ABSTRACTS

TOBACCO USE AND YOUNG PEOPLE

At a time when the tobacco industry is under further attack for intentionally misleading smokers about the relative risks of smoking 'light' versions of cigarettes, this study published in the *Lancet* is timely. A team from the Global Tobacco Surveillance System collaborative group set out to assess the effect of tobacco use by young people on global mortality.

It is by now well known that tobacco use increases the risk of developing several cancers and diseases of the cardiovascular and respiratory systems. This makes tobacco use one of the main preventable causes of chronic disease and death in developed countries, and it is indeed the second leading cause of death worldwide. The global burden of disease estimates that there will be a doubling in the number of deaths from tobacco use every year, from 5 million in 2005 to 10 million in 2020. However, as the authors of this paper point out, cumulative exposure to tobacco smoke is a missing determinant when calculating the future burden of chronic disease.

The Global Youth Tobacco Survey (GYTS) is a joint project of the World Health Organization (WHO) and the US Centers for Disease Control and Prevention (CDC), the Canadian Public Health Association (CPHA) and most WHO member states. The aim of the survey is to obtain standardised behavioural data from same-aged young people on the prevalence of cigarette and other tobacco use; perceptions and attitudes to tobacco; access and availability of tobacco products; and exposure to second-hand smoke, school curricula, media and advertising and smoking cessation interventions. The GYTS is a school-based survey of students aged 13 - 15 years and covers 131 countries and 395 sites and the Gaza Strip and the West Bank. The team questioned students about current tobacco use, susceptibility to smoking among non-smokers and exposure to second-hand smoke at home and in public places.

Surprisingly, the team found that the difference in smoking between boys and girls is less than expected in many parts of the world. They also found that non-cigarette tobacco products are used as much as cigarettes in many parts of the world. Almost 1 in 5 never-smokers reported that they were likely to take up smoking within the next year and student exposure to second-hand smoke was high, both at home and in public places, although never-smokers were significantly less likely than current smokers to be exposed to second-hand smoke at home and in public places.

The team's findings are 'troubling' for the future of chronic disease and tobacco-related mortality and they report that reduction of tobacco consumption will require a redoubling of efforts to prevent the initiation of smoking and to promote smoking cessation among a large proportion of young people who currently use tobacco. The high exposure to second-hand tobacco smoke highlights the need for strong smoke-free policies.

Warren CW, *et al. Lancet* 2006; **367:** 749-753.

OPPORTUNISTIC SCREENING FOR ALCOHOL ABUSE

A recent paper in the *British Medical Journal* looks at ways in which family doctors can screen their patients for alcohol abuse. The prevention of alcohol-related mortality and morbidity is a key priority in the UK government's health strategy. With the levels of alcohol abuse that exist here in South Africa a similar strategy might be a good idea. The authors of this paper point out that about 20% of all patients presenting to GPs in Britain abuse alcohol, but 98% of these people are not identified in general practice. There is good evidence that brief interventions for excessive alcohol use, aimed at reducing consumption and subsequent alcohol-related harm and dependence, are clinically effective and cost effective. Several studies have questioned the value of measuring traditional biochemical markers of alcohol abuse, such as gamma-glutamyltransferase, aspartate aminotransferase, erythrocyte mean cell volume and per cent carbohydrate-deficient transferrin. The authors used the alcohol use disorders identification test (AUDIT) as well as these biochemical measures in this study.

They found a significant correlation between alcohol consumption and the score on the alcohol use disorders identification test and measures of gamma-glutamyltransferase and per cent carbohydrate-deficient transferrin, but not aspartate aminotransferase or erythrocyte mean cell volume. AUDIT was much better at picking up weekly binge consumption, monthly binge consumption and alcohol dependence than the biochemical markers. The questionnaire was also more cost efficient, with a lower cost per true positive for all consumption outcomes, making AUDIT an efficient and cost-effective tool for routine screening for alcohol use disorders in primary care.

Coulton S, *et al. BMJ* 2006; **332:** 511-517.

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