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Trends in smoking among adults and smoking-attributable burden in Lithuania

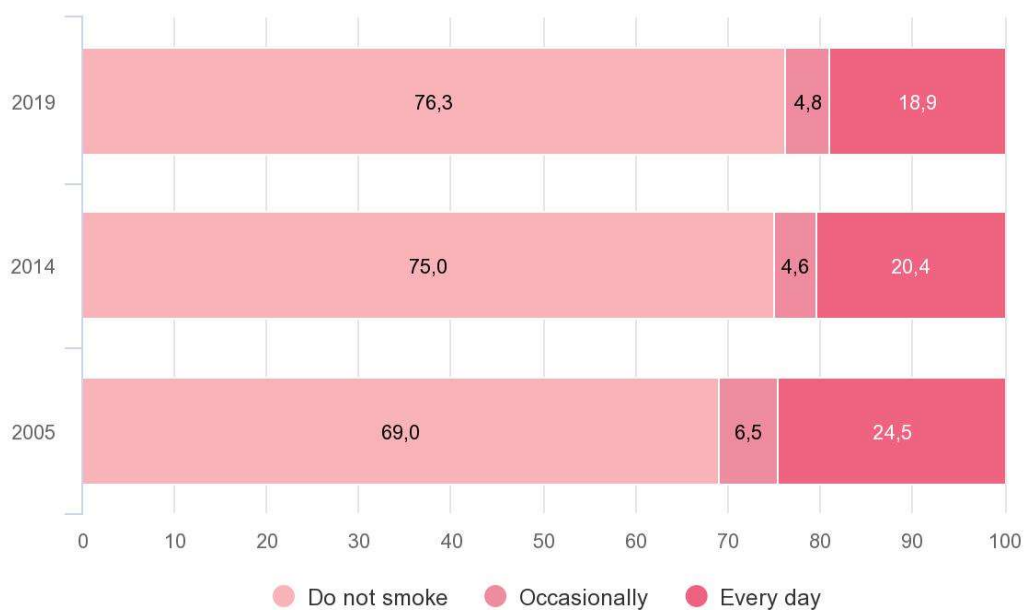
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Population habits of smoking tobacco products (cigarettes, hand-rolled tobacco, pipe tobacco, cigars, cigarillos)



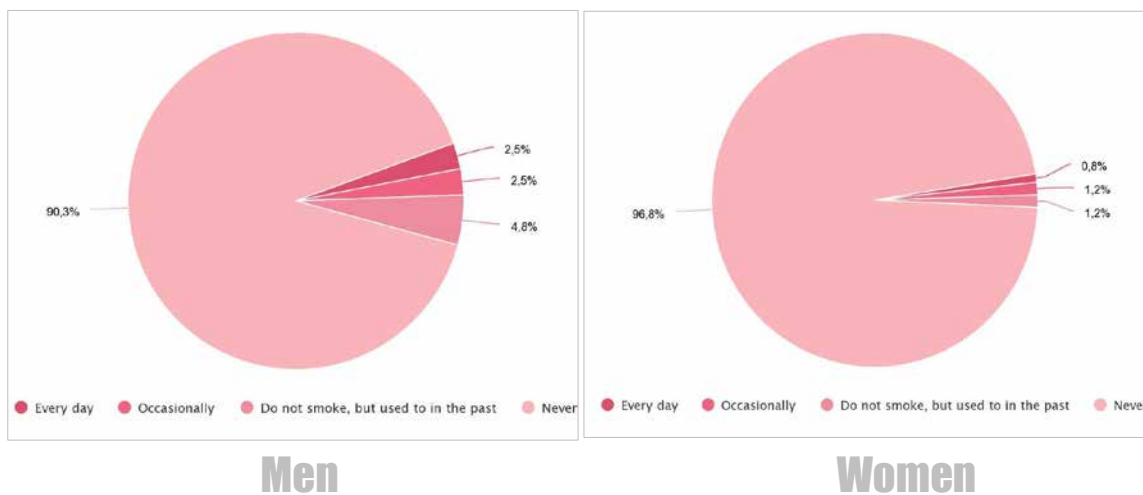
Statistics Lithuania, [Health of Population of Lithuania Survey](#)

