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Combating Tobacco Use - An Ayurvedic Approach to Prevent First, Second and Third Hand Smokers

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Abstract: This article delves into the societal impact of smoking, including second and third-hand smoke. It critically examines the chemical composition of tobacco and the resulting health hazards. Ayurvedic interventions, emphasizing holistic treatment and prevention strategies, are proposed to mitigate these health risks, highlighting the need for robust public health policies and individual lifestyle changes.

Keywords: Tobacco Health Risks, Second-hand Smoke, Ayurvedic Treatment, Public Health Policy, Lifestyle Changes

1. Introduction

Ayurveda is one of the oldest, systematic, holistic and scientific way of treating diseases both mental and physical. Ayurveda's foremost concept of 'swasthasyaswaasthyarakshnam' gives emphasis on over all well being of one and all. Everyone, be it a smoker or non-smoker pretty well knows that smoking in any form be it beedi, cigarette, hukka, cigar etc. with tobacco as its main ingredient is injurious to health of the taker. But the fact that its smoke not only harms the smoker but has a vast impact and negative contribution to the society by producing second and third hand smokers who have to suffer without themselves being a smoker is alarming.

Keywords: smoking, tobacco, first hand smoker, second hand smoker, third hand smoker

2. History of Tobacco

- Before world war I It was smoked as cigars, wealthy
 people used to take it. later on companies tried the left
 overs of cigar for processing cigarettes.
- The first customers of cigarette were the soldiers of world war I
- In 5000 3000 B. C tobacco was not only smoked but also chewed, drunk, sniffed, even enema were given.
- It was considered as a means of communicating with supernatural powers.
- Tobacco was introduced in India by the Portuguese nearly 400 years ago

What is Tobacco?

Tobacco producing plants are derived from Nicotiana of the night shade family, Solanacea. The two species that have the widest dissemination as intoxicants are Nicotiana rustica and N. tabacum. Tobacco is the plant grown for its leaves, which are smoked, chewed, sniffed for a variety of effects. Its considerd as an addictive substance because it has nicotine in it. In addition to nicotine, tobacco has19 cancer causing chemicals and more than 4, 000 other chemicals e. g. acetone, ammonia, carbonmonoxide, cyanide, methane, propane, butane etc. Various researches confirmed the presence of about 600 ingredients in cigarettes which produced about 69 carcinogenic compounds after burning. Nicotine is colourless volatile bitter tasting hygroscopic

liquid alkaloid. It is used extensively in agricultural and horticultural work for fumigating and spraying as insecticides, worm powders.

How does nicotine work?

Nicotine present in smoke causes physical and psychological dependency, being highly addictive it gets absorbed through the mouth tissues directly into the blood and reaches to the brain. Even after the tobacco is removed from the mouth, nicotine continues to be absorbed into the bloodstream. Being the main culprit of addiction of cigarettes/beedis it alters the balance of chemicals - dopamine and noradrenaline in a smoker's body. When the levels of these chemicals changes, there is impact on person's mood and concentration level and smokers find this enjoyable. This chemical variation happensso quickly, that the moment smoker inhales the nicotine, it immediately has the effect and this is why smokers enjoy the nicotine rush and become dependent on it. Other important actions of nicotine are:

- It acts both as stimulant and depressant.
- It increases bowel activity, saliva and bronchial secretions.
- Lot of sweating, repeated diaarhoeal condition altering with constipation.
- Its an appetite suppressant.
- Its highly addictive comparable to alcohol, cocaine, morphine.
- Enhances platelet coagulation.
- Elevates glucose level.
- It stimulates nervous system and may cause tremors or even convulsions with high doses.
- Nicotine though relaxes in stressful conditions but depresses muscles of airways.

60 to 100 mg of Nicotine - FATAL DOSE - rivals cyanide as a poison

FATAL PERIOD - 5 to 15 minutes.

Common Reasons of Smoking;

- Low self esteem
- Peer pressure
- Inadequate coping skills
- Curiosity
- Familial patterns
- Emotionally weak persons

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- Overdependance on other
- Low toleration
- Frustration

Indias contribution to the world of tobacco

- More than 12 crore smokers in the world
- Around 12 lakh die every year
- 85% of beediz manufacturer is India
- Exporter to more than 122 countries
- 70% of tobacco smoked is in form of beedi
- 50% of beedi workers die of asthma/T. B.
- 75% of total beedi makers are women
- Main tendu leave suppliers are Maharashtra and Gujarat

Facts of Ban in India

- 1) Prohibition of sale of tobacco upto 100 yards of any educational institute [1st Dec.2004].
- Rule to ban smoking in public places implemented on 2nd oct.2008.
- 3) Rule mandating pictorial warning on tobacco products were first notified on may 31st 2009.
- 4) Twoanti tobacco advertisements titled 'sponge', and 'mukesh' in theaters and T. V from 2Oct.2012.
- 5) Mandatory for theaters to display a disclaimer on screen whenever smoking scenes are depicted. Tobacco is injurious to health/say no to tobacco

Why quit smoking is need of thehour?

