

Original Research Article

Prevalence and Psychological Characterization of Smoking amongst University Students in Abbottabad, Khyber Pakhtunkhwa, Pakistan

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Abstract

Purpose: To evaluate smoking, its causes, ill effects on the health and symptoms associated with smoking and smoking withdrawal among university students of Abbottabad, Khyber Pakhtunkhwa, Pakistan.

Methods: The questionnaire based study was conducted amongst university students in Abbottabad, Pakistan during November – December, 2012. Data were collected from university students using a self-administered questionnaire through simple random sampling.

Results: Most subjects (43.6 %) started smoking during college life. Out of the total, 27.2 % of the subjects were of the opinion that smoking is a bad habit, but they still continued smoking. Among them, 17.6 % started smoking to 'feel' like adults, 20.8 % started just to feel the experience of doing so, 17.6 % were under the bad influence of friends and 8.4 % people wanted to escape from stressful life and seek comfort in smoking. Symptoms associated with smoking were shortness of breath (22.4 %), tiredness (17.2 %), chest pain (22.8 %), sleeping problem (16.8 %) and cough (43.2 %). Moreover, symptoms associated with withdrawal include mood disturbance (16.1 %), headache (9.9 %), tiredness (7.5 %), constipation (11.3 %), dry mouth (10.4 %), sleep disturbance (6.9 %), cough (5.4 %) and study problem (9.3 %).

Conclusion: Smoking habit among the university students is common and in many cases results from experimentation and feeling of adulthood. Proper education on the dangers of smoking is vital.

Keywords: Psychology, Smoking, Health, Withdrawal symptoms, Counseling

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INTRODUCTION

Smoking has been known to be associated with about 40 diseases and numerous causes of death [1]. Smoking leads to 80 - 90 % of lung cancer cases, which represents the first cause of death in males within the ages of 40 to 64, and the third in those from ages 65 and above [2].

It is difficult to quit smoking, as it is associated with withdrawal syndrome consisting of a variety of symptoms including light headedness, mouth ulcers, constipation, increased weight, increased appetite, restlessness, difficulty in concentrating, irritability, sleep disturbance and depressed mood [3-5]. Such symptoms urge the subject to smoke, leading to a failed relapsed attempt in early quitting stage [6]. In many smokers, the

symptoms associated with the withdrawal of smoking are the main causes of failed attempt to leave smoking. Therefore, NRT (nicotine replacement therapy) is a different path providing nicotine other than tobacco. Studies show that treatment with NRT has high success rates. Recent studies suggest that NRT is effective in completely quitting smoking and is twice effective as compared to other methods of cessation to a placebo [7].

Smoking cessation is an activity that fits the role of pharmacists. Hospital pharmacists are considered to be an essential element of the health care team, they have specialized roles in the clinical setting. Pharmacists in a hospital set up are more patient-oriented, because of close proximity with patients; they are however in a better position to participate in smoking cessation activities. They also provide information to other professionals and patients [8].

The objective of this study was the psychological characterization of smoking amongst university students in Abbottabad, Pakistan and to find a relationship between smoking and various social factors, ill effects of smoking on health and symptoms associated with smoking withdrawal.

EXPERIMENTAL

The questionnaire based study was conducted amongst university students in Abbottabad, Pakistan during November - December, 2012. Data were collected from university students on a

self-administered questionnaire. A simple random sampling technique was adopted for the collection of data. After taking verbal consent, students filled the questionnaires. Demographic data in the questionnaire included age, gender and type of qualification (e.g. medical or non-medical). Other questions were designed to acquire information like smoking for the first time, provoking factors for initiation of smoking, presence of symptoms associated with smoking and symptoms associated with smoking abstinence. Questionnaires were distributed amongst those who were involved in the practice of smoking. Data were entered and analyzed in SPSS version 16.0. The level of significance was kept at 0.05.

RESULTS

Among the participants (all males), mean age of the participants was 21.66 years ($SD = 2.07$) (Table 1). Out of 250 participants, 82.4 % were unmarried and about half of them were in the medical sciences. Due to social norms observed in Pakistan, females could not openly disclose the information if there were any female smokers.

Most of the subjects (43.6 %) started smoking in college life, 28.8 % in school life and 27.6 % in university life. About half (52.4 %) of the subjects smoked only for recreational purposes, while 30 % of the persons smoked as a result of feeling of stress (Table 2). As many as 44 participants smoked without any specific reason.

