



Cigarette Smoking Frequency among Medical students in Punjab Pakistan.

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ABSTRACT

Smoking is dangerous to effect performance of medical students and has bad effects on socioeconomics of the whole family. The researches planned to visit medical students of Pakistan and narrow down the area of medical colleges in Punjab and had exercised mix methodology to find out smoking bad effects. Data were collected by questionnaires, interviews and discussions by teachers and students. The selected data were analyzed in a software called (SPSS). Both qualitative and quantitative methods were applied. It is observed that severe cough is the most dangerous for lungs in smoking after effects, Oral cavity and blackening of teeth should be avoiding by refrain smoking. Medical students study demands good health and concentration with devotion. It is recommended that Medical students may abide by smoking rules. After continuous smoking medical students health is on risk. Per-Day use of cigarettes has different types of injuries to lungs. One should avoid to smoke in the presence of family members One should try ever best to get rid of smoking. Smoking is harmful for health even if they are of highest quality. It is recommended by the researchers that physical exercise may play a role in

affecting the likelihood of tobacco smoking by its impact of depression. In addition to physical activities in general (such as running ,swimming, playing basketball, volleyball, table tennis, etc.).Saying prayer is also complete and healthy exercise for body, mind ,enthusiasm and spirit.

Key Words: lungs injuries, Medical students, Mental relief, Oral cavity, Parents, Role model, Smoking, Teachers cooperation,

INTRODUCTION

Medical students smoking problems are very critical around the world. All understudies in the first to fifth year in the Personnel of Drug, The Colleges in Punjab were approached to examine the reasons of the issue with respect to anyone is concerned with regards to smoking and when they began smoking. The statements in the questionnaire were asked about the job of their companions and the staff to enable them to quit smoking. Non-smokers thought a lot about the issues of smoking, a significant number of the smokers did not. The principle effect on understudies to begin smoking was from guardians, kin and companions. 80% of the smokers are happy to surrender smoking and they attempted ordinarily. The examination demonstrated that little exertion was made by the College Staff to enable understudies to quit and avoid smoking. Most understudies began smoking in the high auxiliary schools. There is a requirement for family network and institutional crusade to contain the issue of smoking. Smoking is the main source of damage the personality and mortality. The negative wellbeing outcomes of smoking are extensive and incorporate malignant growths of the lung and different organs, constant lung illness, stroke. Smoking amid pregnancy can prompt unconstrained premature births, low birth weight, and abrupt baby demise disorder. Automatic presentation to tobacco smoke additionally prompts genuine wellbeing impacts. The point of this examination is to know the predominance of cigarette smoking among understudies and to recognize how much understudies think about the risks of smoking when entering the medicinal colleges and at abandoning it. It decreases wellbeing dangers and improves personal satisfaction. As one can accept, a significant number of their own smoking practices and convictions are framed amid their medicinal training. Any fruitful tobacco control measures inside the therapeutic calling should start before graduation from restorative school. Undergrad educational program must incorporate instructing modules

concentrating on the obligation that specialists have in infection aversion and preparing in explicit smoking discontinuance methods. In spite of the obligation that doctors have towards their smoking patients, inquire about proposes restorative understudies still don't get sufficient preparing. It is recommended that it was important to stop smokers before they had built up a smoking-related sickness .

LITERATURE REVIEW

Doctors play an important role to save human life. Medical colleges are remarkable for leading to make better the lifesaving and caring goals. As professionals, medical doctors. As professional doctors. It is observed that mostly percent of male physicians and less percent of female physicians in medical colleges are habitual of smoking. (Buck et al. 2008; Jiang et al., 2007; Li et al., 1999, 2007; Smith et al., 2006; Yu et al., 2009). Smoking students score is higher in industrialized countries, like developing and industrial country Pakistan (Hay, 1998; Hensrud and Sprafka, 1993; Hussain et al., 1993; Nelson et al., 1994; Ponniah and Bloomfield, 2008). Students in medical college enter medical colleges directly from higher secondary school level. It is a period of high risk for smoking initiation and progression. (Ashton and Kamali, 1995). (Mangus et al., 1998) while approximately 20-25 percent of the general US population smoked during the period (CDC, 2003). Medical college students indicate frustration in tobacco use. (Smith et al., 2005; Xiang et al., 1999; Zhu et al., 2004). In comparison with female, it was observed that more male medical students were current smokers (Xiang et al., 1999). Social influences are responsible tobacco use among college students in medical college (Mao et al., 2009) and medical students in other countries (Brenner and Scharrer, 1996). As a risk factor for smoking among college students, psychological factors, particularly depression, may play a major role in tobacco smoking. (Chaiton et al., 2009).

METHODOLOGY

The data were collected with the help of questionnaire. The selected data were analysed in a software called (SPSS). The researchers planned to use both qualitative and quantitative mixed methods. Mixed methodology was applied; to find out the main objectives of the students mind setting in smoking as bad habit; to find out the ratio of the students who wanted to smoke in medical colleges; to find the percentage who considered it a health wastage activity; to find out the bad aspects and negative approaches in smoking methods; to find out that smoking is dangerous to effect performance ; and to find out that smoking has bad effects on socioeconomics of the whole family in proper way. The researchers planned to visit medical colleges in Punjab and had discussions to find out smoking bad effects.

3.1 Sample

- 19 Teachers of medical colleges in Punjab
- 129 Medical Students (for close ended 10 questions, For male and female)

Table 3.1
Sampling

Area of discussions for data collection	Teachers	Students
Discussions about smoking effects on medical students	19	
Discussions about smoking effects on medical students		129

3.2. Population

Population for data collection is the students of medical studies in Punjab, and the teachers and faculty of the same institution.

FINDING AND RESULTS

DATA COLLECTION QUESTIONNAIRE Male 65 Female 64 Total=129

INSTITUTION:STUDENTS OF MEDICAL STUDIES IN PUNJAB FAISALABAD.

Sr No	Statement	Strongly Disagree	Disagree	Agree	Strongly Agree
1	Medical students should abide by smoking	3	30	32	64
2	After continuous smoking medical students health is on risk	1	10	22	96
3	.Per-Day use of cigarettes has different types of injuries to lungs	1	1	62	65
4	One should avoid to smoke in the presence of family members	5	6	21	97
5	One should try ever best to get rid of smoking	0	33	32	65
6	Smoking is harmful for health even if they are of highest quality	1	5	24	99
7	In smoking after effects , caught is the most dangerous for lungs	0	0	65	65
8	Oral cavity and blackening of teeth should be avoiding by refrain smoking	1	5	23	100
9	.One may be relax after smoking but medicine is required to meet its aftereffects	1	1	28	99
10	Smoking has social, economical, and financial effects on a persons and his family life	2	3	27	97
11	Medical students study demands good health and concentration with devotion,but smoking effects on their performance badly	0	1	32	96
12	Socioeconomic status of students is effected by continuous use of smoking	1	1	18	109
13	A smoker may try his level best to quit smoking	1	1	8	119

1-Medical students should abide by smoking.They have direct and close contact with the life saving so as cream of creations the life of medical profession related persons is very precious.

