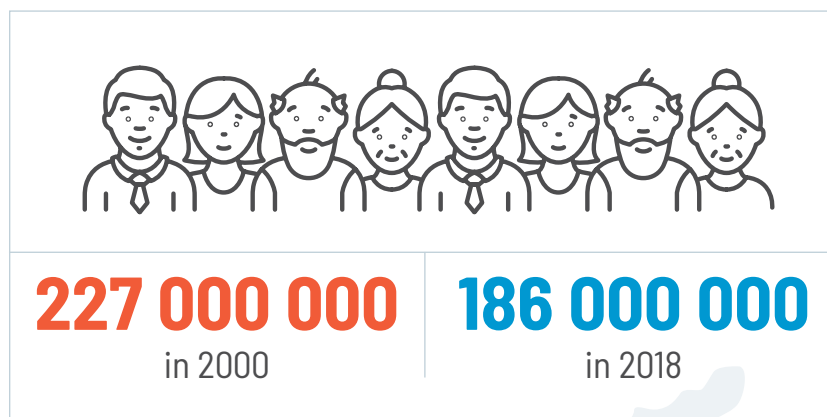


# Prevalence of tobacco use among adults in the WHO European Region

## > OVERVIEW

Fig. 1. Estimated number of current tobacco users, WHO European Region, 2000–2018

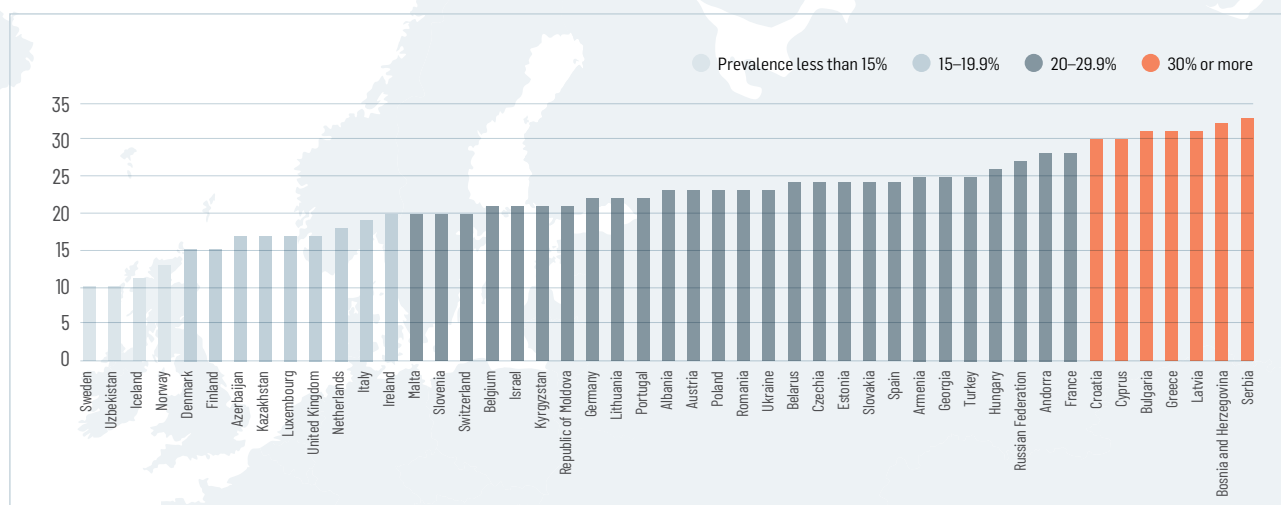
- > Estimated **prevalence of current tobacco use declined** from 34 per 100 adults (34.2%) in 2000 to 26 per 100 (26.3%) in 2018 (1).
- > An estimated **186 million people in the WHO European Region were current tobacco users in 2018** (down from 227 million in 2000) (Fig. 1).



Source: WHO (1).

- > Based on modelling, the European Region is tracking towards a **relative reduction in rates** from 2010–2025 of only 18% (instead of the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020 target of 30% reduction in global prevalence (2)).
- > The European Region is the only WHO region not expected to reach the female 30% relative reduction target by 2025.

Fig. 2. Adult daily smoking prevalence: age-standardized prevalence rates for adult daily smokers of tobacco (both sexes combined), 2017 (%)<sup>1</sup>



Source: WHO (3).

