

NEWS ANALYSIS

All articles written by David Simpson unless otherwise attributed. Ideas and items for News Analysis should be sent to David Simpson at the address given on the inside front cover.

The Marlboro Man needs Viagra

This past June the California Department of Health Services announced its latest assault on tobacco—a \$22 million advertising campaign aimed in part at young men 18–30 years of age. Funding for the campaign comes from Proposition 99, the 1988 ballot initiative which increased cigarette taxes and dedicated much of the revenue to tobacco control efforts. Among the 25 new radio, television, and print ads produced are a few that emphasise the link between smoking and impotence.

In announcing the campaign, Kim Belshé, the agency's director, noted rather discreetly that "The Marlboro Man may not be everything he's cracked up to be." Journalists were a bit more playful, picking up on the heavy media coverage surrounding Viagra (sildenafil), the new medication for male impotence. "The Marlboro Man needs Viagra", quipped the Associated Press. "What Viagra may give, tobacco taketh away," chimed in the *Los Angeles Times*. The *San Francisco Chronicle* reported that the campaign "takes aim at smokers—directly below the belt".

In a television ad (entitled "Gala Event"), a tuxedo-clad man and a woman in a low-cut gown are casually



A new California campaign features the link between smoking and impotence.

flirting across the room at a private party. When the man lights up a cigarette, it goes limp in his mouth. The woman looks puzzled, then smiles derisively and walks away, while the narrator reports that "medical researchers believe cigarettes are a leading cause of impotence". A big-band version of the song "I ain't got nobody" plays in the background. The tagline at the end reads, "Cigarettes. Still think they're sexy?" A companion print ad shows an attractive man with a flaccid cigarette hanging from his lips (figure).

"The recent extensive public discussion about male impotence has focused on the available remedies, especially Viagra," noted Dr Christopher Evans, assistant professor of urology at the University of California, Davis, School of Medicine, in a press release about the campaign. "This discussion has ignored the fact that many of the causes of erectile dysfunction are preventable. One of the leading preventable causes is smoking, which can adversely affect the circulatory system—an essential component of normal male sexual function."

The California campaign is not the first time, of course, that the link between smoking and impotence has been covered in the media or featured in an anti-tobacco campaign. A cover story in the April 1988 issue of *Reader's Digest* carried the headline "Warning: smoking endangers your sex life." Around the same time the Cleveland, Ohio television station WKYC ran a story about smoking and impotence ("another reason why your loved ones want you to quit smoking"). A print ad promoting the WKYC story (reproduced in *Tobacco Control* 1992;1:241) featured phallic imagery similar to that used in the California campaign. The University of Central England gallery of anti-tobacco artwork, produced in conjunction with the Smoke Free Birmingham campaign (see the cover essay in the last issue of *Tobacco Control*), includes a drawing suggesting the beneficial effect of smoking cessation on sexual performance (figure).



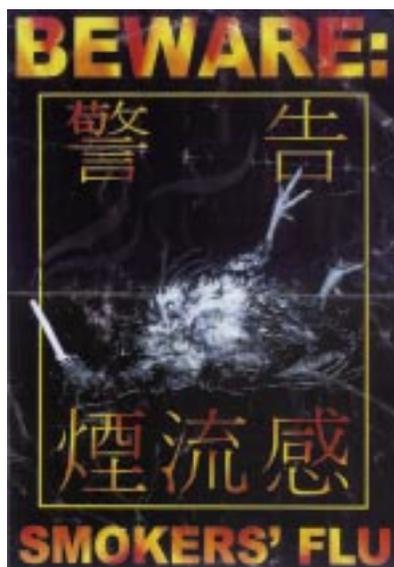
Artwork from the University of Central England suggests the beneficial effect of quitting smoking on sexual performance.

Beyond these fleeting examples, the California campaign is probably the most ambitious attempt to link smoking and impotence in a public health campaign. If firm evidence shows that the campaign is producing its intended effect, tobacco control advocates in other venues may embrace the strategy in their own programmes. "Frankly", said health director Belshé, "it's our hope that men who won't quit to save their lives, to save their lungs, to save their hearts, may be more inclined to quit to save their sex lives."

