

Health versus greed

GEORGE E. GODBER, DM

The World Conferences on Smoking and Health began in New York at the instance of the American Cancer Society 16 years ago and have continued at four-year intervals since. The conferences have been unusual in their provenance because none has been promoted by a government or a national medical organization. We have come together from many different backgrounds and with various support because we know what harm smoking does and want to see that harm reduced. In 1967 some of those attending may have thought there was still a case to prove, although I recall that even the television technicians had put out their cigarettes before Robert Kennedy was half way through his remarkable speech at the opening session. I do not imagine there is anyone attending the Fifth World Conference—even the odd agent from the industry—who still doubts that smoking is the largest single avoidable cause of ill health and premature death in the industrialized world today. Our problem is not whether but how we should persuade smokers to stop and others to refrain from starting. We all know that it is the active efforts of the promoters of smoking that has made it so difficult for the promoters of health.

Yet 1967 is only half way back to the time when we had the first unequivocal proof of the causal relationship of smoking to lung cancer. I remember that Alton Ochsner, MD who had suggested that there might be such a link 30 years earlier, was at that first conference. Richard Doll and Austin Bradford Hill in Britain and Ernst Wynder and Everts Graham in the United States first gave us proof in 1950. By 1967 Doll and Hill had not only shown that smoking causes far more illness and death from other diseases than from cancer, but also that stopping smoking may reverse the effect. Hammond and Horn had reported on a far larger study in the United States. Hill, Hammond, and Horn were all at that first conference, which was chaired by Luther Terry. (Graham, who had smoked heavily until his own research convinced him otherwise, died of lung cancer.)

The epidemic of lung cancer in Great Britain alone has cost some three quarters of a million lives since we have known its origin and how to stop it. Thirty years ago, that epidemic was only half way to its present peak. Future

generations will be aghast that so little had been done to stop it in the first decade or indeed by the time of the first conference. The most that health ministries were doing in the 1950s was some occasional propaganda which had little and transitory effect on most people, although the medical profession itself responded. The industry was all too alert to the threat to its market and rapidly increased its sales promotion. We were content to tell the public on a take-it-or-leave-it basis. Indeed, that is just the line some politicians take now because they maintain that people must be free to choose—and so they must, *provided it is an informed choice*. That choice is hopelessly prejudiced if it has to be made against the constant pressure of intensive sales promotion, always presenting smoking as a sociable, attractive activity of normal men and women in pleasant circumstances. By now we have come to realize that smoking is essentially a form of addiction, which is cleverly reinforced by sales promotion.

Two events of the 1960s changed public attitudes. In 1962 the Royal College of Physicians of London published their report on smoking and health, the result of a three-year study. That report had a tremendous impact and it sold even more copies in North America than in Britain. After the 1964 report of the United States Surgeon General there could no longer be any doubt of the enormity of smoking as a man-made threat to health. Since then the literature filling out information on every detail of the smoking menace has multiplied until it fills a modest book from the Technical Information Center of the US Office on Smoking and Health every two months. There have been yearly reports from the Surgeon General since 1964, two more reports from the Royal College, and reports in most industrialized countries from government or other committees, all presenting the same broad conclusions. Smoking is the largest single avoidable threat to health in the industrialized world today and the cigarette the most lethal instrument devised by man for peacetime use.

We are left with the problem, not so much of deciding on the right action to take, but how to ensure it is taken. Looking back over 33 years, one can recognize three phases in the campaign, each lasting roughly a decade. First there was the period of proving the case, ending with the first major reports of 1962 and 1964. Second was the period of seeking ways of convincing the public and governments. Third came the period of more intensive study of the factors which make escape from cigarette dependence so difficult. It is probable that in the first phase the tobacco interests simply treated the health campaign as a scare which would

Dr Godber is former Chief Medical Officer of England and Chairman of the First and Second WHO Expert Committees on Smoking.

