

Introduction

Cancer Registries are an integral part of the cancer control activities at different levels of health care. It is well known that tobacco-use is a major factor for occurrence of cancer. Tobacco related cancers account for major share of all cancers. In India, tobacco consumption is responsible for half of all the cancers in men and a quarter of all cancers in women. India also has one of the highest rates of oral cancer in the world, partly attributed to high prevalence of tobacco chewing. Tobacco accounts for about 30 percent of all cancers in men and women in India. Mouth cancer is most common among men followed by lung cancer. Tobacco causes 1 death every 6 seconds yet India is the second leading consumer.

Objectives

The results of an earlier study conducted in the partial block of the Uttara Kannada district showed a 40% prevalence of tobacco use which is higher than the National average. This has inspired a house to house tobacco survey be conducted in four Tehsils of Uttara Kannada district, Karnataka State in India. An interim report on findings of a tobacco survey being conducted in Southern India. A proforma to collect minimal information as demography, life-style, tobacco-use, past self and family history of cancer and oral screening. Analysis is done by using SPSS statistical software.

Results

In a target population of 4,00,000 consisting of 1,00,000 households will be surveyed. This is an **Ongoing Project** and till date, 19,000 households consisting of 83,458 individuals are enumerated of which 69,501 are considered as 'Eligible'; of these, 44,839 participated of which 212 prevalent cancers were reported. Of these, 8053 chewers and 1805 smokers were recorded. 65 head & neck, 41 breast, 22 cervical and 84 cancers were recorded.

Material and Methods

A team comprising of a Medical Officer, Nurses, Social Workers is conducting the Tobacco Survey locally will be covering 409 wards of 71 villages. The process of data collection was carried out by a Project team who made house to house survey. A formal permission was obtained from the Deputy Commissioner and the DHO Office, Karwar. The help of the local Panchayat was sought for carrying out the survey smoothly. A questionnaire developed by the Tata Memorial Hospital, was utilized for recording of information in the survey. The questionnaire was field-tested and finalized for data collection. All the completed questionnaires are stored and maintained in the Department of Medical Records, Biostatistics and Epidemiology, Tata Memorial Hospital, Mumbai. These questionnaires are checked for completeness and errors at the department. Special Software was developed for data entry using Microsoft Access 2007 for each of these questionnaires. Various validation checks were done to ensure correctness of data. Statistical Software package SPSS version 21.0 is used for the analysis of the data.

Eligibility Criteria:

- Age above 14 years
- If tobacco user, any age



HIGHEST PREVALENCE OF CURRENT TOBACCO USER GATS 2016-14 IN INDIAN STATES (TOP 5)

STATE	%
Tripura , North-East India	64.5
Mizoram , North-East India	58.7
Manipur , North-East India	55.1
Assam , North-East India	48.2
Meghalaya , North-East India	47.0
Karnataka , South India	22.8

INDIAN SCENARIO

TOBACCO USE	MEN	WOMEN	URBAN	RURAL	GATS2	GATS1
Current tobacco smokers	19.0	2.0	8.3	11.9	10.7	14.0
Current smokeless tobacco users	29.6	12.8	15.2	24.6	21.4	25.9
Current tobacco users (using any form of tobacco)	42.4	14.2	21.2	32.5	28.6	34.6

PRESENT STUDY ON TOBACCO SURVEY – INTERIM FINDINGS

ENUMERATION	83,458	
Not Eligible	13957	16.7%
Relocated	1123	1.3%
Eligible	69501	83.3%
PARTICIPATED	44,839	64.5%
Male	18311	40.8%
Female	26528	59.2%

CO-MORBIDITY	NUMBER	%
Prevalent Cancers	212	0.5
Head & Neck Cancer	65	0.1
Breast Cancers	41	0.1
Cervix Cancers	22	0.0
Cardiac Disease	670	1.5
Hypertension	5276	11.8
Diabetes Mellitus	1902	4.2
Congenital Disorders	182	0.4
Mental Retardation	209	0.5
Epilepsy	69	0.2
Parkinson's Disease	9	0.0
Hemiplegia	200	0.4
Tuberculosis	80	0.2
Polio	73	0.2
Filaria	4	0.0
HIV Infected	15	0.0

TOBACCO USE	MALE	FEMALE	TOTAL	%
Tobacco Chewers	4741 (25.9%)	3312 (12.5%)	8053	18.0
Tobacco Smokers	1744 (9.5%)	61 (0.2%)	1805	4.0
Tobacco Chewer + Smoker	587 (3.2%)	8 (0.0%)	595	1.3

Conclusion

The tobacco survey will provide opportunities for prevention by education at the grass root level. The outcome will help in undertaking and implementation of a larger workable district cancer control programme in these areas with effective intervention in terms of education. This data can be useful for planning any interventional programmes/health awareness programmes that can be taken up by the Health Authorities. In the project, we propose to conduct cancer awareness programmes and educate people regarding the tobacco hazards. It is also proposed that the population will be revisited after 5 years to see the effect of educational/awareness programmes with minimal intervention.