper. The medical students of age group between 18 years to twenty-five years were chosen to complete the task in hand. These students were those who are directly affected by the passive smoking in the shape of tobacco smoke in their daily routine as non-smokers they were repeatedly fed by a constant amount of smoke of tobacco in the form of passive smoking at canteen, college, in ground or at any public place. We intentionally removed those students who had any symptoms of headache before a hand or they inherited it like head trauma, headache that was chronic in nature, or migraine. We endorsed that the private identification of any sort will not be revealed to any other person of their concern, the data is collected but the sample population is to share what they feel in a free environment. The purpose of the whole exercise is research based only and nothing is personal with anybody in any respect. After well-versed conversation and permission questionnaire was distributed to the selected lot who fulfilled the criteria. The demographic data was mentioned in the given and drafted questionnaire. The

drafted questionnaire accommodated the questions those pointed to take responses such as: if pragmatically sought any counseling session or piece of advice from anyone to avoid smoking specially in the public place, the person inquiring the smokers critically observed the responses of the student smokers for the said issue that is causing people to suffer. The drafted questionnaire also artistically asked about the varying opinion of the student smokers, at least restricting themselves to smoke at the public place. The help was taken from the collected data after entering into SPSS software. The version we used for the data analysis was version 21.00. Age is a quantitative variable which is different for different students was denoted by  $\pm$  S.D, in statistical and mathematical terminology it is known as mean, whereas, the qualitative information such as gender, the exposure to tobacco smoke persistently present into the air the regularity of headache, place, the response of the medical students was denoted by frequency and one hundredth form (percentage).

### RESULT:

Data was thoroughly and critically inspected and scrutinized. The response by the students was that much positive that 290 students filled up the questionnaire. The male were 102 in number a total of 35.2% of the total, male were 188 in number a total of 64.8% of the total. The age denoted by Mean was  $22.4 \pm 1.28$ . In total the exposure at the medical institutions was 172 in percentage a total of 59% and 67 out of total, with a percentage of 23% were exposed to any public gathering place. Intensely, 51% that is a total of 51 were exposed on their own house in the premises of their own tobacco smoke. If we just consider the time factor, then 72% medical students a total of 208 were exposed for more than one hour a day. Whereas, a total of 144 to the same as 49.7% medical students' exposure to tobacco smoke was noticed only twice a day and 127 equaling exposure to passive smoking thrice a day and only 19 in percentage 6.5% once in a day. Frequency of headache when exposed to passive smoking was found to be 186 (64.1%) students (Table 1.). Regarding the response of students, revealed that out of 290 only 90 (31%) students made practical attempt to council the smokers to avoid smoking at public place. When students approached the smokers confining them to avoid smoking in public, they received a welcoming gesture. In a total of 90 students were practically sought counseling. In further dissection of the problem out of those 90 almost 66 commented that smokers appeared to be agreed on the suggestion of not to smoke in public. It is a healthy figure that 73% of the total were agreeing to acknowledge. Out of 90 students 20 said that smokers are not listening to them and they are not convinced.

They did not listen to the advice and there are such cases who never commented and stayed silent their percentage is 5%, no response was recorded from them. Among them 255 that is 88% favored the restriction of smoking in the favor of non-smokers, not to smoke at the public place, amongst them the reciprocal response was noticed by only 3% and the student who made no response were 9% in number (Table 2).

### DISCUSSION:

Cigarette smoking exposes a person to variety of symptoms and complications. Not only affecting the smoker himself but also to people working nearby. Nicotine being a vasoconstrictor is believed to be responsible for smoking related headache [6]. Increase Carbon monoxide and less oxygen in the environment can also lead to headache Complications of second hand smoking ranges from lung cancer to various other non-malignant diseases Most common are respiratory symptoms like cough, sneezing, rhinorrhea, dysphonia, dry throat, pharyngitis and headache There has been 11 considerable evidence that second hand smoking increases the incidence of headache especially in younger population [7]. Therefore, we selected the medical colleges for collecting our samples, keeping in mind the fact that the medical students and professionals are believed to be more aware of hazards of environmental smoke exposure rather than the general population [8]. Moreover, such study has not been done in Pakistani medical colleges before our study included young population with average age of 22 years. It was noted that 64% of students exposed to second hand smoking experienced headache. In other comparable studies; Gedikondele et al. observed 54% Hammad et al. observed that the incidence of headache was 68% Stoic et al. observed the incidence to be 1256%. We also observed that most of the students were exposed in college premises as compared to other places, which shows the general lack of discipline in educational institutions. It was also observed that most students had to bear daily episodes of exposure for more than 1 hour; which means that the exposure was distressing and affecting their general performance, ability and concentration. Regarding the response of students the data was quite interesting [9]. Although 88% students agreed that smoking at public places should be prohibited but only 31% took any active step to council the smokers regarding the hazards of smoking for him and others. There was similar data from a study conducted in Riyadh, Saudi Arabia; where despite high awareness and knowledge very few students took active participation in counseling Similar study in United Kingdom showed defy 3 Ancient education and training for smoking

cessation in medical schools It shows that the medical 14 students are well aware of the hazards but don't take practical steps to stop second hand smoking. It demands need of proper training and guidance for students so that they can realize their duty and take interventional steps to control community related public health problems. It is also recommended that medical curriculum should stress more towards preventive measures to decrease disease. The enforcement of law and regulations interestingly developed a situation in which quitting of smoking at public place responses were positive [10]. After being counseled the students were ready enough to cooperate and smoke their cigarettes in a place where it is less dangerous and no other is in the hunt of passive smoking. The developing attitude was sufficient enough to support the cause and to act as whistle blower in an aroused situation.

### CONCLUSION:

It is very much evident from the research conducted on the topic of castoff smoking that risks are high in the shade of tobacco smoke released by smoker to the medical students of the Medical college of Lahore. Tutorials, guest lectures, motivational speeches and training sessions may add to the awareness of the said issue to benefit the poor student suffering because of the problem created by someone else. Pragmatic approach in the implementation of the writ of the regulations in this regard is highly solicited and demanded.

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