

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:3391

ANSWERED ON:01.08.2014

TOBACCO RELATED MORTALITY

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**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

- (a) whether there has been a steady rise in deaths attributed to smoking and consumption of smokeless tobacco products over the past few years in the country and, if so, the details thereof;
- (b) whether the Government has ascertained the reasons for the steady rise in tobacco related mortality despite the antitobacco laws and measures in place and, if so, the details along with the outcome thereof;
- (c) whether the health cost of treating tobacco related diseases has exceeded the revenue generated through taxes on tobacco products in the recent past, as per the outcome of certain study/report, if so, the details thereof and the reaction of the Government thereto;
- (d) whether the Government proposes to ban the manufacture, marketing and consumption of various tobacco products across the country and if so, the details thereof; and
- (e) if not, the reasons therefor along with the other remedial measures being taken by the Government in this regard?

**Answer**

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN)

(a) & (b): As per the report of Tobacco Control in India (2004) nearly 8-9 lakh people die every year due to diseases attributable to tobacco use. As per the study conducted by Indian Council of Medical Research (ICMR) titled "Assessment of Burden of Disease due to Non-Communicable Diseases" (2006) based on analysis of published literature till 2004, the risk of disease attributable to tobacco use was 78% for stroke, 65.6% for tuberculosis, 85.2% for ischemic heart disease, 52% for acute myocardial infarction, 43% for esophageal cancer, and 16% for lung cancer respectively.

Based on the consolidated report of the population based cancer registries at Mumbai, Chennai, Bhopal etc. the estimated number of tobacco related cancer prevalent cases during the year 1999 was 1,63,500 which has increased in 2011 to 7,40,209 and it is estimated that 1,43,141 tobacco related deaths took place in different states of India in 2011.

The Government has not conducted any survey to ascertain the reasons for the rise in tobacco related mortality. However, Global Adult Tobacco Survey (GATS) India-2010 was conducted by Ministry of Health & Family Welfare in the age group of 15 years and above to monitor prevalence of tobacco use and track key tobacco control indicators. The Survey has provided base line estimates/data on key tobacco control indicators. Major findings of the GATS India 2010 are as follows:

# Current tobacco use in any form: 34.6% of adults; 47.9% of males and 20.3% of females # Current tobacco smokers: 14.0% of adults; 24.3% of males and 2.9% of females # Current users of smokeless tobacco: 25.9% of adults; 32.9% of males and 18.4 % of females # Average age at initiation of tobacco use was 17.8 years with 25.8% of females starting tobacco use before the age of 15. # Among minors (age 15-17), 9.6% consumed tobacco in some form and most of them were able to purchase tobacco products.

(c): A study was recently commissioned by Ministry of Health & Family Welfare in collaboration with WHO. The objective of this study was to estimate the economic burden of diseases attributable to tobacco use in India and across 13 states, using the most current available data. The study estimated the direct and indirect costs from all diseases caused due to tobacco use and four specific diseases namely, respiratory diseases, tuberculosis, cardiovascular diseases and cancers. The study has considered three major categories of costs to estimate the total economic burden attributable to tobacco, namely, (i) direct medical cost of treating tobacco related diseases, (ii) indirect morbidity costs and (iii) indirect mortality costs of premature deaths due to tobacco use. The study has shown that the total economic costs attributable to tobacco use from all diseases in India in the year 2011 for persons aged 35-69 years amounted to Rs. 1,04,500 crores, of which 16 percent was direct cost and 84 percent was indirect cost. The estimated economic cost of tobacco at Rs. 1,04,500 crores was found to be 1.16 percent of the GDP, and was 12 percent more than the combined state and central government expenditures on health in 2011-12. The total central excise revenue from all tobacco products combined in the same year amounted to only 17 percent of the estimated economic costs of tobacco.

(d): Gutkha , Paan Masala (Containing nicotine and tobacco) and similar other food products containing nicotine and tobacco have been banned across the country vide Food Safety and Standards (Prohibition and Restrictions on Sales) Regulations, 2011 dated 1st August 2011, issued under the Food Safety and Standards Act, 2006. The said Regulation 2.3.4 lays down as under

"Product not to contain any substance which may be injurious to health: Tobacco and nicotine shall not be used as ingredients in any food products".

So far, 34 States/Union Territories have issued orders for implementation of the Food Safety Regulations banning manufacture, sale and storage of Gutka and Pan Masala containing tobacco or nicotine. (Madhya Pradesh, Kerala, Bihar, Himachal Pradesh, Rajasthan, Maharashtra, Mizoram, Chandigarh, Chattisgarh, Jharkhand, Haryana, Punjab, Delhi, Gujarat, Uttar Pradesh, Nagaland, Andaman & Nicobar, Daman & Diu, Dadra and Nagar Haveli, Uttarakhand, Odisha, Andhra Pradesh, Goa, Sikkim, Manipur, Arunachal Pradesh, Jammu & Kashmir, Assam, West Bengal, Tripura, Tamil Nadu, Karnataka, Puducherry and Meghalaya).