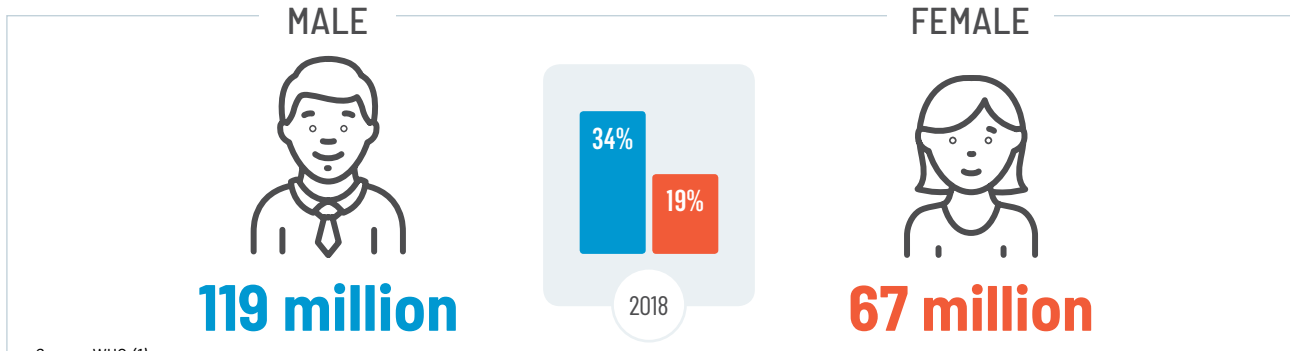
<sup>1</sup> Six countries do not have data: Monaco, Montenegro, North Macedonia, San Marino, Tajikistan and Turkmenistan.

Fig. 2 shows age-standardized prevalence in the Region. Being age-standardized, the figures should be used strictly for the purpose of drawing comparisons across countries and must not be used to estimate absolute number of daily tobacco smokers in a country.

## > BURDEN OF TOBACCO USE – BY GENDER

- > WHO estimates that around one third of men (34%) in the Region used tobacco in 2018. **Male** current tobacco users in 2018 (**Fig. 3**) numbered 119 million, a reduction from around 150 million (46%) in 2000; the number is expected to continue to decline to around 107 million (30%) by 2025.
- > WHO estimates that around one fifth of women (19%) in the European Region used tobacco in 2018. **Female** current tobacco users in 2018 (**Fig. 3**) numbered 67 million, a reduction from around 77 million (23%) in 2000; the number is expected to continue to decline to around 63 million (18%) by 2025.

Fig. 3. Estimated number and percentage of male and female current tobacco users, WHO European Region, 2018

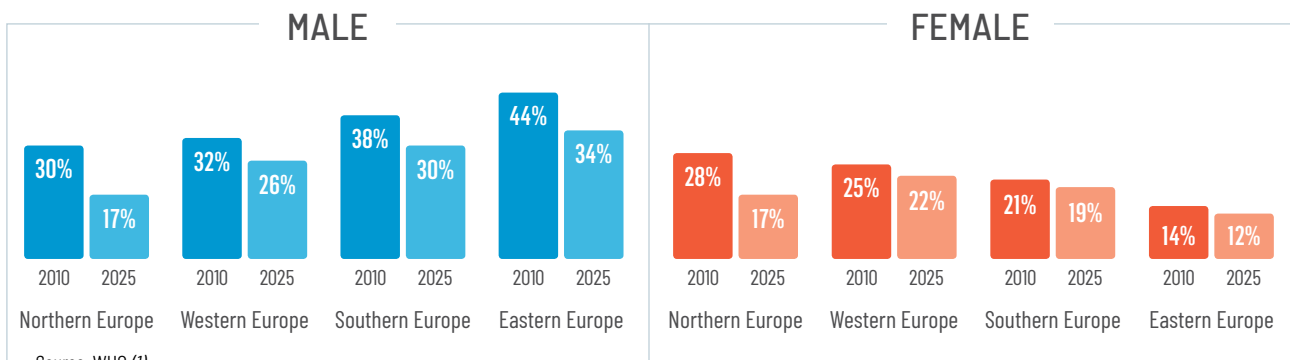


- > About 99% of male and female tobacco users in 2018 were smokers (cigarettes or other forms of smoked tobacco).
- > Just over 1% (6.1 million) of people aged 15 years and above in the Region use smokeless<sup>1</sup> tobacco, of whom 1.5% (5.3 million) are men and 0.2% (0.8 million) women.

## > BURDEN OF TOBACCO USE – BY SUBREGIONS

- > The average rate of tobacco use among men in northern European<sup>2</sup> countries in 2010 was the lowest of the four subregions<sup>3</sup> and is projected to see the biggest decline by 2025 (from 30% to 17%). The average rate for western Europe<sup>4</sup> was slightly higher and is projected to make the slowest decline of the four subregions (from 32% to 26%). Higher still was the average rate for southern Europe<sup>5</sup> (from 38% to 30%). The highest subregion average rate among men was for eastern Europe<sup>6</sup>, which is projected to remain the highest of the four subregions (from 44% to 34%) (**Fig. 4**).
- > The average rate of tobacco use among women in 2010 for eastern European countries was the lowest of the four subregions, and is projected to see a small decline by 2025 (from 14% to 12%). A higher average rate was estimated for southern Europe, which is projected to make the smallest decline of the four subregions (from 21% to 19%). Higher still was the average rate for western Europe, which is expected to make a small decline by 2025 (from 25% to 22%). The highest subregion average rate among women was for northern Europe, but this subregion is expected to make a very big reduction by 2025 that will see the average rate drop below those of both western and southern Europe but remain above eastern Europe (from 28% to 17%) (**Fig. 4**).