RONALD M DAVIS
EDITOR

Fowl effects from smoking

In the immediate wake of the Hong Kong chicken 'flu, which tragically claimed four deaths and led to the mass destruction of all chickens in Hong Kong, the campaigning group People Acting for a Smokeless Society (PASS) produced a poster depicting a very dead chicken flat on its back with a cigarette in its mouth (figure) The



An anti-smoking poster in Hong Kong mimicked the city's chicken 'flu' campaign.

poster was entitled “BEWARE: SMOKERS’ FLU”. PASS pointed out that smoking kills about 5000 residents a year in Hong Kong.

Mimicking the Hong Kong government’s bird ‘flu’ campaign, PASS encouraged smokers to watch out for the symptoms of “smokers ‘flu’”: coughing, wheezing, hacking, foul odour emanating from the mouth and fingers, yellow-stained teeth, damaged taste buds, decline in sex drive, impotence, and infertility. One newspaper commented: “Who knows? Maybe PASS is onto something. After all, if the grisly sight of a deceased chicken smoking a butt doesn’t scare you straight, what will?”

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BAT’s Tobago control campaign

The latest version of BAT’s “the earth is flat” revivalist meetings for journalists in developing countries was a more local affair than usual, but it is interesting that it took place in Trinidad and Tobago. Perhaps this Caribbean country’s obvious sophistication in knowledge about tobacco was what condemned it to receive one of BAT’s disinformation attacks?

As chronicled in News Analysis recently, Trinidad’s prime minister refused to attend the launch of Rothmans’s Craven A brand last November, an example of good taste shared by a leading popular singer, Luciano, who tore down the brand’s banners at a sell-out concert being

used as part of the launch; the health minister has made tobacco control one of his top priorities; and one of the country’s leading banks recently went smoke-free (*Tobacco Control* 1998;7:9–10).

This level of awareness about tobacco was presumably equated with urgent need for attention in the minds of BAT’s public affairs officials, from whose dark bunker at BAT’s headquarters in the United Kingdom was despatched not the usual travel-loving academics from Britain and the United States, but Keith Gretton, communications manager, science and regulations. He went to Trinidad to help his colleague Keith Carter, corporate affairs manager of BAT’s local subsidiary, the West Indian Tobacco Company (Witco), run a one-day seminar for journalists at the Trinidad Hilton.

Carter started off with the absurd if faintly sinister announcement that Witco intends to carry out a survey “to determine why Caribbean youths smoke, with a view to establishing an anti-youth smoking programme”. Whatever these two public relations men lacked in the pretence of academic respectability so strenuously cultivated at previous events, they managed to achieve exactly the sort of coverage BAT loves to generate on such occasions.

One newspaper reported Gretton saying that “lung cancer and coronary disease could be caused by smoking,” but that “there was no definitive evidence that victims of these diseases did contract them as a result of smoking”. For this and other reasons, his company “rejected the view being put forward by anti-smoking activists that smoking was dangerous”; and “existing statistics on the number of persons who died from smoking-related diseases, like lung cancer, were not reliable, since the cause of the lung cancer was not determined”.

Another newspaper, under the headline: “British tobacco man: cancer not caused by smoking”, faithfully reported Gretton’s performance, including the usual BAT line with a genetic update: smoking is a risk factor for lung cancer, but “the biological messages that caused cancer in the body had not yet been identified”. Adding that cancer was also caused by “family history, diet and occupational exposures such as working in a coal mine”, Gretton cited an American Cancer Society study showing that male smokers in the United States were “22 times more likely to develop lung cancer”. Statistics like these, he said, “gave health authorities a basis to rest their

concerns”; but as the same study showed that female smokers were “only 12 times more likely to develop the disease”, these and other statistics were obviously not conclusive.