Smoking impact on health surpasses - drug use, AIDS, homicides, suicides, accidents, fire etc. so much so that 30% of cervical cancers have been attributed to both active and passive smoking. The risk of dementia is more than twice. With increasing inclination of youth for tobacco addiction their work efficiency and concentration is deteriorating day by day.

Harmful Chemicals of Tobacco

According to American Lung Association (ALA., 2015), cigarettes contain about 600 ingredients. When they burn, they generate more than 7, 000 chemicals and 69 of them can cause cancer. Many researches confirmed that "Tar" present in the cigarettes increases the risk of diseases. This tar contains many carcinogenic pyrolytic products that bind to DNA and cause many genetic mutations (Shen, 2014). the prevalence of diseases as a result of smoking includes

[1] Psoriasis [2]Cataract [3]Wrinkling{early aging} [4]Hearing loss [5]Cancer [6]Tooth decay [7]Emphysema [8]Osteoporosis [9]Strokes [10]Blindness [11]Impotence [12]Various Lung diseases [13] Infertility [14]Peptic ulcers

Smokers smoke leaving residues of their smoke on surfaces, clothes, hair etc. this is a straightaway mode of exposure to nonsmokers{passive smokers/second and third hand smokers]kids, youngsters, adults. when they inhale unknowingly the residues, the risk of suffering from respiratory disorders gets alarmingly increased. They suffer lung cancer risk by about 20 percent. Passive smoke is estimated to cause approximately 53, 800 deaths annually in the United States.

Smoker smokes somewhere else but carries the residues of its smoke on its clothes, hair, shoes, mobiles,

watch/ornaments etc. This phenomenon, known as "thirdhand smoke, " is increasingly recognized as a potential danger, especially to children, who not only inhale fumes released by these residues but also ingest residues that get on their hands after crawling on floors or touching walls and furniture. Thirdhand smoke exposure has several behavioral and physical health impacts, including hyperactivity and adverse effects on the GI, liver and lungs.

Withdrawal Symptoms of nicotine includes:

- Intense urge to smoke.
- Anxiety
- Impaired concentration
- Memory loss
- Depression
- Headache
- Muscle cramps
- Sleep disturbance
- Increased appetite
- Weight gain
- Diaphoresis
- · Rapid respiration

Ayurved A Ray of Hope

The prevalence and detrimental effects of tobacco use on health are undeniable. Ayurvedic complementary approach to handle the tobacco crisis is crucial. Its imperative to integrate such comprehensive methods into public health initiatives to address the extensive health hazards associated with tobacco use, thereby contributing significantly to the field of health science. If we minutely introspect the factors that hindersone in quitting, the most overpowering are the impact on brain and its working. Ayurved has widely accepted and highlighted the impact of mannin causing disease and affecting physical ailments. Ayurvedic herbs act as boom in maintaining the levels of dopamine and nor adrenaline and returning to the normal stateby providing medhyarasayan and herbs combined together with meditation and yoga promising magical effects in combatting the symptoms along with many other combinations to handle other associated symptoms and complications. The holistic science of ayurveda not only supports quitter in quitting, It also provides rejuvenation of the body by removal of toxins of nicotine from the body. for those with chronic dependency on tobacco may shall be provided ayurvedic dhoompan in addition to other medications. Ayurveda texts have mentioned five different types of dhoompan

- {1}prayayogik{twice a day}
- {2}snehik{once a day}
- {3}virechnik{3 4 times a day]
- {4}vamak
- {5}kashagn{in between the meals}

There use is specific to specific diseased conditions and treatment managements. Preferably prayogik dhoompan {twice a day} of herbal formulation is given to combat tobacco dependency.

3. Conclusion

Exploring the pervasive health risks of tobacco, societal impact of smoking, and the health hazards to the non

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smokers, the Ayurvedic interventions, emphasizing holistic treatment and prevention strategies, are proposed to mitigate these health risks, highlighting the need for robust public health policies

Since the prevalence is so vast and the ill effects of it are equally vast. Even an otherwise healthy and non smoker person can not escape the side effects of its smoke. For this alarming health hazard sparing none, Government and NGOS need to put more awareness camps and strict Rules to atleast completely ban its usage in public places. Awareness through social media, print media and door to door campaigns to educate about second and third hand smokers risk have to be added to the agenda and individual lifestyle changes in collaboration with yoga aasans, meditation ayurvedic daily regimes and seasonal regimes planned in a strategical scientific manner can surely play key role in combating tobacco usage along with easily approachable de addiction centers and medicinal treatments for the identified population.

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