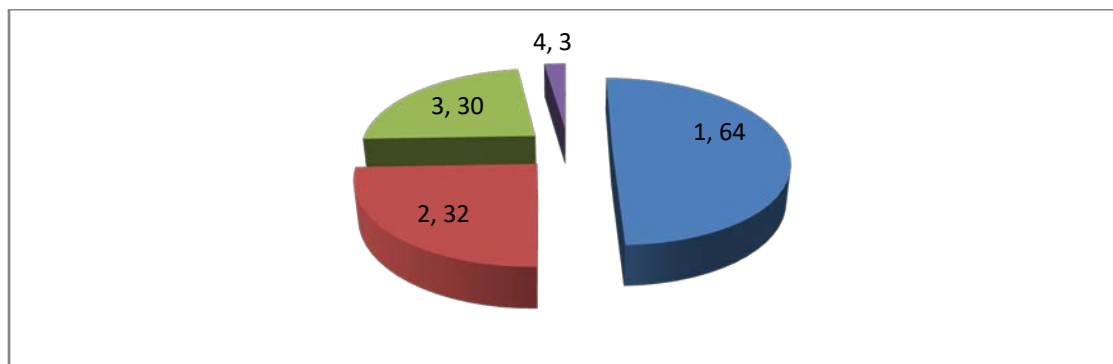


Fig 1 Medical students should abide by smoking

In above figure it is clear 64 students are of the opinion that Medical students should abide by smoking

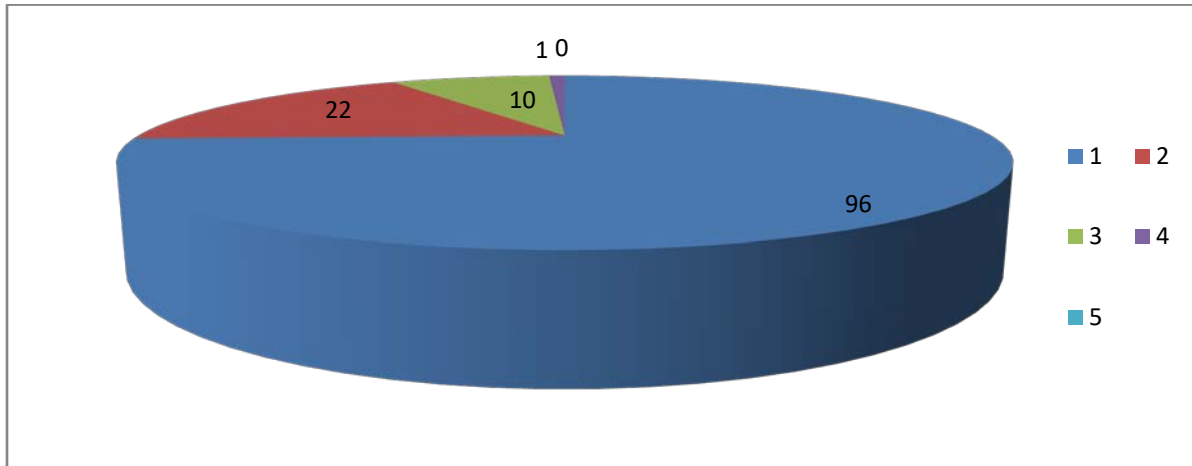


Fig 2 After continuous smoking medical students health is on risk

In above figure it is clear 96 students strongly agree that After continuous smoking medical students health is on risk

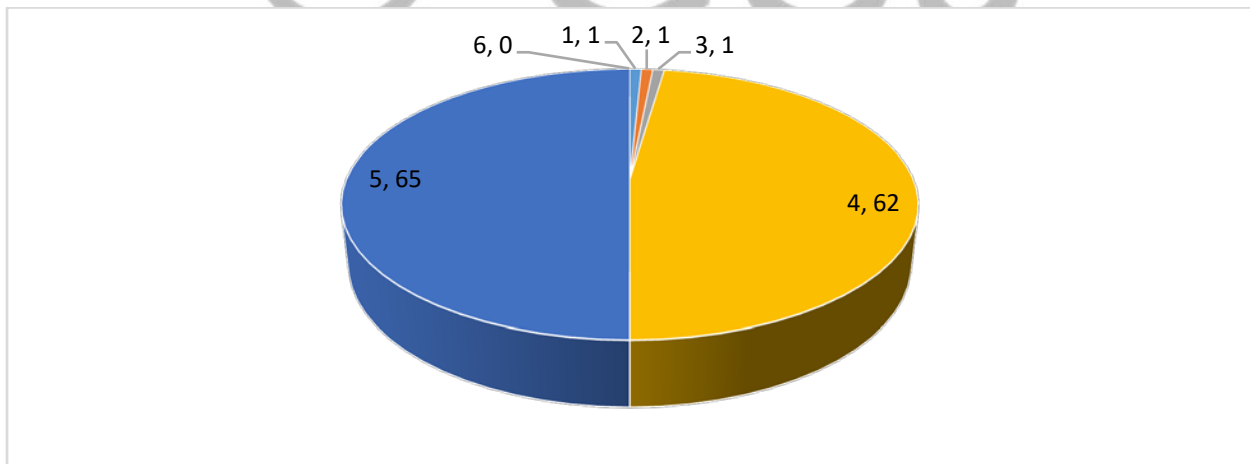


Fig 3 Per-Day use of cigarettes has different types of injuries to lungs

Above picture clearly shows that 65 % students are in strongly favour for Per-Day use of cigarettes has different types of injuries to lungs

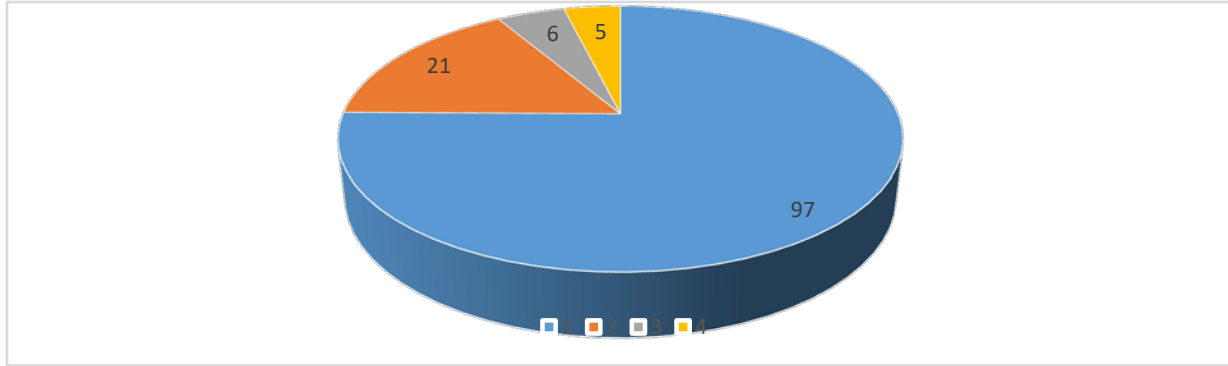


Fig 4 One should avoid to smoke in the presence of family members.

In above picture 97 % clearly indicates that One should avoid to smoke in the presence of family members

Fig 5 One should try ever best to get rid of smoking.