Population habits of smoking tobacco products by sex, 2005 and 2019



Statistics Lithuania, [Health of Population of Lithuania Survey](#)

Habits of smoking electronic cigarettes or similar electronic devices by sex, 2019



Statistics Lithuania, [Health of Population of Lithuania Survey](#)

Number of cigarettes smoked per year and the proportion of illicit cigarettes by socio-demographic characteristics and smoking intensity

Variables	Number of Cigarettes per Year	Number of Illicit Cigarettes per Year	The Proportion of Illicit Cigarettes out of All Cigarettes (%)	<i>p</i> from Z Test
Sex <i>n</i> = 731	3,456,185	369,289	10.7	
Men	2,771,445	317,714	11.5	<0.001
Women	684,740	51,575	7.5	
Age groups <i>n</i> = 486				
18–44	1,081,130	73,311	6.8	<0.001
≥45	1,243,190	184,599	14.8	
Education <i>n</i> = 444				
Secondary or lower	837,310	174,744	20.9	<0.001
Higher than secondary	1,284,435	83,476	6.5	
Living place <i>n</i> = 731				
Big city (from 91,000 residents)	1,388,825	114,920	8.3	<0.001
City (2000–91,000 residents)	815,410	87,600	10.7	
Town/village (up to 2000 residents)	1,251,950	166,769	13.3	
Monthly income <i>n</i> = 318				
≤€395	288,715	81,778	28.3	<0.001
>€395	1,231,875	152,552	12.4	
Smoking intensity <i>n</i> = 731				
Light smokers (1–19 cig/day)	2,160,070	154,304	7.1	<0.001
Heavy smokers (≥20 cig/day)	1,296,115	214,985	16.6	

Liutkutė-Gumarov, V., Galkus, L., Petkevičienė, J., Štelemėkas, M., Miščikiienė, L., Mickevičienė, A., & Vaitkevičiūtė, J. (2020). Illicit Tobacco in Lithuania: A Cross-Sectional Survey. *International Journal of Environmental Research and Public Health*, 17(19), 7291.

- ✓ Fieldworkers walked 358 routes (about 1074 km)
- ✓ 6517 discarded packs were collected and analyzed
- ✓ 5754 packs were cigarette packs

31.5% of the cigarette packs were not intended for Lithuanian market

31% in cities
33% in towns

82% of packs that were not intended for Lithuanian market were cigarette packs originating from Belarus

The highest share of cigarette packs not intended for local market was found in municipalities bordering Belarus (44.4%) and Poland (41.3%)

Smoking caused

6304 deaths per year in Lithuania

Male deaths accounted for

89.4%

of all smoking-attributable deaths



Smoking caused 1 out of 30 death in women



Smoking caused 1 out of 4 deaths in men

2003-2013

Share of active and passive smoking attributed deaths in Lithuania, 2003-2013

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2003–2013
Men												
Active smoking	25,7	25,3	25,0	24,7	24,1	24,6	23,8	24,9	25,5	25,3	24,9	25,0
Passive smoking	0,4	0,5	0,4	0,4	0,3	0,3	0,4	0,4	0,4	0,5	0,3	0,4
Total	26,1	25,7	25,5	25,1	24,3	24,9	24,2	25,3	25,9	25,8	25,3	25,4
Women												
Active smoking	3,2	3,1	3,1	3,2	3,0	2,9	2,8	2,8	2,7	2,9	2,8	3,0
Passive smoking	0,4	0,4	0,3	0,3	0,3	0,2	0,2	0,3	0,2	0,2	0,2	0,3
Total	3,6	3,5	3,5	3,5	3,4	3,3	3,1	3,1	3,0	3,1	3,0	3,3
Total												
Active smoking	15,0	14,6	14,6	14,4	14,2	14,0	13,6	13,9	14,2	14,1	13,8	14,2
Passive smoking	0,4	0,4	0,3	0,3	0,3	0,2	0,2	0,3	0,2	0,2	0,2	0,3
Total	15,6	15,3	15,2	15,0	14,7	14,6	14,1	14,4	14,7	14,5	14,2	14,8