Presumably nobody present, including Gretton, understood that there could be a perfectly sound reason for this conundrum, and apparently there was no scientist on hand to enlighten them. Perhaps that was one good reason for not fielding scientists this time round, and it must have cut travel costs too. As it happens, health experts the world over could help the parent company achieve even larger savings, by explaining why Caribbean youths smoke, thus saving the cost of the proposed survey. Using existing, though independent research, plus a sheaf of internal paperwork from some of BAT’s own companies, they could explain that Caribbean youths smoke for the usual reasons, found the world over. Those include the sort of associations Rothmans managed to achieve for its products last November—cult music, festive atmosphere, sport—which must have been the envy of BAT’s local salesmen. And of course there are many other reasons: just to take one example, how about the deliberate undermining of health education, by means of the outrageous disinformation that BAT managed to generate from the Hilton seminar?

Bangladesh: not a cigarette paper

On 12 May, a national newspaper in Bangladesh, *Bhorer Kagoj*, launched an ongoing campaign against tobacco, declaring itself free of tobacco advertising in the process. Since then, it has published a continuous stream



Mr Sadeque Chowdhury, chairman of “Bhorer Kagoj”, a national newspaper in Bangladesh which began an anti-tobacco campaign in May.

of articles on tobacco almost daily, usually including spots on the front or back pages, ranging from a forthright piece by the proprietor explaining the paper's stand, to detailed coverage of various aspects of the tobacco problem in the weekly advice page. Numerous readers, as well as organisations working on social issues, have written in to voice their appreciation and support.

Bhorer Kagoj was started in 1990 by a company with wide-ranging business and commercial interests, and circulates throughout the country. It has won a reputation for reliability and independence, and its core readership consists of educated and professional groups, and college and university students. The chairman, Mr Sadeque Chowdhury, is clearly a man who is not content to sit back if he feels something more could be done, and it seemed to him that existing agencies had neither the resources nor the opportunities to implement a sustained and effective campaign. "Our objective is to create more awareness of the dangers of tobacco smoking amongst the public, and specifically youngsters, who are the target of the tobacco firms," he said, as the campaign was being planned, "and advise [people] on ways to quit smoking." He added that they also wanted to avoid reporting social events sponsored by tobacco companies, so as not to give them publicity, though he acknowledged that it would be difficult covering sport without mentioning brand names, because in Bangladesh, as in so many other countries, sport is increasingly tied up with tobacco.

Bhorer Kagoj is certainly the first newspaper in Bangladesh to take a stand like this, and possibly the first in Asia. World No-Tobacco Day (31 May) saw a number of seminars and rallies held in various parts of the country. One of these was sponsored by anti-tobacco group ADHUNIK and inaugurated by the President of Bangladesh, who presented Mr Chowdhury with the President's ADHUNIK Medal, for the paper's anti-smoking campaign role. The Consumers' Association of Bangladesh also presented the newspaper with a crest commending its position in the face of loss of commercial gain.

Meanwhile, BAT seems to have increased its advertising campaign in the print media, and to be adopting a higher corporate profile. The company recently changed the name of its local subsidiary from Bangladesh Tobacco Company to British American Tobacco Bangladesh (BATB), a move which seems in keeping with a trend to

a more aggressive, transnational marketing and operational style. An interesting spin-off from the *Bhorer Kagoj* campaign has been BATB's response when told that the paper would no longer carry its cigarette ads. BATB sent the newspaper photocopies of the discredited articles in the British Sunday newspaper, the *Sunday Telegraph*, together with similar pages from *The Economist*, which had slavishly followed the same line. These articles purported to show that the World Health Organisation had found passive smoking to be harmless, and had then suppressed its findings (see *Tobacco Control* 1998;7:119-20; and *BMJ* 1998;316:945).

Welcome to the world war on tobacco, *Bhorer Kagoj*. We wish you every success.