Below picture clearly indicates that One should try ever best to get rid of smoking. It is clear by 65 % strongly agreed

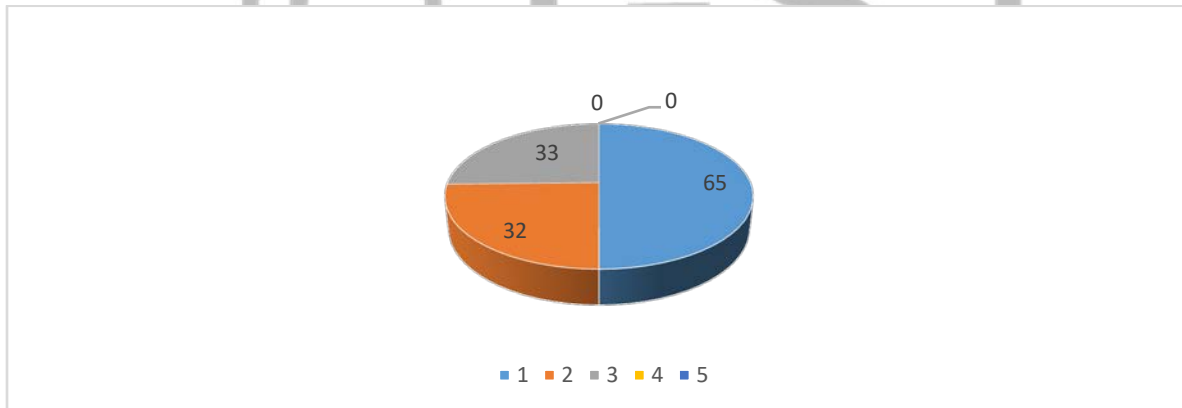


Fig 6 Smoking is harmful for health even if they are of highest quality.

Below picture shows that 99% students agree that Smoking is harmful for health even if they are of highest quality.

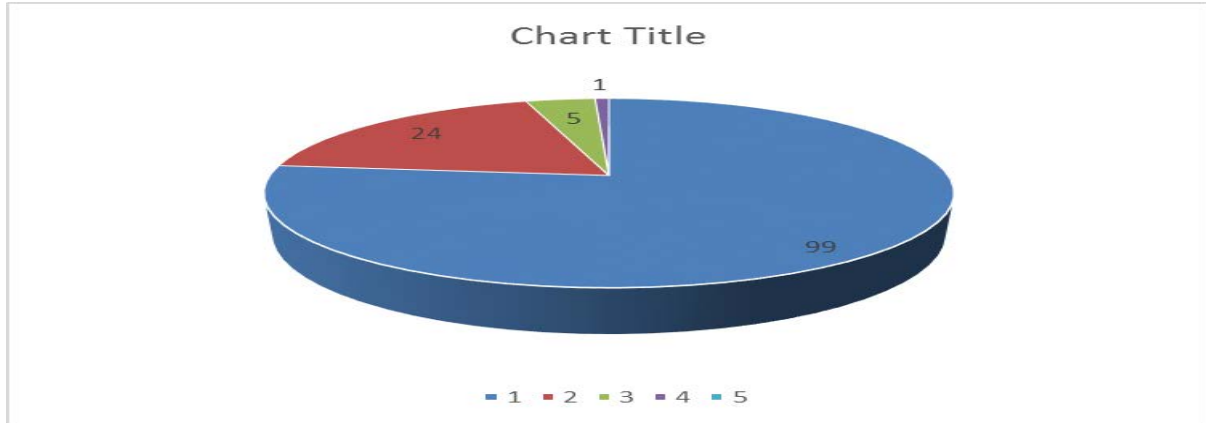


Fig 7 In smoking after effects , caught is the most dangerous for lungs.

Below mentioned picture clearly shows that 65 % strongly agree that in smoking after effects , caught is the most dangerous for lungs.

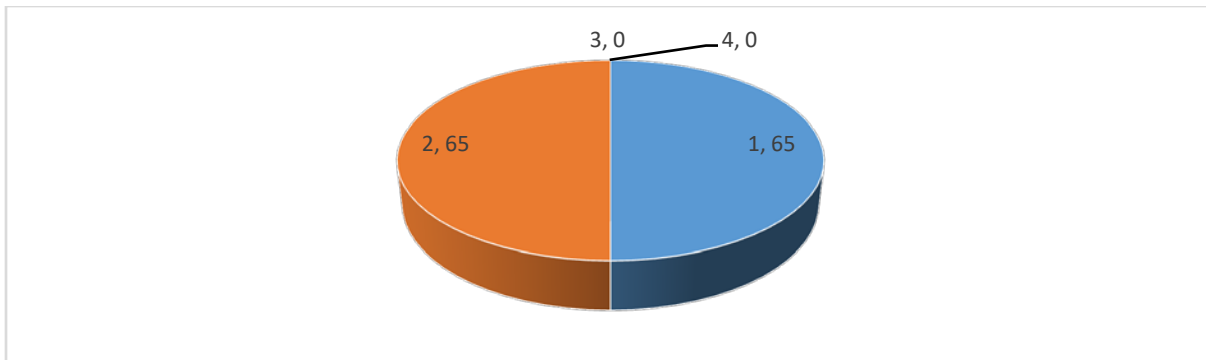


Fig 8 Oral cavity and blackening of teeth should be avoiding by refrain smoking

Below picture clearly finds out that 100 students clearly agree that Oral cavity and blackening of teeth should be avoiding by refrain smoking

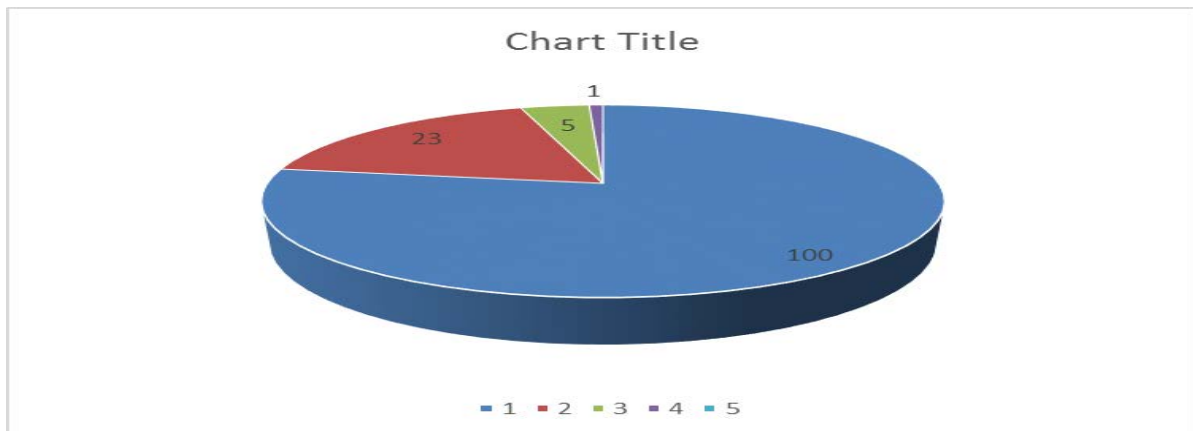


Fig 9 One may be relax after smoking but medicine is required to meet its aftereffects

Below picture clearly shows that 99 out of 129 students agree that One may be relax after smoking but medicine is required to meet its aftereffects

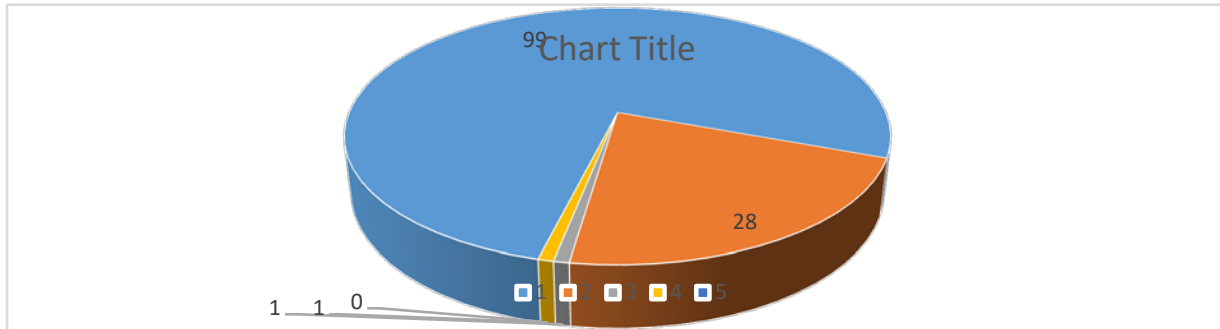


Fig 10 Smoking has social, economical, and financial effects on a persons and his family life.

