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Research Article

THE PREVALENCE OF PASSIVE SMOKING AMONG CHILDREN AND HEALTH PROFESSIONALS

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Abstract:

Objective: This case work aimed to investigate the impact and prevalence of the passive smoking among medical students as well as health professionals of University of Health Sciences.

Methodology: The information about the status of the passive smoking gathered with the help of the self-arranged questionnaire whose preparation carried out in accordance with the guidelines of the World Health Organization.

Results: Total 18 members of the staff were addict of smoking whose amount was much higher in comparison with the faculty members were and students. Total 13 faculty members were in the category of never smoking and their amount was much high in comparison with the members of staff and students whereas a high amount of the students was passive smokers (thirty six) in comparison with faculty as well as staff members.

Conclusion: Passive contact with the smoke of cigarettes is prevalent among students in comparison with faculty and staff members so it is very important to educate the professional in the health care field and common public for the prevention of the dangers due to passive smoking.

KEY WORDS: Passive, cigarette, faculty, methodology, professionals. Comparison, prevalent, occurrence.

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INTRODUCTION:

The use of tobacco is very frequent in our country Pakistan & it utilization is very different in variety of ways as smoking of cigarettes, chewing of tobacco and cigars. There are also some local ways to use tobacco as "Bidi" (tobacco inside the dry leaves) & "hugga" (well known as hubble-bubble) [1]. In our country Pakistan, 76.0% are habitual of smoking cigarettes in urban areas and 53.0% in non-urban regions among men and 34.0% in urban & 27.0% in non-urban regions among females [2] in countries which are under development in our country Pakistan with weak law in this field of anti-tobacco, the quantum of diseases related to tobacco will rise in next some years. The amount of the patients suffering from cancer of lungs, chronic disorder of obstructive lung & myocardial infarction are increasing day by day with the increase of the sale of the cigarettes. The cancer of lung is the main malignancy in the males of our country Pakistan [3]. In a close environment, passive smoking is very dangerous for the persons who are not addicted to this habit [4]. The dangerous impacts of smoking on the health of human being are well-known who live or work regularly with the smokers [5]. Passive smoking involves twenty to eighty percent of the complete population of United States of America and it is harmful equal to the active smoking.

The very vulnerable population are children of less than five years of age. Passive smoking enhances the dangers for the upper and lower tract infections of respiration but all these situation can be under control with an environment without smoke. Some serious heart diseases and cancer of lungs are the most common diseases among the adults who are non-smokers but exposed to passive smoking. The use of tobacco by different in the only resource for the immature mortality, disability and preventable morbidity [6].

METHODOLOGY:

There were one hundred and thirty five patients having age from eighteen to forty five year of age. These participants were the medical students or the professionals of the health care field of UHS, Lahore. We arranges a questionnaire regarding data about environmental & health status, smoking conditions & passive smoking at different work places. The questionnaire was the outcome of the guidelines provided by the WHO. In accordance with the World Health Organization, smoker is the person who smokes tobacco daily or after some delay. Daily smoker is a person who smoke a product of tobacco once in a day and not of the days of the fasting. Occasional smokers are those persons who does not smoke every day. A never smoker is person who never smoke a single cigarette or smoke less than one hundred cigarettes in his whole life time.

Passive smokers are those persons who never smoked but remained expose to smoking. These persons were exposed to smoking either at their home, work place or at both places which is not preventable. We took a written consent from all the participants of the case work. SPSS V. 15 was in use for the statistical of the collected information.

RESULTS:

There were total one hundred and thirty five participants of this case work. There were total twenty eight faculty members, thirty nine staff members & sixty eight students of this very university. All these participants filled the questionnaire. The separation of the participants carried out into three groups. There were thirty three smokers in the Group-1. There were thirty never-smokers in Group-2 and there were sixty one passive smokers in Group-3 who were never smokers but remained expose to smoking in different environments. The status of smoking of all three types of participants are available in Table-1. There were total 18 staff members as smokers which was very high amount in comparison with the students of medical field and faculty members.

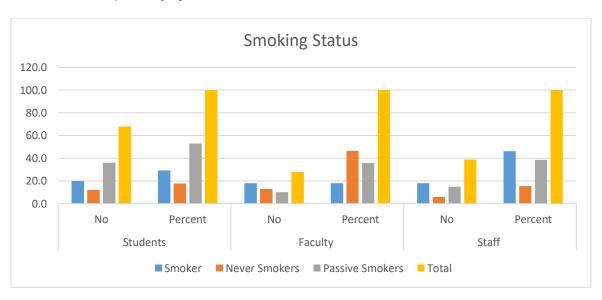
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Table-I: Smoking status of Study Subjects