Fig. 4. The average rate of tobacco use in 2010 and the expected rate of tobacco use in 2025 by subregion countries, WHO European Region



<sup>1</sup> Examples of smokeless tobacco products include products for oral and nasal use. The most commonly used forms of smokeless tobacco in the WHO European Region are snus – a moist to semi-moist ground, oral smokeless tobacco product – and nasvay – a type of smokeless tobacco for oral use that is produced and used mostly in central Asian countries.

<sup>2</sup> Northern European subregion countries: Denmark, Finland, Iceland, Norway and Sweden.

<sup>3</sup> The subregions are: northern Europe, western Europe, southern Europe and eastern Europe.

<sup>4</sup> Western European subregion countries: Austria, Belgium, France, Germany, Luxembourg, Monaco, the Netherlands and Switzerland.

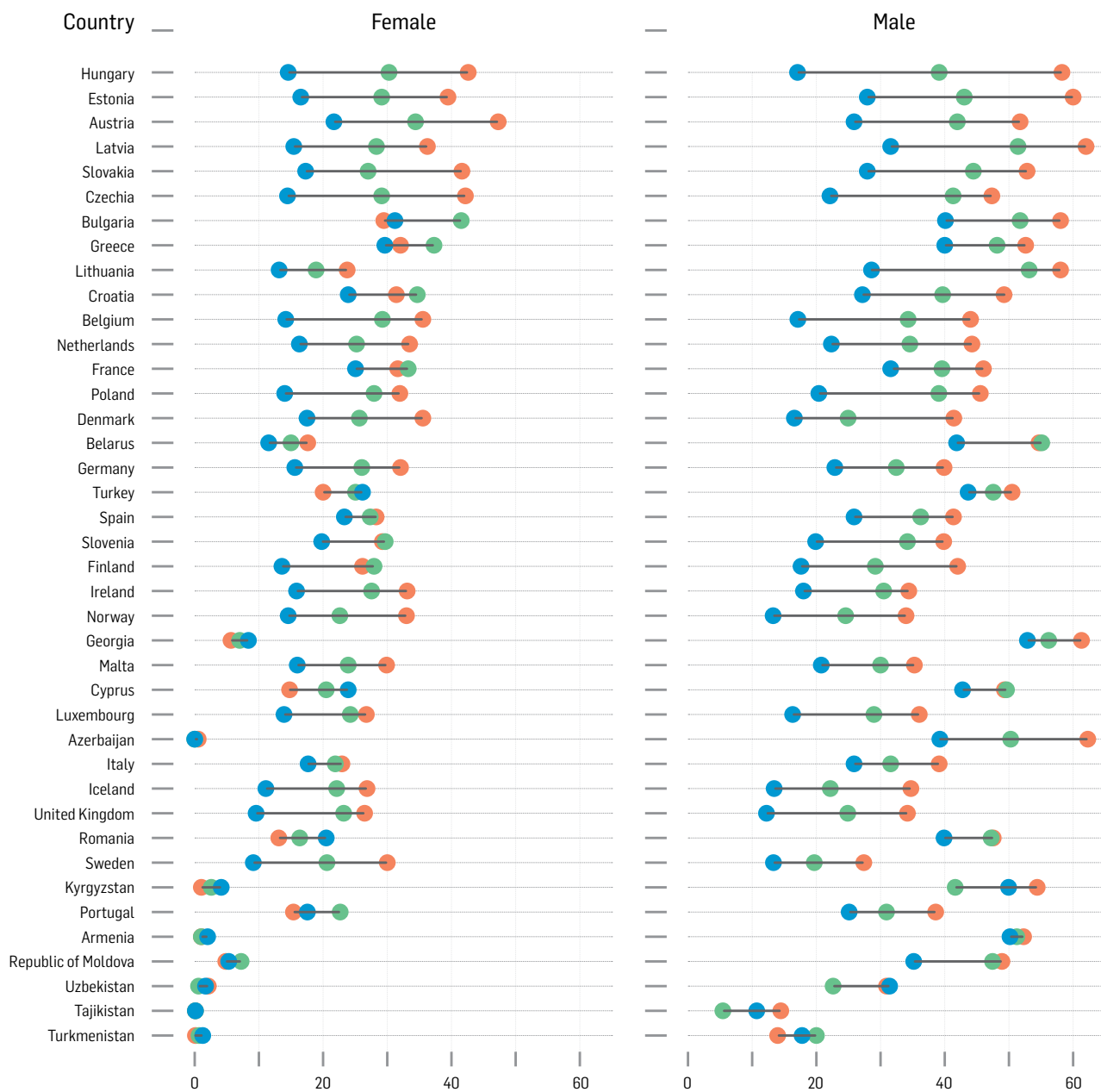
<sup>5</sup> Southern European subregion countries: Albania, Andorra, Bosnia and Herzegovina, Croatia, Cyprus, Greece, Israel, Italy, Malta, Montenegro, North Macedonia, Portugal, San Marino, Serbia, Slovenia, Spain and Turkey.

