

STATEMENT OF THE WORLD HEALTH ORGANIZATION

WTO TRIPS Council Meeting; 5-6 March 2013

Thank you Mr Chair for the opportunity to address the Council on this critical public health issue.

Tobacco Epidemic

As WHO has previously stated in this forum, tobacco use is one of the greatest threats to public health the world has ever faced, and the single most preventable cause of death in the world today. Globally, tobacco consumption kills nearly six million people a year through both direct use and the deadly effects of second-hand smoke - more than 70% of whom reside in low- and middle-income countries.

Tobacco also represents the leading modifiable risk factor in the fight against the growing epidemic of noncommunicable diseases (NCDs). NCDs, primarily cancers, diabetes, cardiovascular and chronic lung diseases, currently account for 63% of all deaths worldwide. These diseases kill an astounding 36 million people each year, with nearly 80% of deaths occurring in low- and middle-income countries.

As necessary tobacco control measures continue to be implemented in developed countries, the tobacco industry, through aggressive marketing and interference practices, shifted some time ago its focus to new markets in the developing world. As a result, tobacco-attributable mortality is rapidly increasing in developing countries, and, by 2030, more than 80% of the world's tobacco deaths will occur in low- and middle-income countries. Given that smoking causes 30% of all cancers, including greater than 70% of all lung cancers, 40% of chronic respiratory diseases, and nearly 10% of all cardiovascular diseases, it is a critical moment in the global effort to curb the tobacco epidemic for the introduction of necessary public health interventions under the WHO framework convention for tobacco control, like the measure under consideration here.

Economic Costs of Tobacco

The economic costs of tobacco use are as equally as devastating as the public health costs. Though the tobacco industry routinely cites the economic contribution of tobacco, the reality is that tobacco use puts an enormous financial burden on countries, in addition to the fact that tobacco and poverty are inextricably linked at the individual level. Nationally, the costs of tobacco use encompass increased health-care costs, lost productivity due to illness, premature death, and widespread environmental damage. Thus, as tobacco consumption rates and tobacco-related illnesses increase in developing countries, so do tobacco-related healthcare costs. Additionally, conservative estimates suggest that tobacco's more than US\$500 billion drain on the world economy exceeds total annual health expenditures in low- and middle-income countries.

The economic burden of NCDs, with tobacco representing the largest risk factor, is also staggering. Recent macroeconomic simulations suggest that, over the next two decades, cardiovascular disease, chronic respiratory disease, cancer, and diabetes, will cause a cumulative output loss of more than US\$30 trillion, representing 48% of global GDP in 2010. This in turn will push millions of people across the planet below the poverty line. Because NCDs will result in long-term macroeconomic impacts on labour supply, capital accumulation and GDP worldwide, with the consequences most severe in developing countries, strong public health interventions, like the plain packaging measure under deliberation here, are relevant in addressing both health and economic concerns.

United Nations High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases

At this point I would like to draw the attention of the distinguished delegates here to the fact that the impact of tobacco and NCDs on both public health and country economies was highlighted at the recent *United Nations High-level Meeting of the General Assembly on the Prevention and Control of Non-*

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communicable Diseases, held in September 2011 in New York. There, the UN General Assembly, comprised of Heads of State, adopted a Political Declaration which recognized the fundamental conflict of interest between the tobacco industry and public health, and wherein Member States unanimously committed to advancing the implementation of multisectoral, cost-effective, population-wide interventions in order to reduce the impact of NCD risk factors.

WHO is of the view that the implementation of plain tobacco product packaging, representing a legitimate tobacco control measure, will have a substantial impact on tobacco consumption, is fully in line with the spirit and intent of the outcome of the UN High-level Meeting, and is in accordance with international legal obligations under the WHO Framework Convention on Tobacco Control.

I now kindly defer to my colleague to elaborate on the relevance, in this context, of the WHO FCTC.