Other forms of tobacco products are regulated through "The Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003" (COTPA). The said Act regulates consumption, production, supply and distribution of tobacco products, including by imposing restrictions on advertisement, promotion and sponsorship of tobacco products; prohibiting smoking in public places; prohibiting sale to and by minors, prohibiting sale within a radius of 100 yards of educational institutions and through mandatory depiction of specified pictorial health warnings on all tobacco product packs.

(e): In addition to the steps outlined in answer to para (d) above, a number of other steps have been taken by the Government to discourage tobacco use and reduce its consumption, including the following:

i. In order to enforce the provisions of "The Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003" (COTPA), the following important rules have been notified under the Act:

a) The revised Rules related to prohibition of smoking in Public Places notified vide G.S.R 417(E) dated 30th May, 2008 and enforced from 2nd October, 2008.

b) The Cigarettes and Other Tobacco Products (Packaging and Labeling) amendment Rules notified vide G.S.R 182(E) dated 15th March 2008 and enforced from 31st May, 2009. These rules mandated the depiction of the pictorial health warnings on all tobacco products.

c) The Cigarettes and Other Tobacco Products (Display of board by educational Institutions) notified vide G.S.R 40(E) dated 19th January, 2010 and enforced from the same date. It prohibits the sale of tobacco products within 100 yards of educational Institutions.

d) The Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Amendment Rules, 2011 notified vide G.S.R 619(E) dated 11th August, 2011 and enforced from the same date. These Rules mandate prohibition of sale of tobacco products to and by persons below the age of eighteen years and recovery of fine thereon by the authorized officers.

e) The Cigarettes and Other Tobacco Products (Packaging and Labeling) amendment Rules 2012 vide notification G.S.R. 724(E) dated 27th September, 2012. Three sets of warnings each have been notified for smoking as well as smokeless forms of tobacco. The new warnings came into effect from 1st April, 2013.

f) The Cigarettes and other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) (Second Amendment) Rules, 2011 vide GSR no. 786(E) dated 27-10-11 came into effect from 14th November, 2011 and has provisions to regulate the scenes depicting use of Cigarettes and other tobacco products in films and TV programmes. In order to remove certain practical difficulties in its implementation, the Ministry of Health & Family Welfare further amended Rules 7 and 8 of the above rules. The revised rules were notified vide G.S.R. 708(E) dated 21st September, 2012 and came into force from 2nd October, 2012.

(ii) Government of India launched the National Tobacco Control Programme (NTCP) in the year 2007-08, with the aim to (i) create awareness about the harmful effects of tobacco consumption, (ii) reduce the production and supply of tobacco products, (iii) ensure effective implementation of the provisions under "The Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003" (COTPA) and (iv) help the people quit tobacco use through Tobacco Cessation Centres. The coverage of National Tobacco Control Programme (NTCP) has been up-scaled to 53 districts of 29 states in 2013-2014 under the umbrella of National Health Mission (NHM). The competent authorities have approved its roll out in phases to all states and districts in the country during the 12th five year plan.

(iii) National Level Public Awareness campaign is a key activity under National Tobacco Control Programme (NTCP) which is aimed at educating people about the adverse health effects of tobacco use including second hand smoke and on pregnant women. A variety of media like electronic (Government and private Channels and FM/radio), outdoor billboards, bus panels, exterior train wrap-up, news-paper advertisement etc. have been and are being used to reach a wide set of audience.

(iv) Health spots relating to harmful effects of tobacco use are displayed by films and TV Programmes displaying tobacco products or their use, as per the Rules notified under COTPA, 2003.

(v) The Ministry has written to all the states to mainstream enforcement of the provisions of the anti-tobacco law through monthly crime review meetings at the district level. The Ministry has also requested the states to include the anti-tobacco laws in the 'Social Policing' agenda at the state level.

(vi) The Union Minister of Health & Family Welfare has written to all the Chief Ministers to consider adopting a 'Comprehensive

Taxation Policy' for all tobacco products so that they are taxed at similar rates and incentive to shift to relatively cheaper tobacco products is minimized. It has also been emphasized that under the policy, the tax rate should be linked to both inflation and changes in household income, so that any tax increase leads to an effective and 'real increase' in the price of tobacco products, making them less affordable over time and thereby reducing consumption & prevalence.

(vii) Further , Secretary, Department of Health & Family Welfare vide letter dated 26th June, 2014 has written to Secretary (Revenue) to adopt a 'Comprehensive Tax Policy' for tobacco products in the broader public health interest and with a view to protecting youth and children from getting addicted to tobacco use.