

SAY 'NO' TO SMOKING!

ARE SMOKERS MORE AT RISK OF BECOMING INFECTED WITH COVID-19?

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It is now well established that smokers are vulnerable to the most extreme COVID-19 disease outcomes with the need for mechanical ventilation, hospitalization, and death. The vast majority of people including medical professionals reiterate this finding, but studies on the subject are few.

In Sri Lanka, the Chairman of the National Authority on Tobacco & Alcohol (NATA) has been repeatedly warning smokers to get rid of the habit.

The International Union Against Tuberculosis and Lung Disease (The Union) recently released the findings of COVID-19 and smoking based on their scientific studies.

There is substantial evidence that smoking negatively impacts lung health, inhibits the body's responsiveness to infections, and suppresses immunity. Sound epidemiological evidence that smoking increases the risk of viral lung and throat infections led researchers to posit that smokers are at increased COVID risk.

Several early studies from China (Guan et al) pointed toward smokers susceptibility to COVID-19 – that men, their smoking rate being 20 times higher than women, were contracting COVID-19 at much higher rates than women. In addition, the World Health Organization (WHO) has noted that the physical act of smoking which brings fingers to the lips increases the possibility of hand-to-mouth virus transmission. In summary, the hypothesis that cigarette smoking makes individuals more likely to contract COVID-19 needs to be supported by further evidence from epidemiological studies and laboratory data.

Q. Are smokers more likely to have severe complications from COVID-19?

To date, scientists have not reached consensus on this issue though some data does support this hypothesis. It is also important to note that almost every study on this issue suffers some sort of major flaw – whether in design or by virtue of the fact that it is pending peer review. The bottom line is that the data are NOT conclusive. The most important findings in support of this hypothesis appeared on February 28 in The New Eng-

WARNING: Smoking reduces blood flow, which can cause erectile dysfunction.

WARNING: Smoking causes COPD, a lung disease that can be fatal.

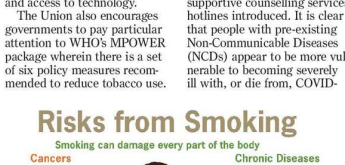
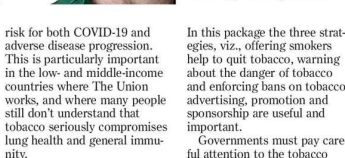
WARNING: Smoking causes cataracts, which can lead to blindness.

WARNING: Smoking reduces blood flow to the limbs, which can require amputation.

WARNING: Smoking causes type 2 diabetes, which raises blood sugar.

WARNING: Smoking causes head and neck cancer.

WARNING: Smoking causes cancer.



A Pictorial warnings used in the trial



B Text-only warnings used in the trial

SURGEON GENERAL'S WARNING: Smoking Causes Lung Cancer, Heart Disease, Emphysema, and May Complicate Pregnancy.

SURGEON GENERAL'S WARNING: Smoking by Pregnant Women May Result in Fetal Injury, Premature Birth, and Low Birth Weight.

SURGEON GENERAL'S WARNING: Quitting Smoking Now Greatly Reduces Serious Risks to Your Health.

SURGEON GENERAL'S WARNING: Cigarette Smoke Contains Carbon Monoxide.

19. The tobacco epidemic is an entirely preventable and avoidable risk factor for a range of NCDs. Tobacco is also an important risk factor for tuberculosis (TB), the world's biggest infectious disease killer, and early evidence is showing the increased risk of serious outcomes of COVID-19 in people with TB.

The fact that smoking is a risk factor for many lower respiratory tract infections is further evidence of this important link between smoking-related harms and COVID-19. The relation between COVID-19 and cardiovascular health is important because tobacco use and exposure to second-hand smoke are major causes of cardiovascular diseases globally. A weaker cardiovascular system among persons with COVID-19 with a history of tobacco use could make such people susceptible to severe symptoms, thereby increasing the risk of death.

Smokers are likely to be more vulnerable to COVID-19 as the act of smoking means that fingers (and possibly contaminated cigarettes) are in contact with the lips, which increases the possibility of transmission of the virus from hand to mouth. Spitting in public places could enhance the spread of COVID-19.

