

CUSTOMARY FASHION AND KNOWLEDGE REGARDING SMOKING IN STUDENTS OF 4TH YEAR MBBS IN RAWALPINDI MEDICAL UNIVERSITY

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ABSTRACT

Objective: To study the prevalence of smoking and the knowledge among 4th year MBBS students regarding smoking. **Method:** A cross sectional descriptive study was carried out to determine the smoking prevalence and knowledge regarding smoking in students of 4th year MBBS of Rawalpindi Medical University during study period of 4 months. A total of 200 students were selected using consecutive sampling technique. Data was collected by a semi structured questionnaire. Questionnaire include demographic profile, current smoking status, reasons for initiating smoking, knowledge regarding sheesha and passive smoking, hazards of smoking and suggestions to decrease smoking. **Results:** Out of 200 respondents 138 were girls and 62 were boys. 45% were between ages 19-21 years, 52.55% were 22-24 years and only 2.5% were above 25 years. 87.5% of all the respondents were non-smokers. The main reason of smoking were leisure activity, to release stress, socialize, to pass time. Regarding passive smoking, 94% students were well aware of the term passive smoking and 93% were of opinion that passive smoking is injurious to health. Majority of students (90.5%) were of the opinion that smoking causes respiratory problems, cardiovascular problems and cancers. 60.5% students considered sheesha smoking to be more dangerous as compared to cigarette smoking. **Conclusion:** The prevalence of smoking among 4th year medical students is low. Majority were aware about the hazards of smoking. Most of them had adequate knowledge about passive smoking and sheesha smoking and their injurious effects on health.

Keyword: Smoking, descriptive study, injurious effects health

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INTRODUCTION

Tobacco use, a global health epidemic, is still considered the chief preventable cause of premature disease and death.¹ According to WHO tobacco kills nearly 6 million people each year, of which more than 600,000 are non-smokers dying from breathing second hand smoke.² In Pakistan the prevalence of tobacco use in males is 13.3 percent and in female 6.6 percent.³

Many studies have been carried out internationally and nationally to assess the prevalence of smoking among medical students. A study showed that the surveyed medical

students had in general a low level of knowledge of smoking related epidemiology.⁴

A study conducted in Peshawar indicated that prevalence of smoking among medical students was 31.8%.⁵ An international review showed that the prevalence of tobacco smoking varies greatly among medical students from one country to another. Its prevalence varies among male medical students from 3% in the United States to 53% in Japan. To a lesser extent, variation has been reported regionally.⁶

In a study in Saudi Arabia, it was indicated that for

initiating smoking habit, friends and the parents were the primary influence, followed by media.⁷ The main reasons for smoking were, peer pressure followed by the stress, media and imitation of others. Curiosity was a reason for having tried smoking and parents was perceived to be the first source for smoking.⁸

In another study the prevalence of current smoking was 4.3% and 5.6% for cigarettes and water-pipes, respectively, whereas 3.9% of the participants were ex-smokers.⁹ The prevalence of smoking was 24.8% among males, and 9.1% among females. The reason for using water-pipe was the belief that water-pipe smoking is less harmful than cigarette smoking.¹⁰

Study done at Canadian University reported moderate levels of education on a variety of tobacco-related subjects but were well-informed on the role of tobacco in disease causation.¹¹ Another study where the prevalence of cigarette smoking among medical students was 21%; about 42% of these started smoking at 18-19 years age or their first year of medical school.¹²

To combat this global epidemic, the WHO Framework Convention on Tobacco Control (WHO FCTC) was adopted by the World Health Assembly on 21 May 2003 and entered into force on 27 February 2005. The Convention represents a milestone for the promotion of public health and provides new legal dimensions for international health cooperation. Medical faculty has to play its role in the implementation of these laws. Results of this study will provide added information to the concerned authorities about the current scenario and to respond accordingly as Medical students are the future doctors and if they will not give up the tobacco habit at this stage how will they ever convince the population at large to do so.

Operational definitions

Smoker: A person who has smoked for one or more days in the 30 days preceding the study.

Non-smoker: A person who had never smoked.

Passive smoking: Involuntary inhalation of tobacco smoke by person especially a non-smoker.

MATERIAL AND METHODS

A cross sectional descriptive study was carried out to determine the smoking prevalence and knowledge regarding smoking in students of 4th year MBBS of Rawalpindi Medical University during study period of 4 months (March 2017-June 2017) . A total of 200 students were selected using consecutive sampling technique. Data was collected by a semi structured questionnaire. Data was collected by after verbal consent from respondents and confidentiality was ensured. Questionnaire include demographic profile, current smoking status, reasons for initiating smoking, knowledge regarding sheesha and passive smoking and suggestions to decrease smoking. Data was analyzed using SPSS 17.

RESULTS

Total 200 students responded to our questionnaire, amongst them 138 were girls and 62 were boys. 45% were between ages 19-21 years, 52.55% were 22-24 years and only 2.5% were above 25 years. 16.5% of the respondents were sheesha smokers. Regarding knowledge about passive smoking 94% students were well aware of the term passive smoking and 93% were of opinion that passive smoking is injurious to health. 88% students were in favour that anti-smoking legislations should be strictly implemented.