Smoking Status	Students		Faculty		Staff	
	No	Percent	No	Percent	No	Percent
Smoker	20.0	29.40	17.9	17.90	18.0	46.20*
Never Smokers	12.0	17.60	13.0	46.40**	6.0	15.40
Passive Smokers	36.0	52.90	10.0	35.70	15.0	38.50
Total	68.0	100.00	28.0	100.00	39.0	100.00

^{*} P value 0.041 (compared with student and faculty); Significant

Note: P value calculated by test of proportion



There were 13 faculty members among the category of never-smokers and their rate was very high in comparison with the students of the medical field whereas high amount of the students was passive smoker in comparison with the professional staff. Among total sixty eight students, twenty seven were males & forty one were females. Total twelve males and sixteen females were faculty members whereas thirty three males and six females were the members of staff. The average age, BMI, height and weight of all the members of three groups are present in Table-2. The average weight of the never-smokers was much lower in comparison with the average weight of smokers & mean age passive smokers. In the same manner, height of never-smokers was very low in comparison with the passive smokers as well as smokers.

Table-II: Age, BMI, Height and Weight of Study Subjects

Characteristics	Never Smokers		Passive Smokers		Smokers	
	Mean	± SD	Mean	± SD	Mean	± SD
Age (years)	26.0	1.30	25.0	0.80	24.0	0.80
BMI (Kg/m²)	22.0	0.80	23.0	0.50	22.0	0.60
Weight (Kg)	58.1	2.00	64.8	1.5*	64.9	2.00*
Height (m)	1.6	0.02	1.7	0.01**	1.7	0.01**

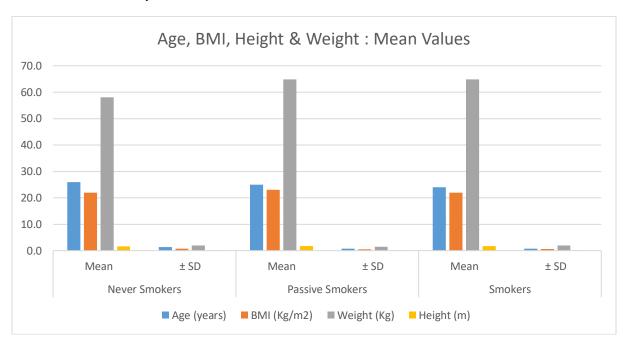
^{*} P value 0.03- (compared with never smokers); Significant

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^{**} P value 0.004 (compared with students and staff); Significant

** P value 0.01- (compared with never smokers); Significant

Note: P-value calculated by ANOVA



DISCUSSION:

The main focus of this case work was to determine the status of passive smoking among the students as well as professional of this very medical university. There are very less amount of case works in our country to describe the spectrum of the contact with passive smoking. The impacts of smoke of tobacco in the environment in 1991 according to World Health Organization report concluded that the rise in the danger of cancer of lung in the non-smokers having marriage with a smoker was between 20.0% to 50.0% and the environmental smoke of tobacco at place of work was next very vital exposure source after the spouses [7]. In the past times, smoking was a clear habit or addiction. People were non-smokers or smokers but this condition is changing in recent times. In recent times, World Health Organization has stated the guidelines for the smoking's measurement. There is also a pressure in our society against smoking. The members of staff were high self-reported smokers in comparison with the students and faculty members as mentioned in Table-1. This finding was much consistent with the results of another case work [8] in which the occurrence of the smoking was much high in a single institute of Lahore in comparison with the other regions as well as it was much high in members of staff.

The reason behind this fact was stress of job and less awareness about health in compared to the faculty members and students of medical field and faculty members. More staff members were males thirty three out of thirty nine and incidence of smoking was 36.0% in males & 9.0% in females [2]. In the similar manner, more faculty members were never smokers in comparison with the members of staff and students in the medical field as mentioned in Table-1 because of the best knowledge I the field of health. Among twenty eight faculty members, females were sixteen and incidence of smoking among females is 9.0% in

Our country Pakistan as stated in 1998 & no recent data is available about this topic [5]. The weight as well as height of the smokers as well as passive smokers are very high in comparison with the persons who were never smokers as mentioned in Table-2. There is no association of any alteration in the weight as well as height. This finding is very much similar with the outcome of another case work [9] which concluded no important alteration in the weight & height of members of both groups of smokers & non-smokers.

CONCLUSION:

Passive smoking is very much prevalent among students of medical field in comparison with the staff members and health professionals. Therefore it is very

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vital to induce knowledge both among general public and professional in the health care for the prevention of the dangers of passive smoking. Further case work for the measurement of the exposure to the tobacco smoke in the environment are necessary for multiple settings. There should be high taxes on cigarettes for the discouragement of the smoking which will also reduce the risk of passive smoking. There should be a ban on the smoking at public places and they should be a penalty on the people who do not follow this law. Media should be in use of highlighting the dangers of smoking among people.

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