

'Government fails to take firm action'

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"THE INDIAN government has shied away from scaring tobacco users with gory warnings presumably under pressure from the tobacco lobby", said Action Council Against Tobacco in India president Scientist and Professor Dr Prakash Chandra Gupta.

Gupta who is in the City to deliver a lecture at Government Dental College on Saturday spoke exclusively to Hindustan Times on a tobacco control in India. He lamented the vacillating attitude of the government at a time when it should be taking a firm stand towards controlling tobacco related deaths.

Notably on December 1 the legislation passed unanimously in both houses of parliament to have pictures of cancerous tumour's on tobacco products was to come into fore but it died before birth. The group of Ministers has sought more time and

this just proves earlier statements of Union Health Minister Ambumani Ramadoss of being targeted by liquor and tobacco lobby.

Gupta a noted scientist having worked with Tata Institute of Fundamental Research (TIFR) for 25-years was a pioneer in tobacco research in India. He was amongst the first to conclusively prove correlation between tobacco chewing and mouth and lung cancer as well as tobacco and Tuberculosis.

Gupta said, "Till now most attention has been on tobacco smoking as this is rampant in the west in comparison to tobacco chewing. First time use is never a pleasant experience but becomes habit forming because of presence of nicotine, which is proved to be as addictive as psy-chotropic substances like cocaine and heroine. Image formation plays a decisive role as tobacco use is perceived to be a sign of manliness and stress buster - providing a mild high".



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In 85 percent cases tobacco users (in any form) are below 25-year age group and this age is going down to as young as 10-years. The proposed Tobacco Products (Prohibition of Advertisement and Regulation) Bill 2001 also envisaged ban sale to persons below the age of 18 years. According to s 2008 World

Health Organisation (WHO) study, about 14.1 percent of Indian teenagers are tobacco users, 17.3 percent amongst males and 9.7 percent amongst females. Nearly one-third of the three million tobacco-related deaths worldwide occur in India. The cost of medical care for those suffering from tobacco-related diseases is said to be much more than the earnings from tobacco products.

Tobacco uses aggravate carcinogens causing several forms of cancer and have also been found to cause heart attacks. Tobacco residue forms a coating on arteries and constricts them cutting the blood flow. It is also amongst the few agents able to cross the brain filters causing growth of nicotine receptors causing the Dopamine effect.

Traditionally India has rampant betel and tobacco chewing. Since the introduction of tobacco in tins in the early TO's to introduction of sachets in the mid-80's tobacco use has degenerated

into abuse. Gupta advocated opening of more smoking cessation clinics across the country as therapy aided with a little medication is the best remedy for quitting this addiction. Until a few years ago, the only way to stop this deadly habit was by self-control, which was quite difficult for serious users. But with the introduction of smoking cessation products like pills, patches, gums, nasal sprays, and inhalers, this killer addiction seems to be up against a tough shield.

There are two major types of therapies available in the market—nicotine replacements therapy (NRT) and other pharmacological therapies. Of the various smoking cessation therapies, only gums and lozenges are over-the-counter (OTC) products. In addition to current therapies, there are other drugs in the pipeline, which provide a glitter of hope to people literally going up in smoke

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