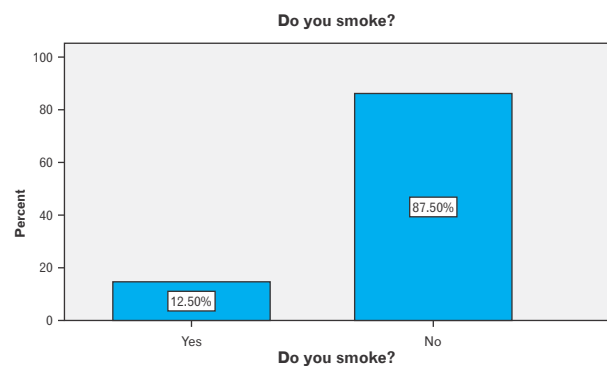


Figure1: smoking status of students

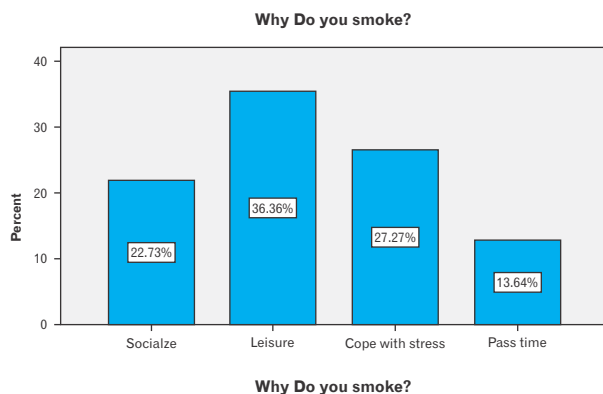


Figure 2: reasons of smoking

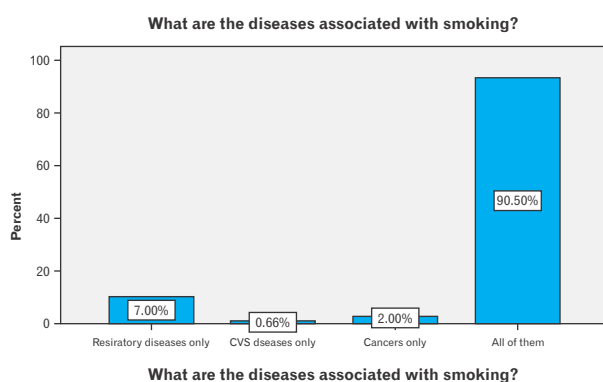


Figure 3: diseases caused due to smoking

Percentage of students (%)	Views about sheesha smoking as compared to cigarette smoking
13	Less injurious
60.5	More injurious
23.5	equal
3	Not harmful at all

Suggestions	Percent of students %
Ban on smoking	24.5
Raising tax on tobacco products	12.5
Public awareness through health education	25
Decreasing tobacco trade and cultivation	10.5
Strict implementation of anti-smoking laws	27.5

DISCUSSION

The results of this study showed that cigarette and sheesha smoking is becoming an important health issue among students. 12.5% of the students were found to be smokers. A similar

study carried out in Saudi Arabia showed that 17.53% of the students were regular smokers.¹³

In our study 4% female medical students were smokers. The results are in consistent with another study where prevalence of female medical students ranges between 2-9 percent.¹⁴ This increasing trend among female may be because of changing culture, less practice of religion, and increase social gathering of boys and girls where smoking especially water-pipe which is becoming fashion.

Our study revealed that 36.3% of the students smoked for leisure purposes followed by 27.27% to cope with stress. A National study also showed that 31.08% of the students smoked to cope with stress.¹⁵ Similar results from another study for smoking were leisure habit, imitation of other people and a means of relieving psychological pressure. As most of the students smoked due to peer pressure, so this may be the reason of large number of students smoking for leisure purposes, followed by stress coping mechanism as stress is unavoidable in lives of medical students.

Present study showed that 16.50% of the students smoked sheesha. In another study conducted in Saudi Arabia in 2010 among medical students, 44.1% of the medical students smoked sheesha. The results probably differ because habit of sheesha smoking is seen in higher socioeconomic class and our study sample consisted of people with all kinds of socioeconomic backgrounds.¹⁶

It was encouraging to see that majority of students clearly understood the term passive smoking and agreed that passive smoking is injurious to health. Similar results were seen from Agha Khan where almost all students agreed that passive smoking is injurious to health.¹⁷ The results are consistent with another research carried among medical students of Kaunas, where 97.1% of the students considered passive

smoking harmful.¹⁸ This high level of awareness may be because medical studies include such facts in curriculum

In our study the suggestions given to decrease smoking were strict implementation of legislations, health education campaigns followed by ban on smoking, raising tax and decreasing trade and cultivation. Similar suggestion were given in another study in Karachi.¹⁷

CONCLUSION

The prevalence of smoking among 4th year medical students is low. Majority were aware about the hazards of smoking. Most of them had adequate knowledge about passive smoking and sheesha smoking and their injurious effects on health.

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

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AUTHORSHIP AND CONTRIBUTION DECLARATION

Sr. #	Author-s Full Name	Contribution to the paper	Author=s Signature
1	Sidrah Nasim	Main concept and design, drafting article	
2	Sana Bilal	Analysis and acquisition of data	
3	Mehjabeen Qureshi	Interpretation of data, critical review	