

Abstract

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The Health Cost of Tobacco: New Evidence from Egypt

Background – Although, Egypt has the highest cigarette consumption in the Middle East and North Africa region (MENA), research documenting the resulting economic impact in terms of increasing healthcare spending in Egypt is lacking. Therefore the main contribution of this study is to provide policy-makers with the scientific evidence supporting the significant importance of enhancing tobacco control measures through estimating the economic cost of tobacco use in Egypt. This support through determine direct medical costs, and determine morbidity-related productivity loss attributable to tobacco use. In addition, determine mortality-related productivity loss attributable to tobacco use. Methods –The study used the cost-of-illness approach to four tobacco-related diseases (COPD, IHD, stroke, and lung cancer). Direct and indirect costs. Smoking Attributable Fractions (SAF) were calculated. Primary data were collected from patient survey and expert opinion poll, while the Secondary data were obtained from the Egyptian Central Agency for Public Mobilization and Statistics (CAPMAS), and the hospital costs were obtained from specialized hospital accounts for Internal medicine departments, Intensive care departments and Oncology departments. Results – For one year (2012), the total inpatient cost attributed to smoking from the four diseases amounted to 53 million and 809,510 thousand LE. While the calculated cost due to deaths attributed to smoking from the four diseases in the employed Egyptian population was 727 million and 298,788 thousand LE. The average annual health expenditure attributed to smoking for a COPD patient amounts to 15,264-28,711 LE, for a lung cancer patient amounts to 16,218 - 18,879LE and for an IHD patient ranges from 1,866 to 2,494 LE. Individual cost as estimated to GDP per capita for COPD, IHD and lung cancer patients is 149%, 15% and 119% respectively. On the other hand, the individual level health expenditure attributed to smoking to the total spending for an Egyptian family on healthcare services, in COPD IHD lung cancer is 2276%, 226% and 1817% respectively. Conclusions –Smoking has a high cost of illness that should be seriously considered by stakeholders and decision makers with the urgent need to enforce all tobacco control measures in the country especially the most effective measure highly recommended by the WHO Framework Convention of Tobacco Control (FCTC) the tobacco tax increase. Keywords ? Tobacco control ? Cost of illness ? Healthcare spending ? Egypt