Liutkutė-Gumarov Vaida. Smoking-attributable social and economic harm assessment in Lithuania: Doctoral Dissertation: Medical and Health Sciences, Public Health (M 004). Available online: <https://www.lsmuni.lt/media/dynamic/files/18418/disertacijaliutkute-gumarov.pdf>



1 out of 54 women

On average, outpatient and inpatient healthcare services due to smoking related diseases were provided to

71 000

people each year

2003-2013



1 out of 20 men

Share of active and passive smoking attributable morbidity cases in Lithuania, 2003-2013

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2003-2013
Men												
Active smoking	4,7	4,6	4,5	4,4	4,9	4,5	4,7	4,7	4,8	4,2	5,1	4,6
Passive smoking	0,4	0,3	0,2	0,2	0,2	0,2	0,2	0,2	0,2	0,2	0,6	0,3
Total	5,1	4,8	4,8	4,6	5,0	4,7	5,0	4,9	5,0	4,5	5,7	4,9
Women												
Active smoking	1,7	1,6	1,6	1,4	1,8	1,4	1,6	1,3	1,5	1,1	1,8	1,5
Passive smoking	0,6	0,5	0,3	0,3	0,3	0,3	0,3	0,3	0,2	0,2	0,5	0,3
Total	2,2	2,1	1,9	1,7	2,0	1,7	1,9	1,6	1,7	1,3	2,3	1,9
Total												
Active smoking	3,0	2,9	2,9	2,7	3,1	2,7	3,0	2,7	2,9	2,4	3,2	2,9
Passive smoking	0,5	0,4	0,3	0,3	0,2	0,2	0,2	0,3	0,2	0,2	0,6	0,3
Total	3,5	3,2	3,1	2,9	3,3	3,0	3,2	3,0	3,1	2,7	3,8	3,2

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Smoking-attributable costs in Lithuania, 2013

Smoking-attributable costs	€	% of total estimated costs	Per capita (€)	Per smoker (€)
Direct Costs	58 716 500	6,2	19,85	94,53
Healthcare system	43 590 220	4,6	14,74	70,18
Sickness benefits	1 249 409	0,1	0,42	2,01
Incapacity to work and disability pensions	13 876 870	1,5	4,69	22,34
Indirect Costs	894 046 543	93,8	302,28	1439,42
Loss productivity due to sickness	2 082 590	0,2	0,70	3,35
Loss productivity due to smoking breaks	250 985 127	26,3	84,86	404,09
Loss productivity due to presenteeism	41 537 936	4,4	14,04	66,88
Loss productivity due to premature mortality	599 440 890	62,9	202,67	965,10
In total	952 763 043	100	322,13	1533,96

Liutkutė-Gumarov Vaida. Smoking-attributable social and economic harm assessment in Lithuania: Doctoral Dissertation: Medical and Health Sciences, Public Health (M 004). Available online: <https://www.lsmuni.lt/media/dynamic/files/18418/disertacijaliutkute-gumarov.pdf>

The proportion of the Compulsory Health Insurance Fund expenditure attributable to active smoking in Lithuania in 2013

	SAHE (€)	THE (€)	%THE
Inpatient * care services	24,897,806	424,056,045	5.9
Outpatient care services	1,091,684	336,437,791	0.3
Medical Rehabilitation	683,226	39,243,513	1.7
Pharmaceuticals and medical aids	8,753,540	235,547,961	3.7
Emergency medical aid (ambulance) service	689,040	40,531,782	1.7
Nursing	703,270	41,368,797	1.7
Expensive tests and procedures	535,560	31,503,545	1.7
Total	37,354,125	1,148,689,433	3.3 **

SAHE - Smoking-attributable health expenditure; THE—Total healthcare expenditure.
The numbers in the table are rounded and so may not correspond to totals.

Liutkutė, V., Štelemėkas, M., & Veryga, A. (2018). Smoking-attributable direct healthcare expenditure in Lithuania: A prevalence-based annual cost approach. *Medicina*, 54(2), 15.

- Smoking causes high socio-economic harm, amounting for

2.7% of GDP

- Despite significant progress in tobacco control, implementation of evidence-based tobacco control policies, **tobacco taxation policies in particular, should** be further strengthened
- Industry independent data on illicit trade is needed in our region

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Thank you!

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