

TOBACCO CONSUMPTION AMONG PEOPLE WHO USE DRUGS: OPPORTUNITIES FOR ENHANCED PUBLIC HEALTH RESPONSES

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Background: Tobacco use is a leading cause of preventable morbidity and mortality globally. However, most high-income countries have experienced significant reductions in tobacco use in recent decades. Despite these improvements, tobacco use remains a major public health issue among people from populations that experience marginalisation, including people who inject drugs. Understanding tobacco use among people who inject drugs is critical to addressing a largely neglected health issue among a population experiencing disproportionately high rates of non-communicable diseases. We describe data from the two prospective cohorts (PATH and SuperMIX) to illustrate the burden of tobacco use among people who inject drugs.

Methods: We analysed data from two cohorts of people who inject drugs, SuperMIX and PATH. Baseline data for the PATH and SuperMIX cohorts were collected between September 2014 and June 2016, and January 2013 and June 2019, respectively. Both studies asked participants to self-report whether they had smoked tobacco in the month prior to their baseline interview, and how many cigarettes they smoked on a typical day.

Results: Across the PATH and Supermix cohorts, 85% of participants reported smoking in the month prior to their baseline interview (87% and 85% respectively). The median number of cigarettes smoked per day among people who reported smoking in the month prior to their baseline interview was 15 in the PATH cohort (IQR=) and 10 in the SuperMIX cohort (IQR=6.0, 15.0).

Conclusions: The findings of this study indicate that tobacco use is substantially higher among people who inject drugs compared with the general population. Our findings shine a light on an underserved health issue among a group who are at-risk of a multitude of adverse health outcomes. Ensuring that appropriate and evidence-based tobacco interventions are accessible to people who inject drugs when required is critical to improving health and social outcomes within this population.

Disclosure of Interest: None