Poland's world-leading health warnings

Good news from Poland: despite a desperate fight by the tobacco industry, all cigarette packs sold in Poland since 14 June 1998 have been required to carry the world's biggest health warnings. The new warnings must cover at least 30% of each of the two largest sides of the pack, up from a mere 4%. In practice, the single warning currently in use in Poland, "TOBACCO SMOKING CAUSES CANCER AND HEART DISEASE", is split into two, which respectively mention cancer on one side and heart disease on the other. Under the same legislation, tobacco advertisements, too, must carry warnings occupying at least 20% of the total surface area, a provision already implemented since April 1997.

The industry repeatedly managed to delay this aspect of Poland's Tobacco

Control and Health Protection Act. The act was passed in November 1995, but the following month, in one of his last actions as president, Lech Walesa vetoed the act on the grounds that it did not ban advertising. This hard line came as a surprise to many, as five years earlier, shortly before becoming president, Walesa had appeared in a series of Philip Morris ads celebrating the bicentennial of the United States Bill of Rights, in return for a cash payment. In any case, the veto was soon removed by the new president, with the act becoming law in May 1996.

For well over a year, however, there were persistent, industry-backed attempts to get parliament to amend this part of the act, and some surprising postponements were made by the government. The then minister of health and social welfare, RJ Zochowski, ordered several delays at the request of the tobacco industry, signing the last of them even as he himself approached death from cancer.

The scale of the industry's efforts to defeat or at least weaken the new measures is itself instructive, indicating the potential effectiveness of this sometimes underrated aspect of tobacco control policy. Unfortunately, some concessions were surrendered, the most important being to change the instructions for the colour of the warnings, originally specified as "black and white", to "contrasting colours". One glance at the pack reproduced here is enough to show who decides how to interpret this: the use of gold or silver on white is a monument to the industry's contempt for health policy.

So Poland has its new warnings at last, thanks to the determination of health advocates and trusty politicians who fought so hard for them. No



New health warnings on cigarette packs in Poland—large but coloured in camouflage.

doubt there will be opportunities in the future to rectify the print colour regulations. As for advertising, the scheduled ban in the countries of the European Union now provides the obvious example to follow.

Wind of change at WHO

A wind of change has begun to blow through the corridors of the World Health Organisation (WHO). Earlier this year, the new Director General, public health physician and former prime minister of Norway Dr Gro Harlem Brundtland, identified tobacco, along with malaria, as the two priority areas where she wanted to implement new projects when she took up office in July. The identification of effective operational programmes to combat tobacco was among nine areas of work taken on by a transitional team sponsored by the Norwegian government, to help the change-over process from the WHO's previous leadership, under Director General Dr Hiroshi Nakajima of Japan, to the new regime.

The team's work was split into "satellites", a term coined to describe clusters of work based on the initial priorities which Dr Brundtland outlined to the WHO executive board in January. In addition to organisational concerns such as finance, staffing, and communications, these included health and development, health sector development, health and environment, health and emergencies, and mental health, as well as malaria and tobacco. External experts were appointed to guide the satellites' work, with tobacco benefiting from the appointment of Dr Judith Mackay, director of the Asian Consultancy on Tobacco Control (and vice-chair of the editorial advisory board of *Tobacco Control*).

Tobacco is the programme with probably the greatest potential for improvement in any reassessment of WHO's work. Despite maintaining its tough statements about tobacco's massive contribution to worldwide disease and premature death, the WHO had let its practical commitment to tobacco wither away, from a staff of 10.5 in the early 1990s, to just 3.5 by early 1998, and from four regular budget posts to one.

This had come about through a lack of senior-level advocacy on tobacco within WHO, the apparent demotion of the Tobacco or Health Unit (TOH) by its absorption into the Programme on Substance Abuse, and cutting, freezing, or sharing of TOH positions, ending up with only

one full-time staff member (and that a one-year post ending in December), and the other two posts being spread over five people, all part-time or temporary. This sorry decline has occurred despite a steady rise in the number of smokers and deaths from tobacco.

