

Österreichische Gesellschaft für Pneumologie  
Austrian Society of Pneumology

**Jahrestagung 2011  
Messe Wien**

**Raucherentwöhnung und Tabakprävention  
– woran scheitert es in Österreich?**

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www.aerzteinitiative.at

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AUSTRIAN ACADEMY OF SCIENCE  
Clean Air Commission

INITIATIVE ÄRZTE GEGEN RAUCHERSCHÄDEN  
AUSTRIAN COUNCIL ON SMOKING AND HEALTH

**Population Based Smoking Cessation**

Smokers who are employed in smoke-free workplaces experience a quit ratio of **1.34**

Working in a smoke-free workplace was more strongly correlated with successful quitting than use of nicotine replacement products (results based on analysis of US Census)

NCI smoking and tobacco control monograph (no 12), 2000

The tobacco industry knew this before: Philip Morris interoffice correspondence (1992.01.21)

**Impact of Workplace Restrictions on Consumption and Incidence**

- Total prohibition of smoking in the workplace strongly affects industry volume. Smokers facing these restrictions consume 11-15% less than average and quit at a rate that is 84% higher than average....
- Milder workplace restrictions, such as smoking only in designated areas have much less impact on quitting rate and very little effect on consumption.
- Smokers not in the labor force (retired, unemployed, housewives, etc.) quit at a rate 21% above average and have also reduced their consumption noticeably over the last few years. These smokers may be much more sensitive to price increases, economic volatility and health concerns.
- From 1987-1991, the industry lost an estimated incremental 1.7% due to increasing workplace restrictions. If these trends continue, the industry will lose an additional 1.3% to 1.9% from 1991 to 1996.
- If smoking were banned in all workplaces, the industry's average consumption would decline 8.7%-10.1% from 1991 levels and the quitting rate would increase 74%....

Cost effectiveness (disability adjusted life years gained), Europe A

	million DALYs gained per year	costs \$ per DALY
Doubling the highest tobacco tax	6.9 (6.0-7.7)	13 (10-17)
Clean indoor air law enforcement	0.8 (0.6-0.9)	358 (263-503)
Comprehensive advertising ban	0.6 (0.5-0.7)	189 (140-266)
Information dissemination	0.7 (0.6-0.8)	337 (248-479)
nicotine replacement therapy	0.7 (0.6-0.8)	2164 (1604-3024)
tax + ad ban	7.2 (6.1-8.2)	28
tax + info	7.2 (6.2-8.3)	45
tax + air law + ad ban	7.5 (6.4-8.7)	63
tax + air law + info	7.6 (6.5-8.7)	79
tax + ad ban + info	7.5 (6.4-8.6)	58
tax + air law + ad ban + info	7.8 (6.7-9.0)	90
tax + air law + ad ban + info + NRT	8.1 (6.9-9.0)	274

Shibuya et al. 2003

**EUROBAROMETER**

	A 2007-2010	EU 2007-2010
% Raucher	31 ↑ 34	32 ↓ 29
% Vertrauen in Leichtzigaretten	39	25
% Aufhörversuch (12 Mo)	21	28
% NRT	42	26
% andere Medikamente	7	5
% alternative (pflanzlich, Akupunktur, Hypnose)	17	6
% führen Rückfall zurück auf Verlangen	55	28
Stress	36	33
Freunde, Kollegen	26	20
Gewohnheit	24	17
Gewichtszunahme	21	6
Partner	12	9
Genuss	9	20
% Berufstätige mit rauchfreier Arbeitsstätte	38	66
% rauchfreies Heim (bei Rauchern)	54 (18)	61 (30)
% verrauchte Esslokale (Bars)	70 (86)	30 (45)

**Der Tabakepidemie**

**Einhalt gebieten**

Regierungen und wirtschaftliche Aspekte der Tabakkontrolle

Das Verantwortliche für Wunden

THE WORLD HEALTH ORGANIZATION

**COMBINED STRATEGY**

Monitor tobacco use and prevention policies.

Protect people from tobacco smoke.

Offer help to quit tobacco use.

Warn about the dangers of tobacco.

