A tracheostomy for the Marlboro man

Sir: Your journal deserves congratulations for so courageously publishing the striking cover illustrating the hazards of smoking (MJA, July 24, 1982).

The serious threat to health posed by smoking was confirmed in a recent study of drug-related deaths in Australia. The study found that "deaths related to tobacco represented, consistently each year, between 1969 and 1980, about 80% of all the estimated drug-related deaths... alcohol related deaths represented 16-18% and other drug-related deaths between 3-5% of all the estimated drug-related deaths".

Tobacco-related deaths were estimated to cause a loss of 95,000 persons per year due to premature death. Moreover, in the age group over 65 years, tobacco-related deaths accounted for 842 per 100,000 deaths.

The recent failure of the British Government to obtain realistic voluntary codes for advertising is a salutary lesson. Bittoun
Sir: Congratulations on having the courage to address such an important social issue as the health effects of smoking in the manner that you have.

Your vigorous approach is reflected in the cover of the Journal of July 24. While it might not appeal to the more conservative, the cover conveys a clear message and has been much appreciated by patients.

Staff in our psychiatric hospitals and community mental health centres teach people how to cope with stress and live healthier, more drug-free lifestyles. It is ironic that in attempting to help people cope with emotional disability we, as staff, sometimes pay too little attention to other health issues such as smoking.

It is good to see the Journal devoting more attention to preventable illness.

John Grigor,
Mental Health Division,
Health Commission of Victoria,
GPO Box 4029,
Melbourne, Vic. 3001.

Sir: I write to comment on "A tracheostomy for the Marlboro man" with the much talked-about picture on your front cover.

The dissemination of information about the destructive habit of smoking has for far too long been timid. In most smokers, the "habit" is a true addiction, and a direct approach to the reason will seldom persuade the addict to give up. It is often the oblique or humorous angle which will score a point.

My own clinical concern has been the difference between smokers and non-smokers undergoing anaesthesia and surgery, for the risk factors in the two groups are quite different. Your "MarbleRow Man" is not unlike occasional patients who smoke within 24 hours of a rhinoplasty, with tears streaming down their face and epistaxis powered by uncontrollable coughing.

Hunter J. H. Fry,
16 Howard Street,
Kew, Vic. 3101.

Sir: The Australian Consumers' Association would like to commend the Journal's decision to publicise the work of the anti-smoking group BUGA UP*.* There can be little doubt that their work has brought to public attention, in the most memorable way, the health risks of smoking.

While one may have reservations about their recourse to civil disobedience as a means of getting their messages across, in years to come, historical perspective may regard them as vanguard of social change in this important area. Many now view the suffragette movement, the anti-war demonstrations of the 1960s, and the present anti-nuclear movement as turbulent but necessary means of achieving ends that are vital to fundamental questions about civilisation.

If the medical profession were to ignore the achievements of BUGA UP, there would be justifiable cause for "head-in-the-sand" accusations. To side against BUGA UP would be to implicitly side with the tobacco industry, their only vocal critics.

The only course open to a profession dedicated to preventing tobacco-caused disease is to give recognition to other groups who share this goal. In doing this, the Journal is to be congratulated.

Simon Chapman,
Council Member,
Australian Consumers' Association,
28-30 Queen Street,
Chippendale, NSW 2008.

*A Billboard Utilising Graffiti Against Unhealthy Promotions.

Sir: I was interested to read the short paper by Renee Bittoun entitled "A tracheostomy for the Marlboro man" and would agree that there is need to ridicule cigarette advertising.

I note that recall of advertising for Marlboro cigarettes was almost universal among 10 to 11-year-old children in recent Australian studies, indicating just how seductive this particular advertisement is. The advertisement is still in the same areas in which I have been seeing it for many years, so any campaign along the lines suggested in the article will have a slow effect.

For the life of me, I cannot understand why that advertisement sells cigarettes since it is obviously the hat that makes the man. That it is a very handsome hat I have no doubt means something very masculine to the youngsters who are seduced into smoking cigarettes.

I therefore think we should point out to the public that the advertisement is really advertising hats and not cigarettes at all. Hats prevent skin malignancies if they are worn regularly, and I think Australia should be a nation of hat wearers. Any professor of community medicine or minister of health worth his or her salt should not be seen in the open without one. We do have a hat heritage which seems to have been lost and perhaps could be revived by a hat museum. Wearing a hat in the open should be as much a habit as buckling the seat belt before starting the car.

Although I agree that ridiculing advertisements will certainly be of help, perhaps the idea that this particular advertisement is advertising the hat (that makes the man masculine) rather than the cigarette (which detracts from his masculinity) might well be worth spreading around.

John N. Burry,
North Terrace House,
29 North Terrace,
Hahndorf, SA 5069.

THE FOLLOWING letter by Dr James Smibert might be best described as an "unpublished letter to the Editor". It was sent to The Age (Melbourne) but was not printed. The author then submitted it to the Journal. The Editor of The Age did not wish to comment for publication in the Journal. In fairness, most newspapers (and medical journals) receive more letters than can be published.—Editor.

To the Editor of The Age: On Thursday, July 29, you published on your front page (of The Age) the reaction of Philip Morris Ltd to the Medical Journal of Australia's front cover "spoofing" of cigarette advertisements. Philip Morris had counter-attacked the medical profession for "overservicing" and other alleged crimes.

That afternoon I phoned the following letter to Access Age:

'The reaction of the Philip Morris company to the Medical Journal of Australia's front cover was predictable. While the medical profession may contain a few black sheep, at least the majority is not engaged in trying to make a profit out of marketing a known poison for human consumption.'

My short letter was not published, and I wonder why? Was it because the person in charge of Access Age is a chain-smoker? Or, was it because The Age would prefer to criticise the medical profession rather than the tobacco industry?

Or, are their full-page colour advertisements for cigarettes to big a source of income to jeopardise? Or, do they not accept that a packet of cigarettes a day trebles human mortality under the age of 65?

James Smibert,
400 Albert Street,
East Melbourne, Vic. 3002.


3. Australian Alcoholl Drug Related Review. "The following letter by Dr James Smibert might be best described as an "unpublished letter to the Editor". It was sent to The Age (Melbourne) but was not printed. The author then submitted it to the Journal. The Editor of The Age did not wish to comment for publication in the Journal. In fairness, most newspapers (and medical journals) receive more letters than can be published.—Editor.

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