The Importance of Reducing Smoking in China: To Achieve Healthy China 2030 While Reducing the Severity of the COVID-19 Pandemic

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Introduction
The coronavirus disease 2019 (COVID-19) pandemic is the most devastating threat to global health since the 1918 influenza pandemic. As of May 22, 2020, there have been 5.1 million cases confirmed, with over 333,000 deaths. And we are just at the beginning of a long struggle.

There is a connection between COVID-19 — the greatest infectious disease outbreak in a century — and the greatest chronic disease threat in the world today — tobacco smoking. Smoking has been identified by the World Health Organization (WHO) as the “single greatest preventable cause of death in the world”. Tobacco smoking kills 7.1 million people a year, with an additional 1.2 million dying from secondhand smoke.

What’s the connection? High-risk groups for COVID-19 include those with chronic obstructive pulmonary disease (COPD), cardiovascular disease, and diabetes. The importance of protecting those with such chronic diseases as a means for containing the COVID-19 pandemic has been articulated in the China CDC Weekly. But in addition to containing the pandemic, there are significant opportunities for preventing and limiting the severity of COVID-19 through reducing smoking.

Smoking is a significant risk factor for these and other conditions associated with high risk of COVID-19, and has been identified by many health authorities, including the WHO, as a specific risk factor for COVID-19.

A recent multinational study of 8,190 COVID-19 patients found that current smokers were more likely to die (9.4%) compared to former smokers and non-smokers (5.6%). A recent meta-analysis of 19 peer-reviewed papers found that smoking was a significant risk factor for progression of COVID-19: smokers had 1.91 times the odds of greater severity than never smokers. Thus, smoking cessation is recommended to reduce risk of COVID-19 and to lessen its severity by the WHO, the UK National Institute for Health Care Excellence (NICE), the Canadian Lung Association, and health professionals.

Recommended Citation