Tobacco's budget, too, has suffered a comparable fate, dropping over 70% since 1994–1995, to less than US\$600 000 per annum. This extraordinary decay is in marked contrast to other important programmes, where budgets have grown substantially in real terms. The staffing levels are almost unbelievable when compared with programmes such as tropical diseases, malaria, tuberculosis, AIDS, and immunisation, which each have between 55 and 100 staff. In 1979, a memo from a tobacco industry employee who attended the Fourth World Conference on Tobacco and Health, contained this recommendation to his colleagues: "We must try to mitigate the impact of WHO by pushing them into a more objective and neutral position."

It would not be hard for a conspiracy theorist to conclude that the industry had managed to get its way in the various processes of decision, and indecision, that led to the sorry state of affairs of recent years. Now, at last, there is an opportunity for real change.

Swedish cinema cards

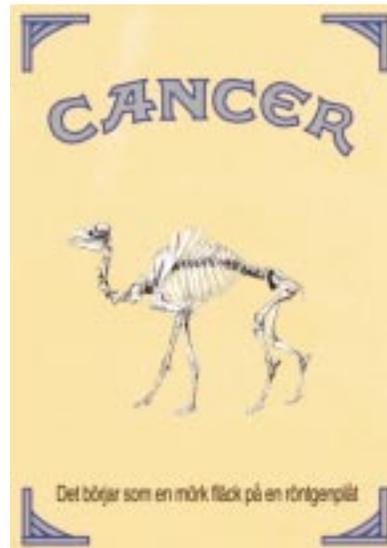
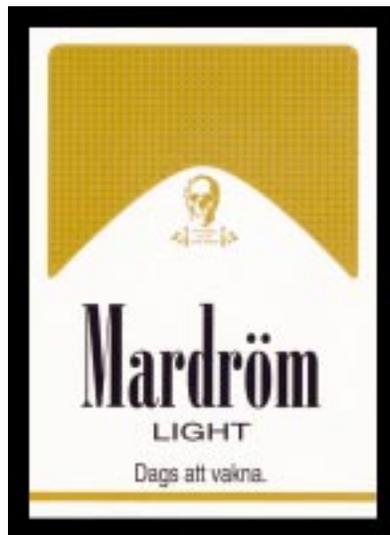
There was a time when cancer societies, like their counterparts in the fields of heart and lung disease,

tended to be somewhat staid, cultivating a respectable image at all costs, and cautiously avoiding any activity which might be seen as radical. Even calling on the government to take action on tobacco seemed to some of them to be going too far. In some countries, things still have not changed much, but in Sweden, a mark of how far things have come was seen in May, when the Swedish Cancer Society decided to play the tobacco peddlers at their own game.

After newspapers had refused to run the society's provocative ads directed against tobacco producer Swedish Match ("Help the children in Eastern Europe to start smoking. Buy shares in Swedish Match."), the society switched to a different, though no less forthright approach. Using designs of actual cigarette packs as a starting point, an advertising agency devised a range of mock cigarette advertisements, each using a subtle variation of the brand name, sometimes with a witty strapline (figures).

Marlboro became *Mardröm*, for example, the Swedish word for nightmare, and the strapline means: "Time to wake up." The *Cancer* brand says: "It starts with a dark spot on an X-ray screen", while the *Dumhet* (meaning stupidity) brand promises: "I can quit whenever I like." The postcards were distributed in the foyers of cinemas, and were thus highly effective at reaching young people, who form a large segment of the cinema-going public.

Many cinemas and also restaurants in Sweden have dispensers holding stocks of 10 postcards, which may be taken free of charge by customers. The cancer society bought space for



Mock cigarette ads produced by the Swedish Cancer Society as postcards. The ad for "Mardröm" (nightmare) says "Time to wake up", while the ad for "Cancer" advises that "It starts with a dark spot on an X-ray screen."

five cards, which were the most popular cards of the 10 on offer in May: the entire print run of 100 000 were taken, a large total for a small country. By contrast, some of the five cards for which other advertisers had bought space remained unclaimed at the end of the month. The tobacco industry is thought to be incensed at the campaign, but unlikely to try to take action, as it is doubtful that a Swedish court would rule against a charity that was not using the altered images to sell a rival product, and the publicity would be devastating.