<sup>6</sup> Eastern European subregion countries: Armenia, Azerbaijan, Belarus, Bulgaria, Czechia, Estonia, Georgia, Hungary, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Poland, the Republic of Moldova, Romania, the Russian Federation, Slovakia, Tajikistan, Turkmenistan, Ukraine and Uzbekistan.

## > BURDEN OF TOBACCO USE – BY EDUCATION

In almost all countries and for both genders, smoking prevalence is highest among people with the fewest years of education and lowest among those with most years of education (Fig. 5).

Fig.5. Tobacco-smoking prevalence and education inequalities in European countries, ages 15 years and over, by sex, 2013-2017

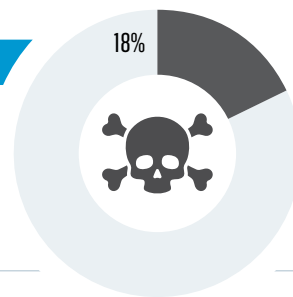


Source: WHO Regional Office for Europe (4).

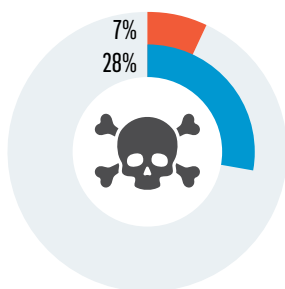
● Low education    ● Medium education    ● High education

## > DEATHS ATTRIBUTABLE TO TOBACCO USE

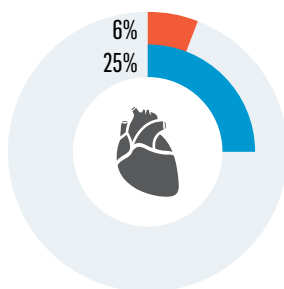
Eighteen per cent of **noncommunicable disease (NCD) deaths** in Europe are attributable to tobacco use. Almost one in five premature NCD deaths could be avoided if tobacco use was eliminated from the Region (4).



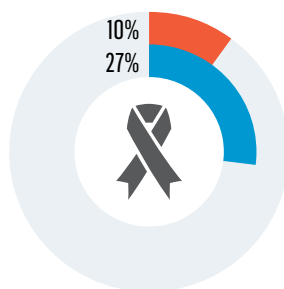
● Both sexes ● Men ● Women



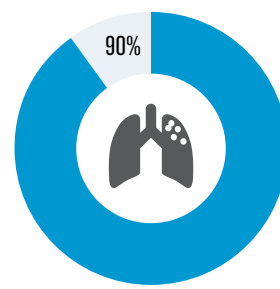
The proportion of **NCD deaths** attributable to tobacco use is four times higher for men (28%) than for women (7%).



The proportion of deaths from **cardiovascular diseases** (heart diseases, stroke and others) due to tobacco use are estimated to be 25% for men and 6% for women.



The overall proportion of **cancer deaths** attributed to tobacco is 27% for men and 10% for women.



Nine out of 10 **lung cancers** in men are related to tobacco use.



## WHAT SHOULD BE DONE?

- More countries need to monitor all forms of tobacco use, including the use of novel tobacco products, such as ENDS, ENNDS and HTPs<sup>7</sup>.
- Countries are encouraged to use standards and scientific and evidence-based protocols for tobacco surveys.
- Countries' capacities for conducting and implementing surveys and disseminating and using their results should be strengthened.
- Countries should integrate tobacco surveillance programmes into national, regional and global health surveillance programmes so that data are comparable and can be analysed at regional and international levels, as appropriate (5).

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1. WHO global report on trends in prevalence of tobacco use 2000–2025, third edition. Geneva: World Health Organization; 2019 (<https://www.who.int/publications-detail/who-global-report-on-trends-in-prevalence-of-tobacco-use-2000-2025-third-edition>).
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<sup>7</sup> ENDS: electronic nicotine delivery systems; ENNDS: electronic non-nicotine delivery systems; HTPs: heated tobacco products.

<sup>8</sup> Weblinks accessed 10 March 2020.