Enforce bans on tobacco ads, promotion, and sponsorship

Raise taxes on tobacco.

access to cessation therapies

www.who.int/tobacco/mpower/en

**Niedriger Preis und leichte Verfügbarkeit**

Rauchverbote voller Ausnahmen, kaum überwacht

Keine Kooperation von GO mit NGOs und Ärzten

Kein Budget für Tabakprävention (nur Alibiaktionen)

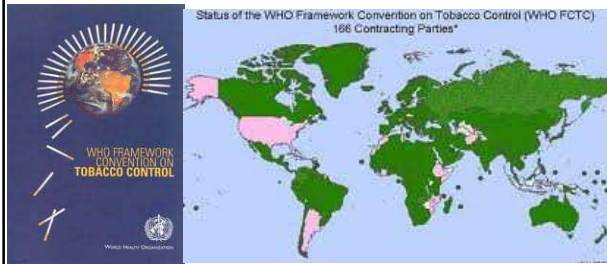
Trotz Einnahmen von jährlich 60 Millionen Euro

Tabaksteuern von Minderjährigen: keine Zweckwidmung

Rauchen denormalisiert, als Luftverschmutzung bewusst, soziale Akzeptanz sinkt, Verführung Jugendlicher erschwert, Motiv für Raucher zum Aufhören

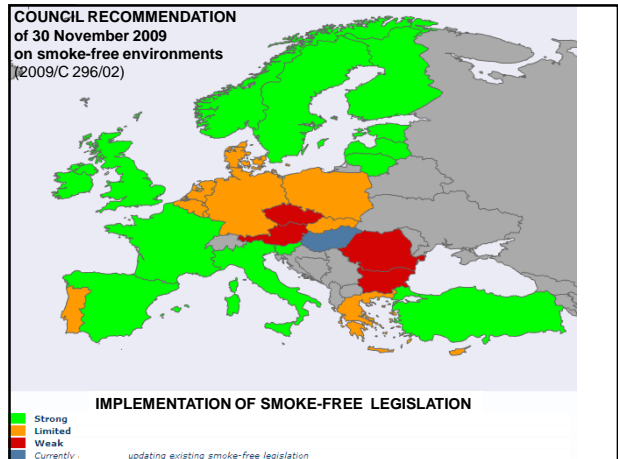
Tabakkonsum sinkt

Tobacco Control is top priority at UN High-Level Meeting: Non-Communicable Diseases, Sept. 19-20, 2011



Art. 5.3 gegen die Einmischung der Tabakindustrie in die Gesundheitspolitik  
 Art. 8 wirksamer Schutz vor Passivrauchen nur durch 100% rauchfreie Innenräume

Am 30.11.2009 stimmten 24 Gesundheitsminister für die Umsetzung der WHO-Leitlinien in der EU bis 2012. Nur 3 enthielten sich der Stimme und vertraten Positionen der Tabakindustrie: Stöger (Österreich), Jirásková (Tschechien) und Raši (Slowakei).



**TURKEY**

Law on Preventing Harms of Tobacco Use, 1996

**AUSTRIA**

- Ban smoking at public buildings & places
  - Health, education and sports facilities schools 2006
  - Public transport (bus, train, flight) train 2007
  - Public offices (5+ people working) offices (1 nonsm.) 2001
- Ban of advertisement and promotion (EU directive minimum)
- Ban selling tobacco products to minors (18 yrs.) 16 yrs
- TV air time 90 min/mo. "harms of tobacco" no funding
- Health warning on the packages smaller, no picture (EU directive minimum)

Wer raucht, ist ein "Spielverderber, unmodern und antieuropäisch"

**Amendment of the Law 2008**

<p><b>TURKEY (Jan.)</b></p> <p>Two-step implementation</p> <p>May 2008 (4 months):</p> <ul style="list-style-type: none"> <li>All public places</li> <li>taxis</li> </ul> <p>June 2009 (18 months):</p> <ul style="list-style-type: none"> <li>Hospitality workplaces</li> </ul>	<p><b>AUSTRIA (Aug.)</b></p> <p>Not enforced</p> <p>Jan 2009 (4 months):</p> <p>public rooms</p> <p>no ban in B, W</p> <p>July 2010 (22 months):</p> <p>exceptions for all &lt;50 m<sup>2</sup> part &lt;80 m<sup>2</sup> smoking rooms</p>
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**TURKEY**

**Support of Workers and Customers of Hospitality Establishments, Before and After Implementation**

Group	Before (%)	After (%)
Worker	48	70
Customer	57	67

Eurobarometer 2008: 63% of Austrians in favour of smoking bans in restaurants

Survey Styria 2009: 62% of guests in favour of smoking bans in all venues  
 84% of nonsmokers, 74% of exsmokers, 33% of smokers  
 83% in nonsmoking, 64% in mixed, 52% in smoking venues

Survey Vienna 2010: 51% of guests in favour of smoking bans in all venues  
 71% of nonsmokers, 48% of occas.smokers, 25% of smokers