Below picture clearly shows that 97 students out of 129 clearly agree that Smoking has social, economical, and financial effects on a persons and his family life.

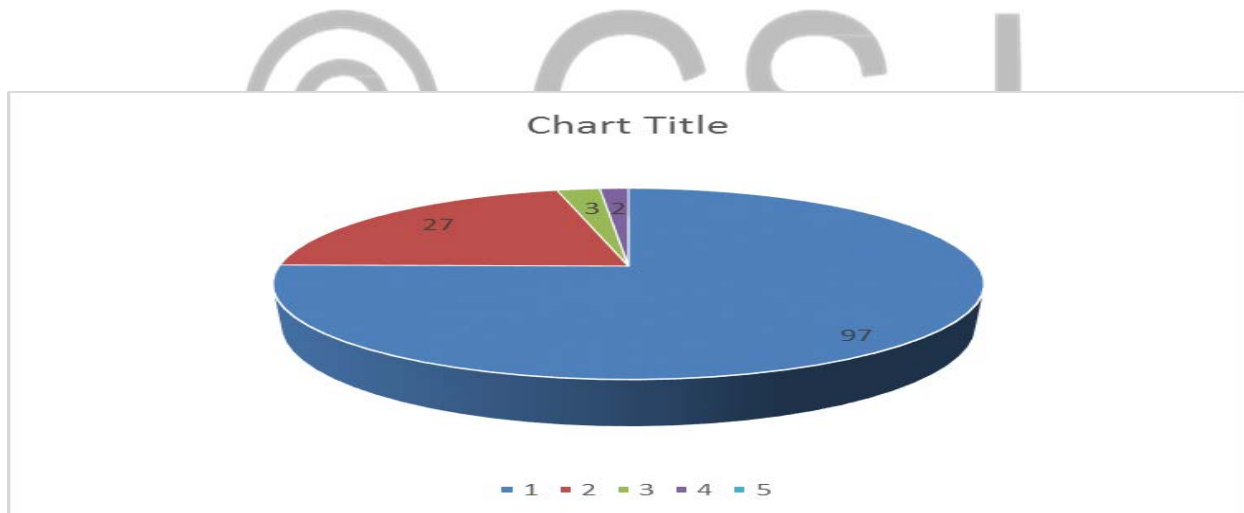


Fig 11 Medical students study demands good health and concentration with devotion, but smoking effects on their performance badly.

Below picture clearly shows that 96 students out of 129 clearly agree that Medical students study demands good health and concentration with devotion, but smoking effects on their performance badly.

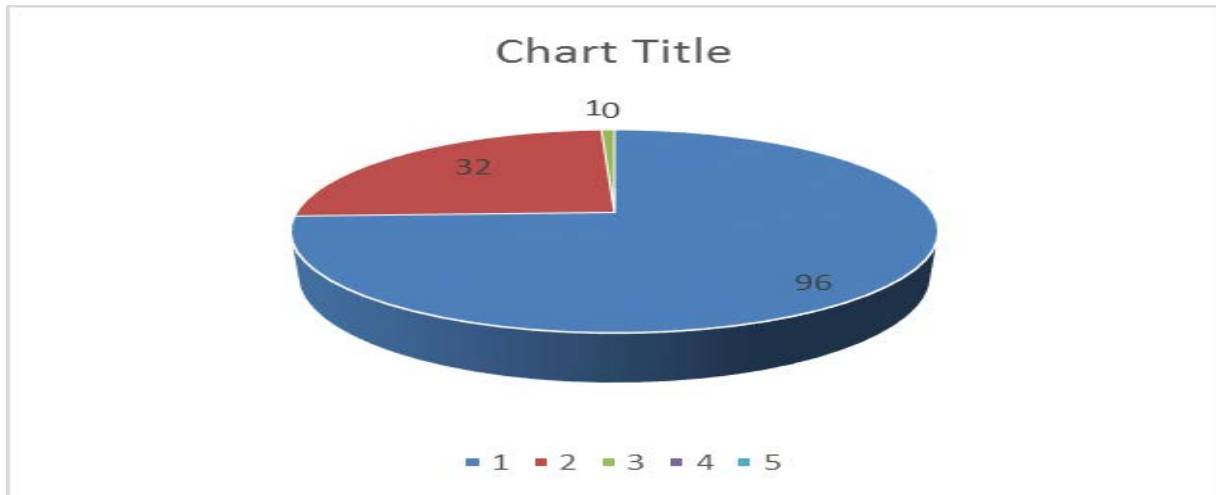


Fig 12 Socioeconomic status of students is effected by continuous use of smoking

Below picture clearly shows that 109 students out of 129 clearly agree that Socioeconomic status of students is effected by continuous use of smoking

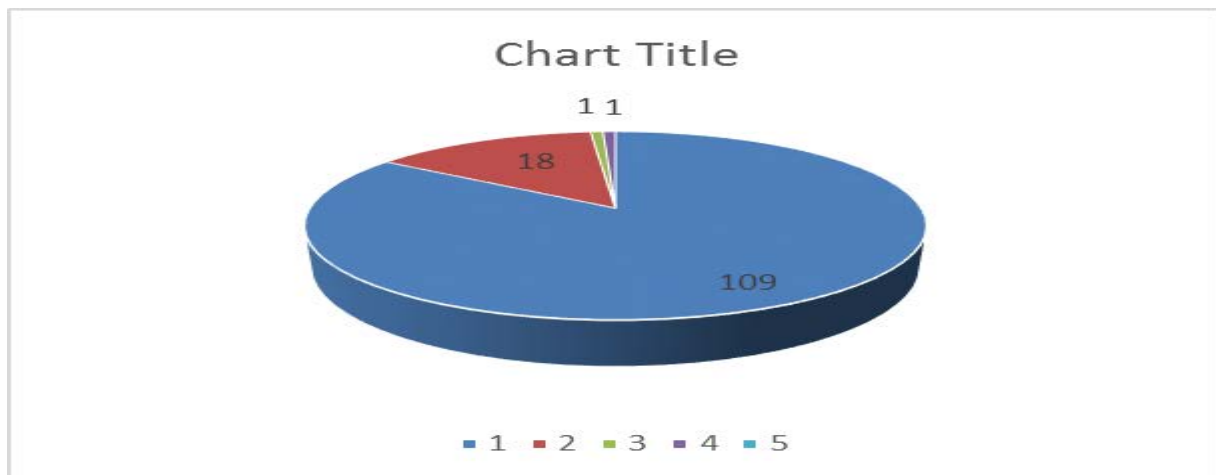
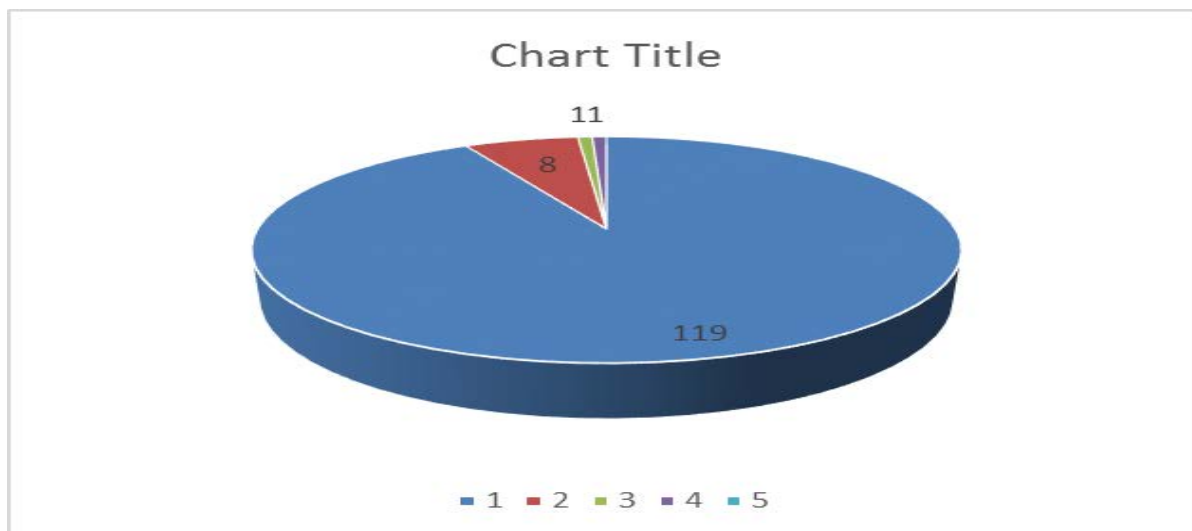


