The WHO has identified non-communicable diseases in developing countries as a major public health and socio-economic problem. They are considered the major challenge to development in the 21st century. Four diseases and four modifiable shared risk factors are listed by the WHO for countries to work on if health is to be maintained and development to be sustained.

The four major diseases are cardiovascular, diabetes, cancer and chronic respiratory diseases. The four major shared risk factors are tobacco use, unhealthy diets, physical inactivity and harmful use of alcohol.

The WHO estimates the yearly death rates in the world to be 59 million individuals. Of those 35 million die of non-communicable diseases mostly from the 4 diseases mentioned above. Currently there are estimated 1300 million smokers in the world. By the year 2025, the estimated number will be 1640 million smokers in the world. Most of the smokers will be in the developing countries Jordan being one of them.

It is estimated that 51% of adult male Jordanians are smokers. That puts Jordan as number 4 in the Arab world. Smoking prevalence in females is estimated at 11% which makes Jordan as number 3 in the Arab world. Cigarettes' consumption in Jordan per person per year is estimated to be 1832 cigarettes. That puts Jordan as the country number 32 in the world. The total spending per person per year on cigarettes is estimated to be 139 JD which ranks Jordan as the country number 62 in the world. In my opinion, these statistics are slightly underestimated and the real figures are probably higher.

Recent trends in the use of Nargileh is alarming. Some studies have shown that 50-60% of university students have never used it. Among those, around 29% will be chronic users. The studies have shown that a session of Nargileh smoking usually lasts for 30-60 minutes. The smoke inhaled is around 500 ml per each puff. This brings the total volume of inhaled smoke to 50000 ml per session since usually there are 100 puffs per session. This figure dwarfs the inhalation per one cigarette which is usually around 500-600ml. As for the tar, each session generates 802 mg compared to 22 mg per each cigarette. Nargileh tobacco compared to cigarettes contains 120 times more lead, 60 times more nickel, 40 times more chromium and 2 times more arsenic.

Being as they are, these statistical figures are alarming not only for the long term impacts on the health of Jordanians but also on the quality of life, development and the financial status of Jordanian individuals. It is well known that smokers tend to sacrifice the food budget in order to buy tobacco which adds more to the deterioration of nutritional status of individuals. The health bill on diseases related to smoking is estimated to be 45% of the total bill on health.
The current public efforts to combat smoking are modest and tend to be shy. We need more aggressive public campaign to limit the number of new smokers and to encourage older smokers to quit smoking. These efforts are already based on a good public health law which needs to be rigorously applied. The prices of tobacco in all its forms need to be increased. All public figures are invited to be active proponents for the anti-smoking campaign. In this regard, it is welcoming to note that their majesties are non-smokers. They should be the role model for our people especially the young. On the other hand, it is extremely shocking to see that many of our parliamentarians are avid smokers in public contradicting the very law they are supposed to apply and defend.

The smoking epidemic is so huge that every effort is needed to launch an effective campaign to protect our people and maintain a good quality health life.