

Associated Risk of Morbidities of Tobacco Smoking among Opium Consumers in Rural Areas of Rajasthan

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ABSTRACT The study has been carried out in three desert districts, namely Barmer, Jaisalmer and Bikaner districts of Rajasthan. The objective was to find out the associated risk factors of different health problems related to smoking and their ill-effects among the opium consumers. A total of 600 subjects were interviewed who consumed opium and at the same time smoked cigarettes/ *beedis* or chewed tobacco as well. The subjects were identified by Simple Random Sampling (SRS) technique in these rural areas of these districts and the data has been collected using pre-tested schedule. Those who smoked tobacco and consumed opium were separated and analysed to find the associated risk factors. The median age of smokers was 42.3 ± 9.04 years and of opium consumers was 38.5 ± 6.78 years. The odds ratio calculated was 1.08 and the relative risk (RR) of respiratory problems among the opium consumers was 1.68 and that of smokers was 2.44, which is higher and is statistically significant ($P < 0.05$). This showed that smokers have significant risk of health problems and are being shadowed by opium use. Almost all the individuals who consumed opium were smokers/chewers in some or the other form and always have psychological problems by their mind drifting towards opium. The risks including chronic cough, stomach pain, chest pain etc. were common among opium consumers who are smokers. The duration of consumption was highly correlated with diseases, $r = 0.80$, in subjects who were consuming for the last 15 years. These subjects also chewed tobacco and smoked about 20 *beedis* on an average/day. The association of smoking tobacco and opium addiction has significant correlation on health with chronic diseases ($P < 0.05$) and they are being dominated by the opium effect. The longer duration of consumption of opium and smoking becomes a major risk factor which can be attributable for cause of cancers of different type and may lead to mortality.