

a history of mental illness who seek tobacco dependence treatment in settings other than mental health facilities and clinics would follow standard tobacco dependence treatment guidelines. Adjustments in these protocols are needed to take into account special risks to achieving abstinence if we are to improve treatment of smokers with a history of mental illness<sup>40</sup>.

Thus, tobacco causes addiction and severe adverse effects on the body and mind not only the subject for scientific study it draws our attention to its public health implications. There has been a notable lack of dialogue between neuroscientists, who use nicotine in their experimentation, and public policy and health researchers, who view nicotine dependence with increasing dismay and see the continued use of tobacco products as a modern day scourge.

## PREVENTIVE MEASURES

In May 1999, World Health Organization's Framework Convention on Tobacco Control (FCTC) provided basic tool for the countries to enact comprehensive tobacco control legislation. In May 2003, 192 member countries adopted the FCTC backing the resolution. Treaty became international law in February 2005 to address the devastating health, social, environmental, economic and psychological consequences of tobacco consumption world-wide. The objective of the treaty is to protect the present and the future generations from tobacco menace.

In April 2003, the Indian Parliament enacted a far-reaching antitobacco legislation, the Cigarette and other Tobacco Products Act banning tobacco smoking at public places and declaring it as a punishable offence. The Act also bans advertising of tobacco products. The rules framed are:

- Prohibition of smoking in public places
- Prohibition of advertisement of cigarettes and other tobacco products.
- Prohibition of sale to minors.

The Act is in force since May 2004 yet the larger picture is truly alarming. India has turned into a potential market for tobacco industry. According to National Organization for Tobacco Eradication (NOTE) 6000 teenagers start using tobacco products in the country everyday<sup>27</sup>. And out of 100 teenagers smoking today, 50 will eventually die prematurely due to tobacco related diseases. Two third of country's smokers begin at an early age and by the time they realize the risk, they become addicted to nicotine posing public mental health menace. It is not surprising that the Indian Government has banned smoking scenes in movies and WHO has emphasized that the physicians treat tobacco addiction along with other morbid conditions.

Health education efforts against tobacco in India are few. Central and state Health Education Bureaus can play important role to counteract the spreading tobacco menace, which can be largely curtailed through prevention and successful quitting as a result of health education. WHO's regional office supported National Tobacco Control Cell coordinates the activities at the national level to develop strategic media plan to provide health education to the masses.

Tobacco demand is quite high in Indian society and this demand can be possibly reduced by highlighting and emphasizing the harm caused by tobacco. It is the need of the hour to teach each tobacco use to say "no" to tobacco.

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