

LETTERS

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Reasons for smoking

Sir,

It is easy to condemn smokers for a wasteful and damaging habit, especially when most of them are in the less affluent sections of society, but it may be more useful to try and understand why they smoke.

During ordinary consultations I asked 25 randomly selected smokers why they smoked and what the negative aspects were. Fourteen were women (mean age 30 years, range 17–56 years) and 11 were men (mean age 38 years, range 23–62 years). Only two of the 25 smokers were not working class.

The most common reasons for smoking were: habit or addiction (16), to calm the nerves or relax (16) and boredom or boredom at work (10). Less frequent reasons were: to reduce appetite (5), to help socially (5), enjoyment or satisfaction (5) and to relax after a meal (5).

Just over half the smokers reported that someone else in the household smoked, and the mean age of starting to smoke was 15 years (range 9–21 years).

When asked what they saw against smoking the commonest reply was that it can give you lung cancer (19). Other answers were: too expensive or a waste of money (11), causes coughs (9), causes shortness of breath (7), causes heart trouble (6) and smells or makes breath smell (9). Half of the women mentioned adverse effects on the baby in pregnancy or said they had cut down or stopped during pregnancy.

Thirteen people said they had given up once, mostly for one to three months. Seven said they wanted to give up but felt unable to. Only four people said that another member of the household did not like them smoking.

Eysenck described smokers as being more extrovert than non-smokers and as having a kind of stimulus hunger with an inclination for impulsive and risk taking behaviour. Tomkins hypothesized that some people smoke to reduce stress and bad feelings (negative affect), others smoke in pleasant or relaxing circumstances (positive affect) and some smoke for both sets of reasons (addiction).

McKinnell¹ analysed the varying occasions on which people smoke and found these could be grouped under seven headings: nervous irritation smoking, relaxation smoking, smoking alone, activity accompaniment smoking, food substitution smoking, social smoking and social confidence smoking.

Russell and colleagues² analysed the replies to questionnaires and found six types of smoking behaviour: psychosocial, indulgent, sensorimotor, stimulation, addiction and automatic. They found a correlation between the last three types which they group together as pharmacological addiction; these three also correlated with the number of cigarettes smoked while the first three did not. Their results point to smoking as a stimulant rather than a sedative.

Although there has been a considerable decline in smoking, figures from the general household survey for 1984 show that 36% of men and 32% of women smoke and that there is a very marked social class gradient — the proportion of smokers is nearly three times greater among unskilled manual workers than in professional groups. The tax on tobacco products is about 75% and between 1979 and 1985 the real price of cigarettes went up by a third while the number sold went down by about a fifth. Although price influences consumption, a habit formed when it is easily affordable (low price, good income) is not so easily given up when the financial equation alters.

My own survey seems to show that smokers do appreciate the danger and often the futility of smoking, but there was a suggestion of helplessness in many of their replies. The lesson is that advice and warnings will never be enough to deal with the smoking problem.

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Reference

1. McKinnell AC. Smoking motivation factors. *Br J Soc Clin Psychol* 1970; 9: 8-22.
2. Russell MAH, Peto J, Patel UA. The classification of smoking by factorial structure of motives. *J R Stat Soc A* 1974; 137: 313-333.

Sale of cigarettes to children

Sir,

In March 1982 I collected information about the sale of cigarettes to children in Exeter.¹ Of the 37 newsagent and tobacconist shops then visited, only two (5%) visibly displayed the Tobacco Advisory Council notice, or anything similar, explaining that in England, Scotland and Wales it is an offence to sell cigarettes to anyone apparently under the age of 16 years, whether for his own use or not.

In November and December 1986 my partner and I visited the same 37 shops I had visited in 1982. We entered each shop as members of the public and looked for a visible notice about cigarette sales to under 16 year olds. At the same time two members of Action on Smoking and Health visited 39 shops in the Bristol area and made the same observations.

Of the 37 Exeter tobacconists and newsagents 32 (86%) now display a warning notice. In Bristol, 31 (79%) of 39 shops visited displayed a notice.

In four and a half years the number of tobacconists in Exeter visibly displaying warning notices about cigarette sales to children has risen 16 fold. Media interest, activity by environmental health departments, government and medical professionals, police awareness and the provision of free notices by the Tobacco Advisory Council must all have had an influence. It appears, from the findings in Bristol, that the effect is not confined to Exeter. However, despite the increase, one in six of the shops visited still displayed no notice.

It is to be hoped that more such notices mean fewer children are buying and smoking cigarettes.

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Reference

1. Bradley NCA. Sale of cigarettes to children in Exeter. *J R Coll Gen Pract* 1983; 33: 559-562.