Fig 13 A smoker may try his level best to quit smoking.

Below picture clearly shows that 119 students out of 129 clearly agree that A smoker may try his level best to quit smoking.



B DATA COLLECTION QUESTIONNAIRE Teachers Male 13 /Female 6 Total = 19,

INSTITUTION: STUDENTS OF MEDICAL STUDIES IN PUNJAB FAISALABAD.

Sr No	Statement	Strongly Disagree	Disagree	Agree	Strongly Agree
1	Medical students should abide by smoking rules	0	1	3	15
2	After continuous smoking medical students health is on risk	0	0	3	16
3	.Per-Day use of cigarettes has different types of injuries to lungs	0	1	4	14
4	One should avoid to smoke in the presence of family members	0	1	1	17
5	One should try ever best to get rid of smoking	0	0	1	18
6	Smoking is harmful for health even if they are of highest quality	0	0	6	13
7	In smoking after effects , caught is the most dangerous for lungs	0	0	4	15
8	Oral cavity and blackening of teeth should be avoiding by refrain smoking	0	0	5	14
9	.One may be relax after smoking but medicine is required to meet its aftereffects	0	0	3	16
10	Smoking has social, economical, and financial effects on a persons and his family life	0	0	2	17
11	Medical students study demands good health and concentration with devotion, but smoking effects on their performance badly	0	0	1	18
12	Socioeconomic status of students is effected by continuous use of smoking	0	0	4	15
13	A smoker may try his level best to quit smoking	0	0	3	16

FIG 1 Medical students should abide by smoking rules Majority of teachers have supported in this favour.

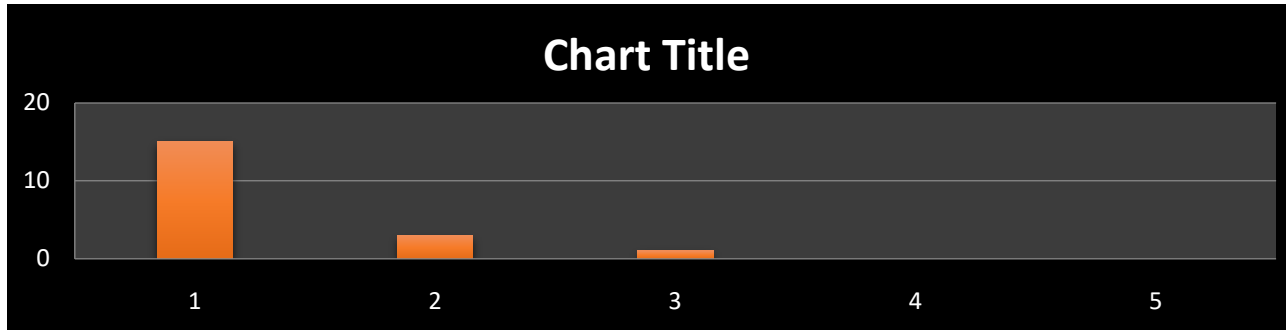


FIG 2 No doubt after continuous smoking medical students health is on risk. Majority of teachers have supported in this favour this statement.