**Particle (PM 2.5) Levels Before and After Implementation of Smoke-Free Law in Some Places**

**TURKEY**

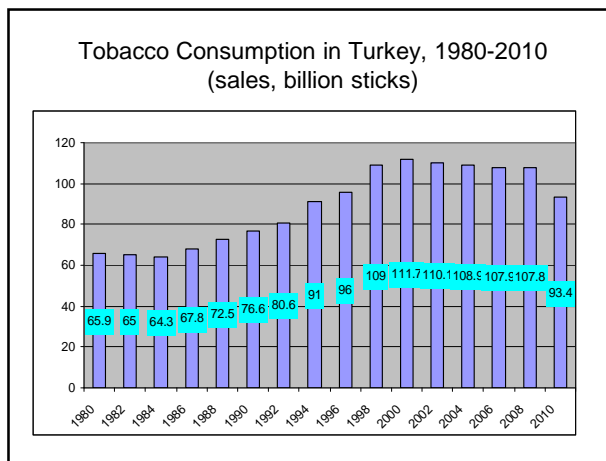
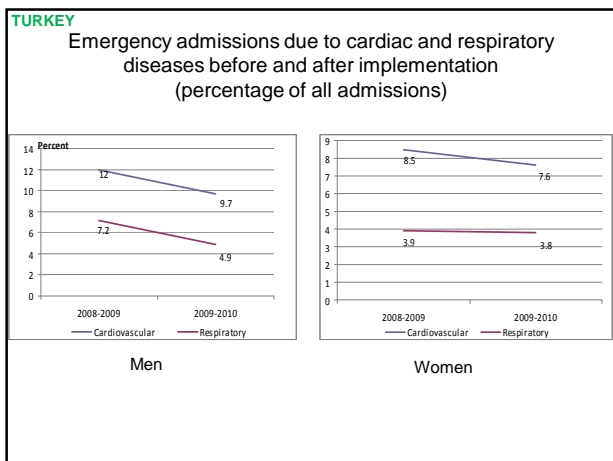
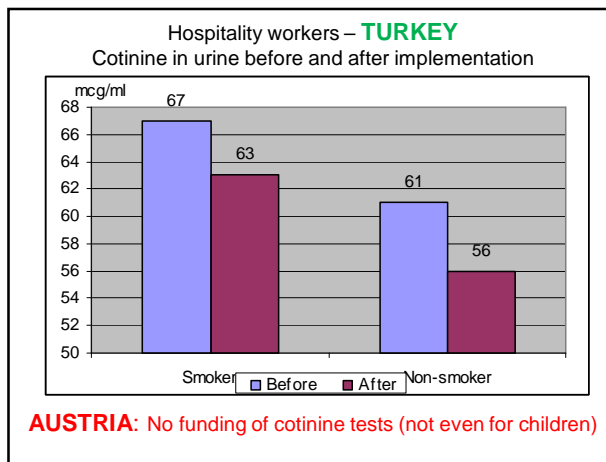
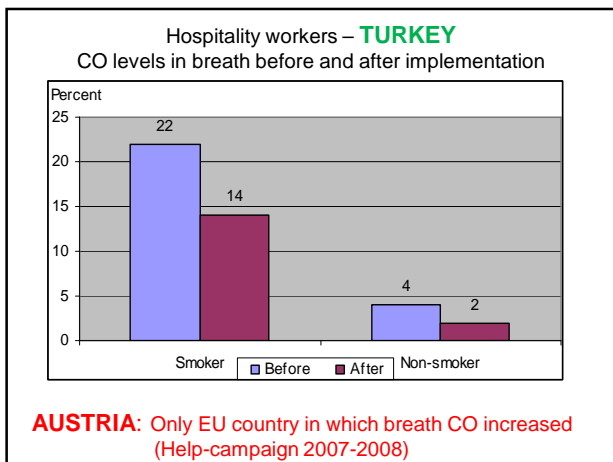
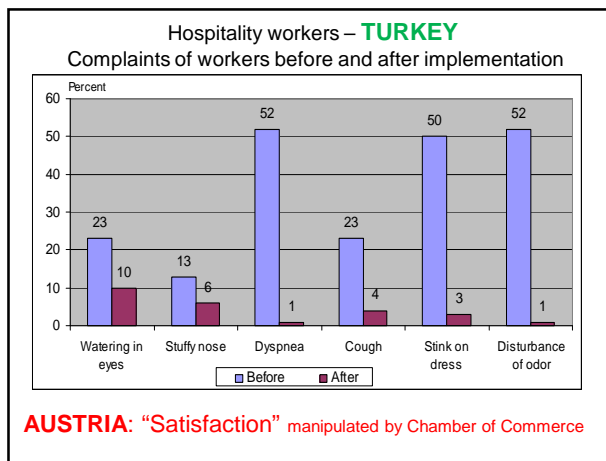
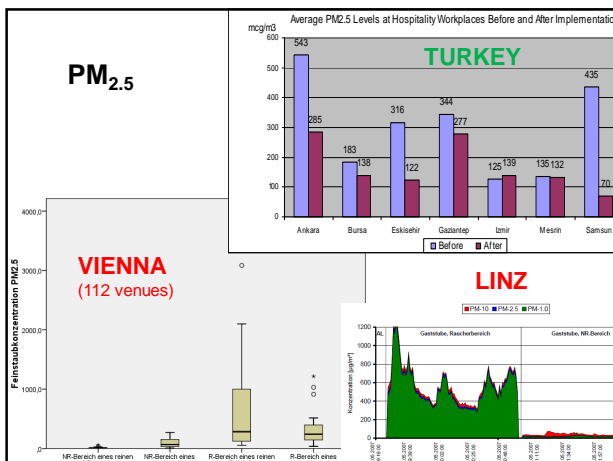
Location	Before (mcg/m3)	After (mcg/m3)
Municipality office	2900	80
Stationery shop	1850	400
Canteen in hospital	1300	450
Hairdresser	930	90
Boutique	580	130
Small grocery	440	80

