

FACT SHEET: TOBACCO AND ADOLESCENT HEALTH

- Adolescence is a time of major social change: smoking occurs in a social context where identity is being established.
- Teens are attracted to behaviors and images associated with risk, excitement, and intensity. Smoking is an attractive and risky behaviour.
- Smokeless tobacco use and incidence of oral cancer are increasing among the younger population.
- Smoking rates are linked to socioeconomic class, further differentiated by gender.
- 250 million children and adolescents will die prematurely from tobacco use, the majority of these from low and middle income countries.
- Of all addictive behaviors, cigarette smoking is the one most likely to become established during adolescence.
- Social smoking among peers is particularly common among teens. There is no safe level of smoking as even people who smoke at low levels (< 5 cigarettes a day) have an increased risk of adverse health effects.
- The neural connections needed to create a new addiction may develop more easily in a young, growing teen as compared with an adult brain.
- The processes of nicotine addiction ensures that many of today's adolescent smokers will regularly use tobacco when they are adults.
- 5,500 youth start using tobacco every day in India. The most popular product among youth is gutkha, followed by cigarette and beedie.
- Cigarette smoking is associated with mild airway obstruction and slowed growth of lung function in adolescents. Adolescent girls may be more vulnerable than boys to the effects of smoking on the growth of lung function.
- Neurotoxic effects of nicotine are more severe when exposure to nicotine occurs at earlier periods in development.
- Nicotine may interfere with normal bone growth by suppressing bone formation and increasing bone resorption. Smoking by healthy young males is associated with decreased bone mass.
- Smoking is a risk factor associated with development of low back pain among adolescents.