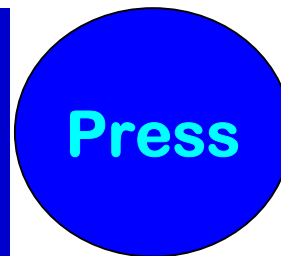




REGIONAL OFFICE FOR

**World Health  
Organization**

**South-East Asia**



SEA/PR/1418

31 May 2006

## **TOBACCO: DEADLY IN ANY FORM OR DISGUISE**

### **World No Tobacco Day, 31 May 2006**

#### **Member States**

Bangladesh

Bhutan

Democratic People's  
Republic of Korea

India

Indonesia

Maldives

Myanmar

Nepal

Sri Lanka

Thailand

Timor Lesté

New Delhi, 31 May, 2006: The theme of World No Tobacco Day this year is "Tobacco: deadly in any form or disguise". It highlights the various tactics adopted by tobacco manufacturers to make their products look more attractive and safer. Commenting on the theme, the WHO Regional Director for the South-East Asia Region, Dr Samlee Plianbangchang said, "With nations placing stricter control measures on tobacco companies, the tobacco industry has continued its onslaught with new products camouflaged and promoted with an illusion of their being safer, healthier options. They are couched under healthier names, or come with fruity flavours, or more attractive packaging. It is important for WHO and ministries of health to empower people, organizations and policy makers with accurate information about these products, their forms and disguises and the effect of all forms of tobacco, in order to implement more effective tobacco control programmes", he said.

The Regional Director called on countries and governments to enact stronger and wider regulation of tobacco products by raising awareness about the wide variety of deadly tobacco products.

There are enormous challenges posed to global health due to the diversity of existing tobacco products, the efforts of the tobacco industry to conceal and disguise their addictive and toxic effects, and the speed with which the tobacco industry is able to modify its products,

Of the 4.9 million global deaths from tobacco, countries in the South-East Asia Region account for 1.2 million. This Region suffers from the double burden of the tobacco epidemic as it both a large producer and consumer of tobacco. Regulation of tobacco products has become increasingly difficult given the low level of awareness about the health risks of tobacco, weak infrastructure for tobacco control and the wide variety of tobacco products like Betel Quid Tobacco, Tobacco Leaf, Zarda, Qiwam (kimam), Hnatsay (Honey Soaked Tobacco), Pan masala, Tobacco and slaked lime (khaini), Mawa, Dohra, Gutkha, Red Tooth Powder, Mishri (masheri or misheri), Creamy snuff, Gul, Gudhaku, Tuibur / Hidakphu, Tobacco Water etc. produced in the Region, Their use in traditional societies with some level of social acceptance camouflages their harmful aspects and makes their regulation more complex.

Tobacco products are not regulated to the standards expected from most other consumer products. Therefore, it is vital to develop comprehensive regulation covering product ingredients and emissions, their likely harmful impact, details of manufacture, communications, and marketing. Such regulation will help empower people and governments to make decisions based on facts about the products and not premised on camouflage and deception.

World Health Organization  
Regional Office for South-East Asia  
New Delhi-110 002, India

**Telephone:** 91-11-2337 0804 –  
twenty lines and (Direct): 23370971

**Fax:** 91-11-23370197 or 23379507

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The sheer diversity of tobacco products provides added urgency for implementation of their regulation. Without health-protecting regulatory oversight, consumers will continue to be hostage to the promises of tobacco- product- developers and marketers.

For new products and for those under development, additional research is needed to understand more precisely whether their risks are the same as the products they would replace. Such research could take years or even decades. Until such research is completed, the most prudent course would be to assume that their health risks are higher than any ordinary consumer products and to make every effort to prevent their use along with all other tobacco products.

The WHO Framework Convention on Tobacco Control (FCTC) is an important tool to address these challenges. The WHO FCTC is a global public health treaty developed in response to the globalization of the tobacco epidemic aimed at reducing the burden of disease caused by tobacco. It provides for the widest possible international cooperation that is necessary to control tobacco-caused illnesses. Among other things, the Treaty includes provisions for regulation of the contents of tobacco products and regulation of tobacco product disclosures. The first session of the Conference of Parties held in Geneva from 6 to 17 February 2006 also decided to develop guidelines for regulation of tobacco products. The Parties to the Convention should actively participate in developing these guidelines. So far, 125 countries have ratified the Convention, including nine in the South- East Asia Region.

Each year, on this day, WHO honours people who have made a difference in the fight against tobacco, from across the world. This year 4 eminent people from SEAR countries have been selected for the Organization's World No tobacco day awards. Dr Samlee Plianbangchang, WHO Regional Director for South East Asia Region, congratulated the recipients and called on them to continue their efforts against tobacco. The award winners from the South-East Asia Region are:

#### **Bangladesh:**

- Mr Saifuddin Ahmed, President of Bangladesh Anti-Tobacco Alliance (BATA), an alliance of over 50 anti-tobacco NGOs in Bangladesh. Mr Ahmed is known as a pioneer activist for tobacco control including research on the subject. He was instrumental in developing tobacco control legislation in Bangladesh. He is known for his success in stopping the British American Tobacco (BAT) promotional ship 'Voyage of Discovery' from achieving its mission to attract the youth towards tobacco.

#### **India:**

- Dr Rohini Premkumari, Professor of Radiation Oncology, Cancer Institute (WIA) - Dr. Rohini Premkumari is one of the pioneers in the area of tobacco control in the country. She has successfully led anti tobacco advocacy with the masses, particularly the youth. She has also advocated with film celebrities to lend their support to the anti tobacco campaign.
- Dr Dharendra N. Sinha, Associate Professor, Department of Surgery, SK Medical College, Muzaffarpur. - Dr Sinha has collected information on various forms of tobacco used in the Region – particularly on smokeless tobacco use, and bidi consumption. He also alerted experts about a particular dentifrice used in India, which contains tobacco – forcing its manufacturers to remove tobacco from its future products.

#### **Thailand:**

- Her Royal Highness Somsawaree Phraworachaya Thinaddamat, Honorary President, National Tobacco Consumption Control Committee, Ministry of Public Health. – Her Highness has for several years led the county in advocating the importance of abstaining from tobacco consumption. She and her family have led by example by not smoking and she has instituted non-smoking royal residences in Thailand. Her Highness has also provided guidance to the medical staff on ways for successful anti tobacco advocacy including campaigns targeted at youth and women.

For any clarification or additional information, please contact: *Mrs Harsaran Bir Kaur Pandey, Phone # 23309401; Mobile # 98-106-95878 Email: [pandeyh@searo.who.int](mailto:pandeyh@searo.who.int) and Dr Khalilur Rahman, Regional Adviser, Tobacco Free Initiative, Phone- 23309501; Email: [rahmank@searo.who.int](mailto:rahmank@searo.who.int)*