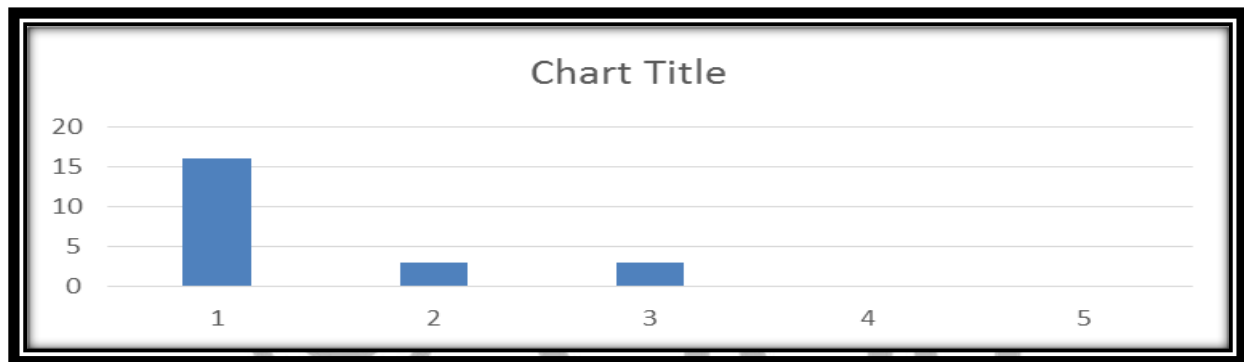


FIG 3 Per-Day use of cigarettes has different types of injuries to lungs

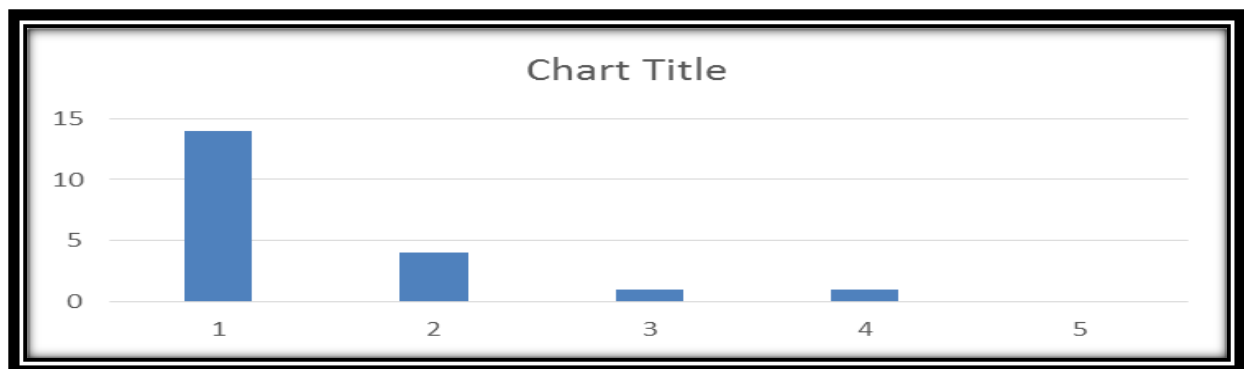


FIG 4 One should avoid to smoke in the presence of family members

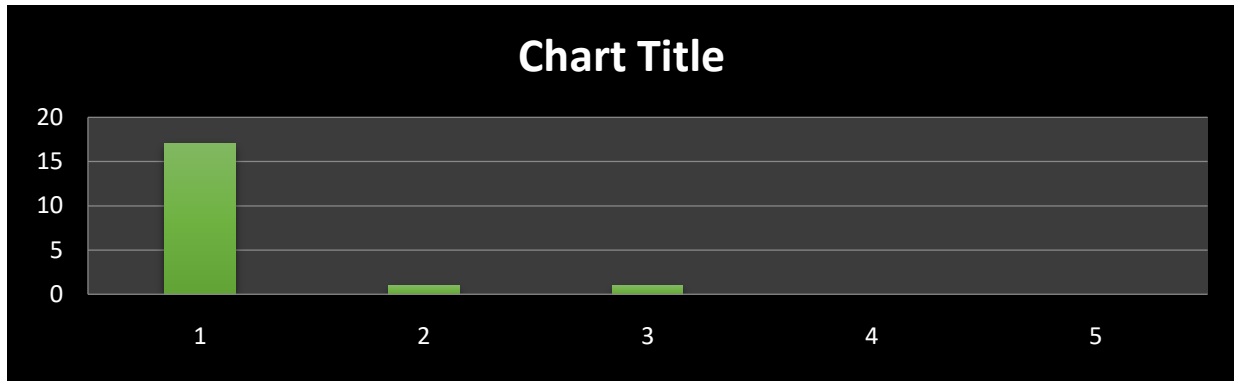


FIG 5 One should try ever best to get rid of smoking

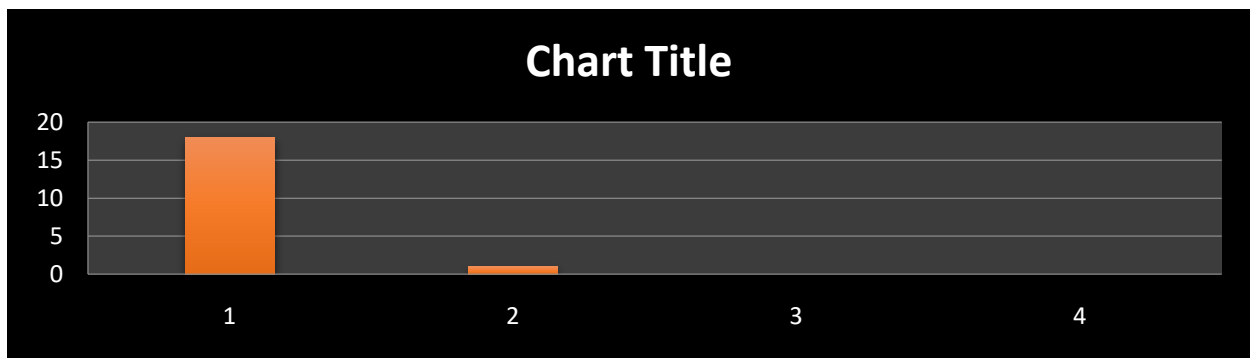


FIG 6 Smoking is harmful for health even if they are of highest quality

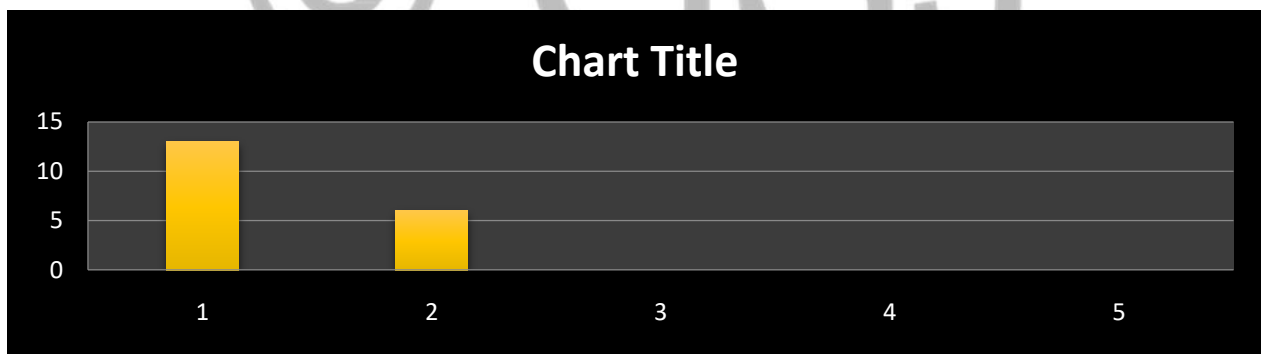


FIG 7 In smoking after effects ,caugh is the most dangerous for lungs

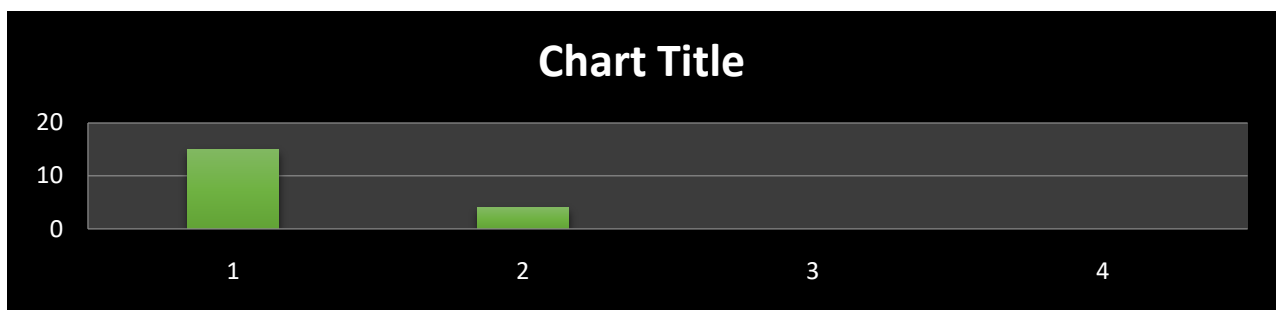
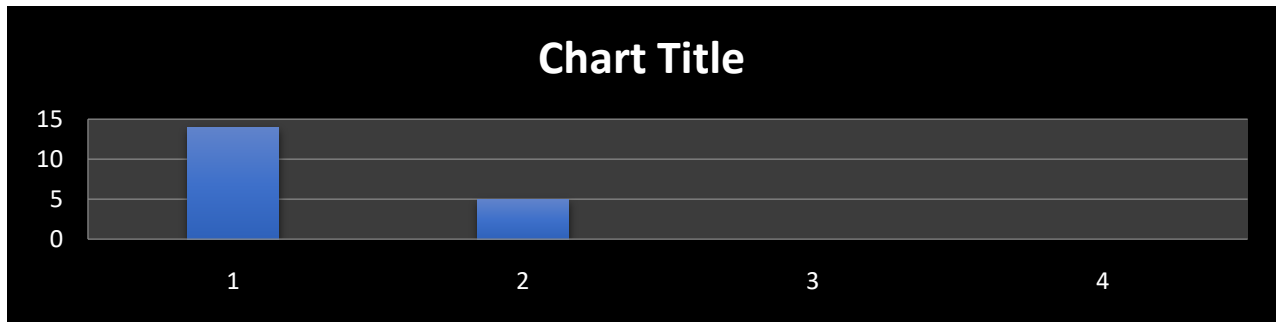