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Address correspondence to Sir George Godber, 21 Almonders Avenue, Cambridge CB1 4NZ, England.

die down. In the second phase they took a placating action which they implied would minimize the risk (a risk they have never acknowledged in the first place) of trying to make smoking materials less carcinogenic. That theory blown, in the third phase they have mounted a two-pronged promotional effort aimed at maintaining lucrative sales—namely, visible corporate philanthropy to cultural and sports organizations on the one hand and a barrage of sophisticated advertising imagery on the other—and the notion that the regrettable harm to health can be made to appear socially acceptable in return for the pleasure tobacco provides.

There can be no doubt about the need for an international approach. Work in one country has proved invaluable to others. This, after all, is how the tobacco industry operates. In 1975, the first Expert Committee of the World Health Organization (WHO) before the Third World Conference in New York proposed national comprehensive campaigns, which the conference endorsed and commended to all health ministers. Four years later a second Expert Committee reviewed and extended the measures proposed in a report, *Controlling the Smoking Epidemic*, and expressed great concern about the uninhibited way in which smoking was being promoted in less-developed countries. The third Expert Committee has been concerned with action leading to economic and agricultural changes.

Sixteen years ago I wondered just how useful a world conference could be. Now as I enter my membership of this, the fifth, I have no doubt that the series has helped to give the campaign against smoking an impetus it would not otherwise have had. But how many more conferences is the world condemned to need? We have made some real gains in reducing mortality in younger men, but women are now exposed much more to the damaging effects of smoking than they were 30 years ago and the result in rising cancer deaths is already apparent. Moreover, the danger to the fetus from smoking by pregnant women is now known and all too little has been done to reduce it. In the 16 years since the first conference, the people of our countries must have lost many millions of years of potential working lives because we have not succeeded to the extent we should have done. In recent years there has been a mounting threat to the less developed, less healthy, and less affluent countries of the world, promoted by the multinational conglomerates whose advances we are slowly containing at home. It is this

last development that fully exposes the main support of the continued prevalence of smoking disease and explains the assignment given to WHO's third Expert Committee.

The commercial interests show no scruple about promoting a product with the devastating consequences we know all too well and of which they cannot be ignorant. The developed countries have begun to assert some control over promotion of tobacco—limited and ambivalent as governmental action has been—and the industry has used every endeavor to circumvent control, even in countries like Norway where forceful laws have been enacted. Politicians in some countries, like my own, have been so misguided as to accept inept and futile voluntary agreements about direct promotion which will never be effective so long as the indirect and supposedly innocent methods such as promotion of the arts and, most ironic of all, sports are left open. Those agreements would not be concluded if the commercial interests really believed that the result would be the end of their commerce.

Do governments have a secret reservation of their own that they can seem to fight for our cause so long as they do not actually win?

How many more times must we restate the formula? It has been set out by the last two conferences and the WHO Expert Committees and now again by the Ontario Task Force, each time with a wealth of added detail. But the essentials remain the same. Broadly, they are: Stop commercial promotion of tobacco products; limit smoking in public places; increase the cost of smoking by progressive taxation on tobacco products; and above all, improve education for health, especially of children. Let us stop deceiving ourselves by half measures and make a serious attempt to realize the target Sweden once set itself of a nonsmoking generation, and make it soon. Let no government hide behind the excuses that workers in the tobacco industry—producers, processors or sales force—will lose their incomes, or that taxes will have to be levied in different ways. There are other crops and other industries that might be far more beneficial to those people. We do not ask for laws against smokers, but against the promoters and reinforcers of tobacco addiction. If we in the industrialized world are beginning to win—and do not doubt that we will win—then it is the manifest duty of governments and international agencies to complete that victory within years, not decades, for all countries. Let that be our clear message to them.

HOLOCAUST

Every year cigarettes kill more Americans than were killed in World War I, the Korean War, and Vietnam combined; nearly as many as died in battle in World War II. Each year cigarettes kill five times more Americans than do traffic accidents. Lung cancer alone kills as many as die on the road. The cigarette industry is peddling a deadly weapon. It is dealing in people's lives for financial gain.

—from an address by the late United States Senator Robert F. Kennedy of New York at the First World Conference on Smoking and Health, New York, NY September 11, 1967