TOBACCO CONSUMPTION

• Among adults (ages 15—59) 20.9% smoke tobacco, with a significant difference between genders (men 46.4%; women 0.2%).¹

• Among adults (age 15+): ²
  ◦ 3.3% of adults smoke “shisha,” or waterpipe tobacco (men 6.2%; women 0.3%)
  ◦ 2.6% use smokeless tobacco (men 4.8%; women 0.3%)

• Among youth (ages 13—15) 13.6% use tobacco products (boys 18.1%; girls 8.2%): ³
  ◦ 10.1% smoke tobacco (boys 16.3%; girls 3.1%)
  ◦ 4.8% smoke cigarettes (boys 8.3; girls 0.8%)
  ◦ 4.1% use smokeless tobacco products (boys 2.7%; girls 5.4%)

SECON Dhhand SMOKE EXPOSURE

There is no safe level of secondhand smoke.⁴

• 60.7% of all adults (age 15+) who work indoors are exposed to secondhand smoke at the workplace; 72.7% are exposed in restaurants, and 79.6% are exposed in public transportation.²

• Among youth (ages 13—15), 55.2% are exposed to secondhand smoke inside enclosed public places and 34.9% are exposed at home.³

HEALTH CONSEQUENCES

Tobacco use is deadly. Smoking kills at least half of lifetime users.⁵

• Over 62,000 people die in Egypt each year from tobacco-related diseases.⁶

• 90% of all lung cancer cases in Egypt are due to tobacco use.⁷

COSTS TO SOCIETY

Tobacco exacts a high cost on society.

• The direct annual cost of treating tobacco-related diseases in Egypt is estimated at 3 billion EGP (650 million USD).⁷

• Lost economic opportunities in highly populated, low- and middle-income countries are severe because up to half of all tobacco-related deaths occur during the prime productive years (ages 30—69).⁸

• A smoker in Egypt would have to spend 12.3% of the national median income to purchase 10 of the cheapest cigarettes each day.⁹