FIG 8 Oral cavity and blackening of teeth should be avoiding by refrain smoking



9 One may be relax after smoking but medicine is required to meet its aftereffects

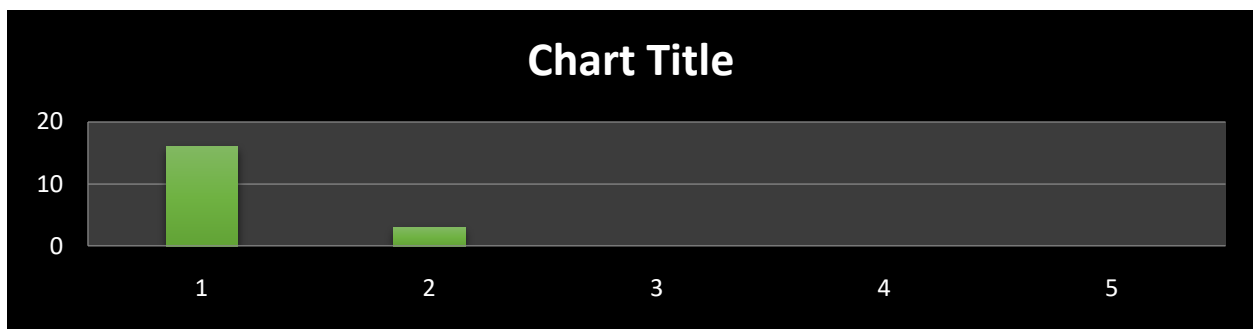


FIG 10 Smoking has social, economical, and financial effects on a persons and his family life

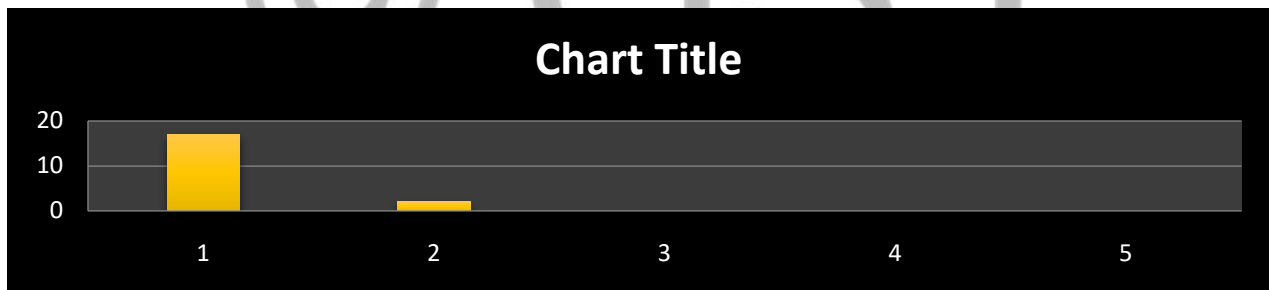


FIG 11 Medical students study demands good health and concentration with devotion, but smoking effects on their performance badly

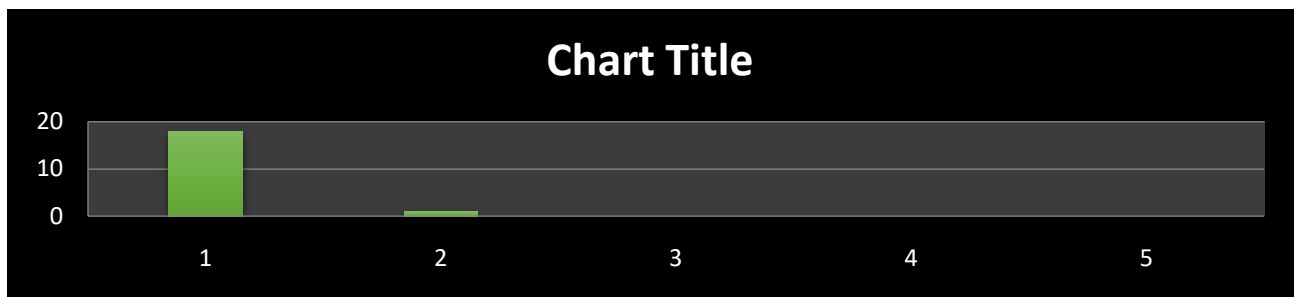


FIG 12 Socioeconomic status of students is effected by continuous use of smoking.

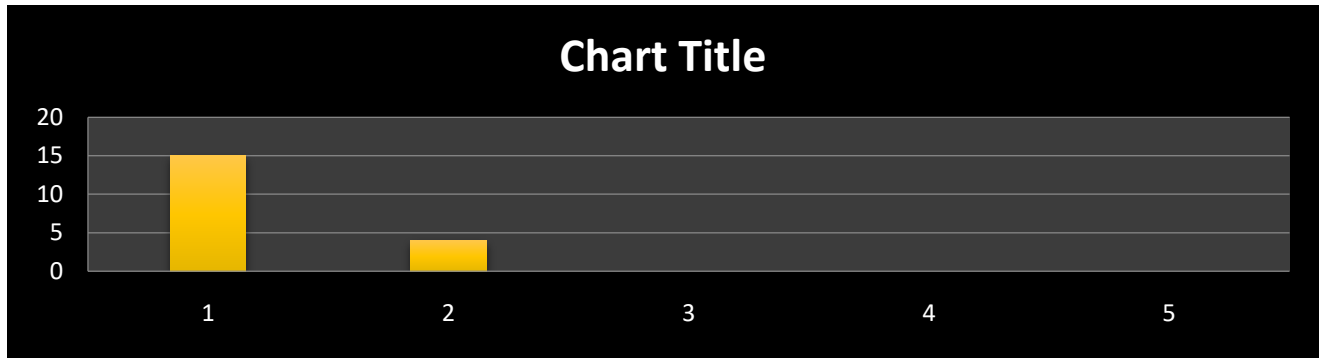
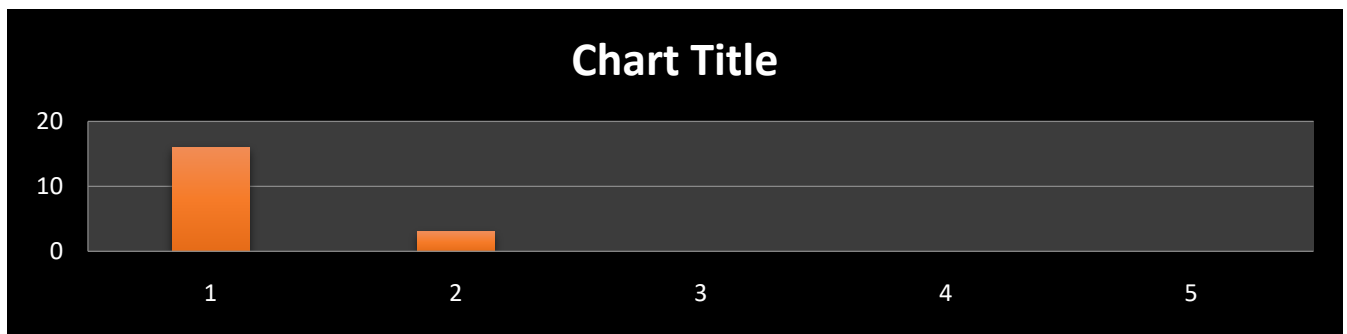


FIG 13 A smoker may try his level best to quit smoking.Ever person can change and improve life by his own efforts and struggle.