Table 1: Demographic data of the participants

Variable		Frequency (n)	%
Gender	Male	250	100.0
	Female	0	0.0
Marital status	Married	44	17.6
	Unmarried	206	82.4
Educational status	Medical	124	49.6
	Non-Medical	126	50.4
Age (mean \pm SD)	21.66 \pm 2.07		

Table 2: Smoking for the first time and causes of smoking

Smoking for the first time			Cause of smoking		
Variable	Frequency (n)	%		Frequency (n)	%
During university life	69	27.6	For enjoyment	131	52.4
During college life	109	43.6	For relaxation	75	30.0
During school life	72	28.8	Without any motive/reason	44	17.6
Total	250	100.0	Total	250	100.0

Approximately 72.8 % of the subjects were of the opinion that smoking is a bad habit, but they still continued smoking. When the reason for smoking was assessed, 32 % of the people suggested that smoking is not a serious issue because of lack of social awareness of harmful aspects. Furthermore, 31.2 % individuals are under social pressure and cannot quit due to society of friends and 36.8 % people showed a less motivated approach, suffering from self-confidence saying that abstinence would be difficult for them to handle and that they did not

find the courage to quit smoking only due to fear of withdrawal.

Amongst 250 respondents, 17.6 % started smoking to look like adults, 20.8 % started just to get experience, 17.6 % were under the bad influence of friends and 8.4 % people wanted to escape from their stressful lives and tried to find comfort in smoking. Moreover, 12.4 % were smoking in order to get rid of anxiety and 8.8 % subjects smoked because they could not handle failure in examination.

Table 3: Opinions of participants on smoking and reasons for not quitting smoking

Opinions of participants on smoking			Reasons for not quitting smoking		
Variable	Frequency (n)	%		Frequency (n)	%
Good habit	68	27.2	Smoking is not a serious problem/harmful	80	32.0
Bad habit	182	72.8	Because my friends do not allow me to quit	78	31.2
Total	250	100.0	Due to problems associated with abstinence	92	36.8
			Total	250	100.0

Table 4: Factors that led to smoking

Variable	Frequency	%
To feel like an adult	44	17.6
For experience	52	20.8
Influence of friends	44	17.6
Away from family	34	13.6
Due to stress	21	8.4
Due to anxiety	31	12.4
Failure in examination	22	8.8
Influence of family members	2	0.8
Total	250	100

Table 5: Symptoms observed in smokers

Symptom	Number of smokers (n)	%*
Shortness of breath	56	22.4
Tiredness	43	17.2
Chest pain	57	22.8
Sleeping problem	42	16.8
Cough	108	43.2
No symptom	81	32.4

*Multipurpose question, and hence total does not add to 100 %

Symptoms associated with smoking were shortness of breath (22.4%), tiredness (17.2 %), chest pain (22.8 %), sleeping problem (16.8 %) and cough (43.2 %).

Moreover, symptoms associated with withdrawal include mood disturbance (16.1 %), headache (9.9 %), tiredness (7.5 %), constipation (11.3 %), dry mouth (10.4 %), sleep disturbance (6.9 %), cough (5.4 %) and study problem (9.3 %).

DISCUSSION

In the current study, majority of the students started smoking during college life, showing that this stage of life is very crucial whereby physiological, psychological and social changes take place in an individual's life. The most provoking cause of smoking is enjoyment [9]. A lot of participants in this study smoked for the purpose of relaxation showing that our students are stress minded and need psychological treatment and consultation. Despite living a university life, some students considered smoking as a good habit. Moreover, some students considered smoking as a non-serious problem [10]. This reflects that our students need proper education in the context of smoking and its negative impacts [11].

Furthermore, many students were under the bad influence of friends who did not let them quit smoking. In addition, few students started smoking under the influence of friends. This indicates social impacts on an individual's life. Other causes of smoking include the need to feel like an adult, for experience, away from family,

stress and failure in examination [3]. All these causes can be removed by proper counseling of the smokers about their life style, hazards of smoking and how to quit smoking which are possible with the help of a qualified and properly trained pharmacist.

There was no significant difference in the symptom of shortness of breath in our study and that conducted by Isabel et al ($p < 0.05$). In our study, the symptom of cough was significantly higher than the symptom of Isabel et al with a p value less than ($p < 0.05$). There was also no significant difference between the asymptomatic smokers of both studies ($p < 0.05$) [12].

Pharmacists should seek the opportunities to counsel smokers to quit and some pharmacists with professional training should provide the smokers with treatment for symptoms associated with quitting. The community pharmacists should ensure the availability of medications for smoking cessation like NRT [13].

Other pharmacists should work in areas where they are directly exposed to the health professionals and public. All pharmacists who directly get in touch with the customers and care givers have a role to play in helping people to quit smoking. These students need proper counseling in order to get rid of smoking since quitting smoking before the age of 40 decreases the possibility of death from smoking-related diseases by approximately 90 % [14].

Limitations of the study

There is scarcity of female smokers in the finding, which may be due to the strict social norms whereby females are much more restricted to avoid such sort of malpractice. Thus, the females may conceal the information about their smoking habits.

CONCLUSION

Smoking is associated with cumbersome effects as observed in this study. Despite studying in a university, a lot of students even do not consider smoking as a bad habit. These participants started smoking due to lack of awareness and various psychosocial factors. There is a dire

need for proper counseling of the smoker, to tell them about the ill effects of smoking, how to quit smoking and how to get rid of symptoms and problems associated with smoking withdrawal.

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