Tobacco smoking is a leading common risk factor for major NCDs that account for over 70 percent of untimely deaths globally. These NCDs include cardiovascular diseases (such as hypertension, persons who have had or are at risk for a heart attack, other heart diseases or stroke), diabetes, cancers, and chronic respiratory diseases. Reports from around the world show that people with NCDs are more likely to suffer severe COVID-19 with serious outcomes, including death.

Even in times of a public health emergency of international concern, the tobacco industry continues to spread its misinformation – through blog posts and social media – denying the link between smoking and COVID-19 to protect its markets. The industry is capitalizing on the pandemic to improve its public relations by offering donations and partnerships to governments. At the same time, tobacco companies continue to aggressively market their products, which, in addi-

tion to causing eight million deaths each year, are exacerbating the COVID-19 crisis.

Tobacco smoking appears to be an important and entirely avoidable risk factor for a poorer prognosis in COVID-19. COVID-19 has not only severely constrained health systems but also could have a cascading impact on progress towards different goals and targets of the United Nations Sustainable Development Goals (SDGs). With the looming danger of economic recession, it becomes even more vital to avert the huge financial cost of tobacco use to the global economy. The urgency to prioritize stronger action on comprehensive tobacco control is mandatory for optimal response to contain the COVID-19 pandemic as well as to ensure the gains made on the SDGs are not lost.

Therefore, Sri Lanka government, including the National Authority on Tobacco & Alcohol (NATA) must run a mass media campaign through television, radio, and social media to amplify the following messages:

- Smokers are at increased risk of complications of COVID-19 and smokers should quit now. Quitting tobacco smoking can help lower the risk of serious COVID-19 symptoms, reduce the risk of transmission and support the strength of the immune system.
- Ensure adequate resources to support tobacco cessation programmes, including quit lines, mobile messaging, and internet support, etc. Such programmes should be sufficiently staffed to meet the likely increased need to quit tobacco use from the public in light of lockdowns.
- Strengthen the implementation and enforcement of tobacco control policies, including 100 percent tobacco-free public places, workplaces, and public transportation. Complete tobacco-free environments are the only proven way to protect people from second-hand smoke exposure, which is linked to respiratory and cardiovascular conditions and increased vulnerability to serious COVID-19 symptoms and mortality.
- Fully implement and enforce the WHO FCTC (Frame-

work Convention on Tobacco Control) and WHO MPOWER measures, including raising taxes and prices on tobacco products, which is the most effective way to reduce tobacco use and to generate revenue to fund health systems and tobacco control programs.

- Ensure that the smoking status of persons identified with COVID-19 is recorded and included in all data sets.
- Prohibit tobacco industry donations and partnerships and fully implement and enforce WHO's FCTC Article 5.3. Governments must reject pseudo-science funded by the tobacco industry and its allies and sale of tobacco must be banned during the COVID-19 pandemic.
- Consider accelerating progress on WHO FCTC Article 19 to advance work on the legal and financial liability of the tobacco industry for worsening the impact of COVID-19, in addition to the known damage caused by an entirely preventable epidemic of tobacco.
- Ensure uninterrupted supply of medicines and healthcare services to people living with NCDs, including education and counselling on maintaining a healthy diet, avoiding alcohol, keeping physically active, safeguarding mental health and promoting cessation services to quit smoking and chewing tobacco.

Prevention of tobacco consumption is a win-win situation for a country. Substantially increasing tobacco taxes not only improves public health and health equity, but also boosts the economy and the overall preparedness for future health crises. Additional revenues raised by increasing tobacco taxes can be used to further improve population health, cover some of the post-COVID-19 economic recovery costs and enhance future pandemic preparedness and response. There is considerable potential in most low- and middle-income countries to increase fiscal space by increasing taxes on products that harm public health or the environment, and by improving tax administration.

One of the best preventive measure is increase of tobacco tax – while it helps the government to increase its revenue, the consumption declines.

Risks from Smoking

Smoking can damage every part of the body