**Restaurants**

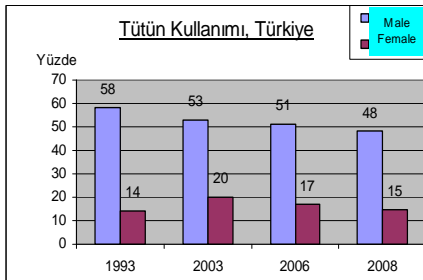
**Hospitals**

**Schools**

**Uni**



Tobacco Use Prevalence in Turkey (1993-2008)



1993 Health Services Utilization Survey in Turkey  
 2003 National Burden of Diseases Study, Ministry of Health  
 2006 General Directorate of Family Research Organization and Turkish Statistical Institution  
 2008 GATS

Main obstacles against tobacco control

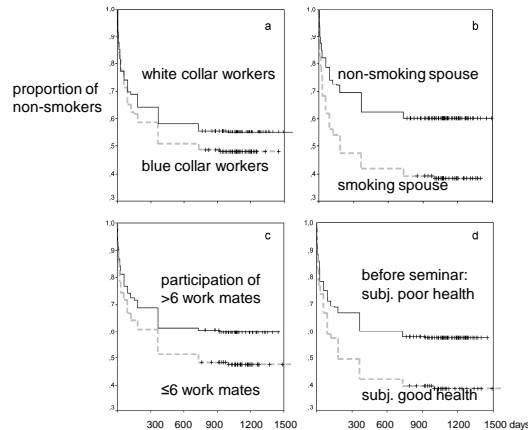
- Tobacco industry & trade: **corruption** of politicians and media  
**manipulation** of public opinion
- Reactionary policy, intimidation (lobbies) and neglect
- Resignation of experts

Smoking cessation

Reasons for hope: Implementation of FCTC article 14  
 Funding from tobacco taxes  
 EQUIPP, E-scan, ENSP guidelines project

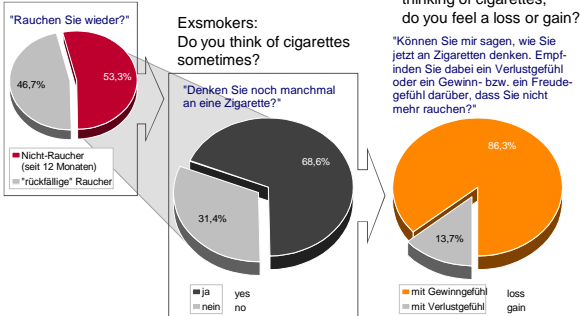
- At the work place every second smoker willing to quit could reach permanent abstinence after a short intervention (Carr seminar), even without medication, but with occupational health care.
- More effort is needed in females (especially if overweight), adolescents (age and sex specific interventions without medication), and blue collar workers (possibly because of earlier start of smoking).
- Persons with relapse need repeated counseling and better medication. Relapse prevention should include psychotherapy.
- Most important are the social background and smoke free environments, clean indoor air law enforcement, comprehensive advertising bans, and higher tobacco taxes, used in part for tobacco prevention (role model Switzerland: tobacco prevention fund)

Kaplan–Meier plots of abstinence rate over 1500 days each



Wie denken Sie jetzt über Zigaretten?

Follow-up Messung nach 12 Monaten - nur Nicht-Raucher



Stichprobe: n=364/194/133

Follow-up after 12 months

Danke für Ihre Aufmerksamkeit

Thank you for your attention