DISCUSSION

It is suggested Medical students may abide by smoking. How they may advise their patients that it is injurious to health. After continuous smoking medical students health is on risk so they are cream of creatures they should take special care of their health.Per-Day use of cigarettes has different types of injuries to lungs so by and by its use may be controlled and reduced.One should avoid to smoke in the presence of family members specially in the sweet company of female members. One should try ever best to get rid of smoking to save and care his own life.Smoking is harmful for health even if they are of highest quality.It is clear that the poison of high quality is a poison at the end.In smoking after effects, cough is the most dangerous for lungs. It spoils the charming personality of young doctors. Oral cavity and blackening of teeth should be avoiding by refrain smoking. No doubt in smiling face oral cavity plays its special role.One may be relax after smoking but medicine is

required to meet its aftereffects. Relaxation is artificial and temporary. Its not permanent, rather it leaves permanent bad effects on health. Smoking has social, economical, and financial effects on a persons and his family life. One may utilize this mony on healthy food its better. Medical students study demands good health and concentration with devotion, but smoking effects on their performance badly. Socioeconomic status of students is effected by continuous use of smoking. This money may be used to improve life status, higher education and fecilities of life to fet luxury rather by wasting money in smoking. A smoker may try his level best to quit smoking to spend a pleasant, happy and cheerful life.

CONCLUSION

Medical students should abide by smoking rules. After continuous smoking medical students health is on risk. Per-Day use of cigarettes has different types of injuries to lungs. One should avoid to smoke in the presence of family members One should try ever best to get rid of smoking. Smoking is harmful for health even if they are of highest quality. In smoking after effects, caught is the most dangerous for lungs .Oral cavity and blackening of teeth should be avoiding by refrain smoking. One may be relax after smoking but medicine is required to meet its aftereffects. Smoking has social, economical, and financial effects on a persons and his family life. Medical students study demands good health and concentration with devotion, but smoking effects on their performance badly. Socioeconomic status of students is effected by continuous use of smoking. A smoker may try his level best to quit smoking

RECOMMENDATIONS

It is recommended by the researchers that physical exercise may play a role in affecting the likelihood of tobacco smoking by its impact of depression. In addition to physical activities in general (such as running ,swimming, playing basketball, volleyball, table tennis, etc.).Saying

prayer is also complete and healthy exercise for body, mind ,enthusiasm and spirit.

REFERENCES

1. Zhang, Y. Z., Xiong, C. L., Lin, X. D., Zhou, D. J., Jiang, R. J., Xiao, Q. Y., ... & Ai, Q. S. (2009). Genetic diversity of Chinese rabies viruses: evidence for the presence of two distinct clades in China. *Infection, Genetics and Evolution*, 9(1), 87-96.
2. Desterro, J. M., Rodriguez, M. S., & Hay, R. T. (1998). SUMO-1 modification of I κ B α inhibits NF- κ B activation. *Molecular cell*, 2(2), 233-239.
3. Akvardar, Y., Demiral, Y., Ergor, G., & Ergor, A. (2004). Substance use among medical students and physicians in a medical school in Turkey. *Social psychiatry and psychiatric epidemiology*, 39(6), 502-506.
4. Mangus, R. S., Hawkins, C. E., & Miller, M. J. (1998). Tobacco and alcohol use among 1996 medical school graduates. *Jama*, 280(13), 1192-1195.
5. Chinn, R. Y., & Schulster, L. (2003). Guidelines for environmental infection control in health-care facilities; recommendations of CDC and Healthcare Infection Control Practices Advisory Committee (HICPAC).
6. Niu, C., Yan, H., Yu, T., Sun, H. P., Liu, J. X., Li, X. S., ... & Li, J. M. (1999). Studies on treatment of acute promyelocytic leukemia with arsenic trioxide: remission induction, follow-up, and molecular monitoring in 11 newly diagnosed and 47 relapsed acute promyelocytic leukemia patients. *Blood, The Journal of the American Society of Hematology*, 94(10), 3315-3324.
7. Adriaanse, H.P. and van Reek, J. (1989), "Physicians' smoking and its exemplary effects",
8. Ashton, C.H. and Kamali, F. (1995), "Personality, life-styles, alcohol and drug consumption in a sample of British medical students", *Medical Education*, Vol. 29 No. 3, pp. 187-92.
9. Brenner, H. and Scharrer, S. (1996), "Smoking habits of future physicians: a survey among
10. medical students of a south German university", *Social and Preventive Medicine*, Vol. 41
11. No. 3, pp. 150-7.
12. Buck, S.M., Hillman, C.H. and Castelli, D.M. (2008), "The relation of aerobic fitness to stoop task performance in preadolescent children", *Medicine and Science in Sports and Exercise*, Vol. 40 No. 1, pp. 166-72.
13. CDC (2003), "From the Centers for Disease Control and Prevention. Prevalence of current
14. cigarette smoking among adults and changes in prevalence of current and some day
15. smoking – United States, 1996-2001", *The Journal of the American Medical Association*,
16. Vol. 289 No. 18, pp. 2355-6.
17. Chaiton, M.O., Cohen, J.E., O'Loughlin, J. and Rehm, J. (2009), "A systematic review of

18. longitudinal studies on the association between depression and smoking in adolescents”,
19. BMC Public Health, Vol. 9, pp. 356-64.
20. Davis, R.M. (1988), “Uniting physicians against smoking: the need for coordinated national strategy”, The Journal of the American Medical Association, Vol. 259 No. 19, pp. 2900-1.
21. Eysenck, H. J. (2000). Smoking, health and personality. Transaction Publishers.
22. Fowler, G. (1993), “Educating doctors in smoking cessation”, Tobacco Control, Vol. 2 No. 1, pp. 5-6.
23. Hussain, S.F., Tjeder-Burton, S., Campbell, I.A. and Davies, P.D. (1993), “Attitudes to smoking and smoking habits among hospital staff”, Thorax, Vol. 48 No. 2, pp. 174-5.
24. Jiang, Y., Ong, M.K., Tong, E.K., Yang, Y., Nan, Y., Gan, Q. and Hu, T.W. (2007), “Chinese physicians and their smoking knowledge, attitudes, and practices”, American Journal of Preventive Medicine, Vol. 33 No. 1, pp. 15-22.
25. Li, H.Z., Fish, D. and Zhou, X.C. (1999), “Increase in cigarette smoking and decline of
26. anti-smoking counselling among Chinese physicians: 1987-1996”, Health Promotion
27. International, Vol. 14 No. 2, pp. 123-31.
28. Mangus, R.S., Hawkins, C.E. and Miller, M.J. (1998), “Tobacco and alcohol use among 1996 medical school graduates”, Jama-Journal of the American Medical Association, Vol. 280 No. 13, pp. 1192-3.
29. Mao, R., Li, X., Stanton, B., Wang, J., Hong, Y., Zhang, H. and Chen, X. (2009), “Psychosocial
30. correlates of cigarette smoking among college students in China”, Health Education
31. Research, Vol. 24 No. 1, pp. 105-18.
32. Nelson, D.E., Giovino, G.A., Emont, S.L., Brackbill, R., Cameron, L.L., Peddicord, J. and Mowery,
33. Ponniah, S. and Bloomfield, A. (2008), “An update on tobacco smoking among New Zealand health care workers, the current picture, 2006”, Journal of the New Zealand Medical Association, Vol. 121 No. 1272, pp. 103-5.
34. Smith, D.R., Wei, N. and Wang, R.S. (2005), “Tobacco smoking habits among Chinese medical students and their need for health promotion initiatives”, Health promotion journal of Australia, Vol. 16 No. 3, pp. 233-5.
- 35.
36. Yu, J.M., Hu, D.Y., Jiang, Q.W., Zhang, L.J., Dong, Y. and Li, S.C. (2009), “Smoking status in
37. Chinese cardiovascular physicians in 2008”, Zhonghua Yi XueZaZhi (Chinese Journal of
38. Medicine), Vol. 89 No. 34, pp. 2400-3.