Institute for Global Tobacco Control

To mark World No-Tobacco Day on 31 May, the School of Public Health at Johns Hopkins University, in Baltimore, Maryland, United States,

launched the Johns Hopkins Institute for Global Tobacco Control. The institute will offer information to physicians and health officials around the world about tobacco's harmful health effects and how to control them, and will also help countries to identify the magnitude of their smoking problem and then develop effective policies for reducing rates of tobacco-related disease and death.

The new institute is being partly sponsored by SmithKline Beecham Consumer Healthcare, which makes smoking cessation products, and is led by Dr Jonathan Samet, chair of the Department of Epidemiology at the Johns Hopkins University School of Public Health. Samet, an experienced researcher regarding the harmful effects of smoking, has collaborated with SmithKline Beecham in carrying out China's third national survey on smoking, whose results were presented at the 10th World Conference

on Smoking or Health in Beijing in August 1997. The Beijing conference saw a consultation process with tobacco control experts from around the world, resulting in a report identifying key research requirements and goals for effective tobacco (see Samet JM, Taylor CE, Becker KM, *et al.* Research for effective global tobacco control in the 21st century: report of a working group convened during the 10th World Conference on Tobacco or Health. *Tobacco Control* 1997;6:72-7).

In addition to the institute, SmithKline Beecham and Johns Hopkins are sponsoring ongoing research studies that are yielding a detailed characterisation of smoking in China, and the initiative will be expanded to other countries starting this year. Over the next three years, the institute will use seminars and research studies to inform policy makers about approaches to tobacco control.

Tobacco in history

"THE CIGARETTE HABIT", BY JC MULHALL, 1895

Excerpt 1 (cigarette smoking, inhalation, irritation, pleasure)

As a member of this (the American Laryngological Association) and the Climatological Association, and as one who has smoked cigarettes for twenty-five years, I feel that I may speak with a certain amount of authority on this subject. "You, a throat doctor, and smoke cigarettes!" is a phrase that has finally wearied my ears; and, bubbling with mild wrath, "I rise to explain."

The pleasure and the penalty of this vice have never been rationally described, to my knowledge, other than by myself. This I did in a paper published in the *St. Louis Courier of Medicine* some eight years ago, and so little notice was given it that what I now say will be practically new.

A word as to the tobacco habit in general. Mankind pursues various methods in using it: by chewing it, by dipping, by cigar or pipe, by snuffing, and by cigarettes. There is a reason why each one pursues a particular plan. Early associations have much to do with the selection of the plan; but, apart from this, each method has its own particular pleasure. The man who both chews and smokes derives a different kind of satisfaction from each method, and he would derive a still different kind did he take snuff. Cigarette smokers may be divided into those who inhale the smoke and those who do not. The

latter class is a very small one and the pleasure is the same, in a milder degree, as that of the cigar and pipe smoker, wherein the smoke chamber is the mouth. But all real devotees of the cigarette inhale. . . . Inhalation explains the pleasure of cigarette smoking. If the cigarette smoker did not *feel* the smoke in his larynx and windpipe, his pleasure would be gone. Every old cigarette inhaler will tell you this fact: that if he perchance smokes a brand of cigarette very much milder than that to which he has been accustomed, he will at once reject it, simply for the reason that larynx and trachea have been accustomed to a certain degree of irritation. The larynx and trachea have, so to speak, acquired a habit which rejects any unusual departure. For the same reason the inhaler rejects a brand of cigarettes much stronger than that to which he is accustomed, nor will he inhale the smoke of a cigar—vastly more irritating than that of any cigarette. The inhaler may change his cigarette for one more pleasing to his sense of flavor, provided always, however, that it satisfies his accustomed degree of laryngeal and tracheal irritation.

The pleasure in cigarette smoking, therefore, as compared with other tobacco habits, may be said to be a pleasurable irritation of the laryngeal and tracheal sensory branches of the pneumogastric nerve.

Continued on page 280