

## Introduction

Malaysia has one of the highest smoking rates among men in the world (50% are daily smokers). To bring about any rapid decrease in smoking related disease and deaths will require aggressive cessation programs. It is well known that health professionals can play an important role in assisting patients to quit but it is preferable that they do not smoke themselves and have adequate training.

**This study examined smoking rates and attitudes among faculty at AIMST University, a private university in rural Kedah, Malaysia.**

## Materials and Methods

An anonymous survey was distributed to all faculty in five health faculties (medicine, dentistry, pharmacy, allied health professions and applied sciences). The response rate was 78.6% (118 individuals) and indicated that 13% of faculty were former smokers and 8% were current smokers; interestingly, 4% used pan or smokeless tobacco, which may reflect the proportion of Indian faculty on campus. Users were all male (100%).

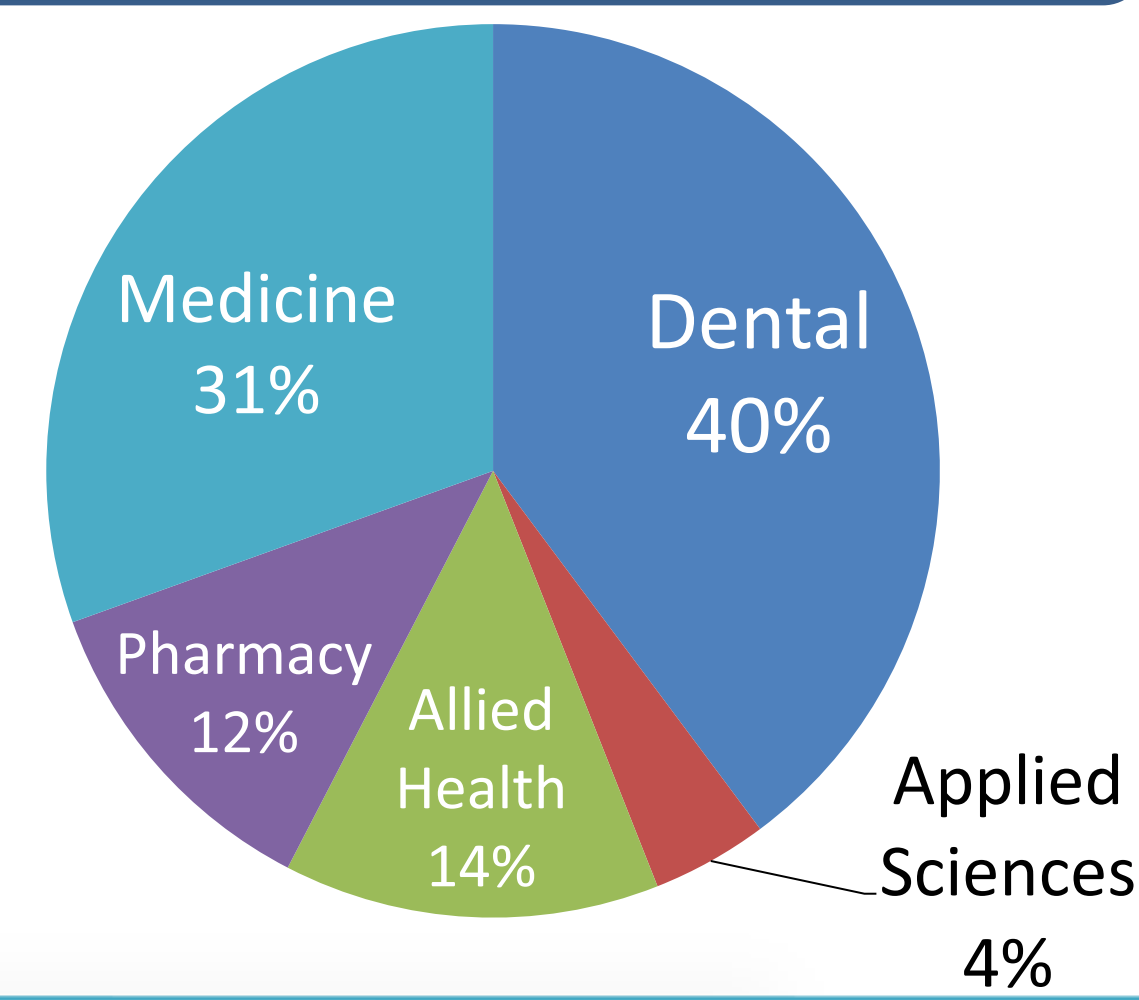
These figures are considerably higher than reported in Malaysia among medical students (1.6% current smokers; Tee et al; Med J Malaysia 62,p383,2007).

## Results

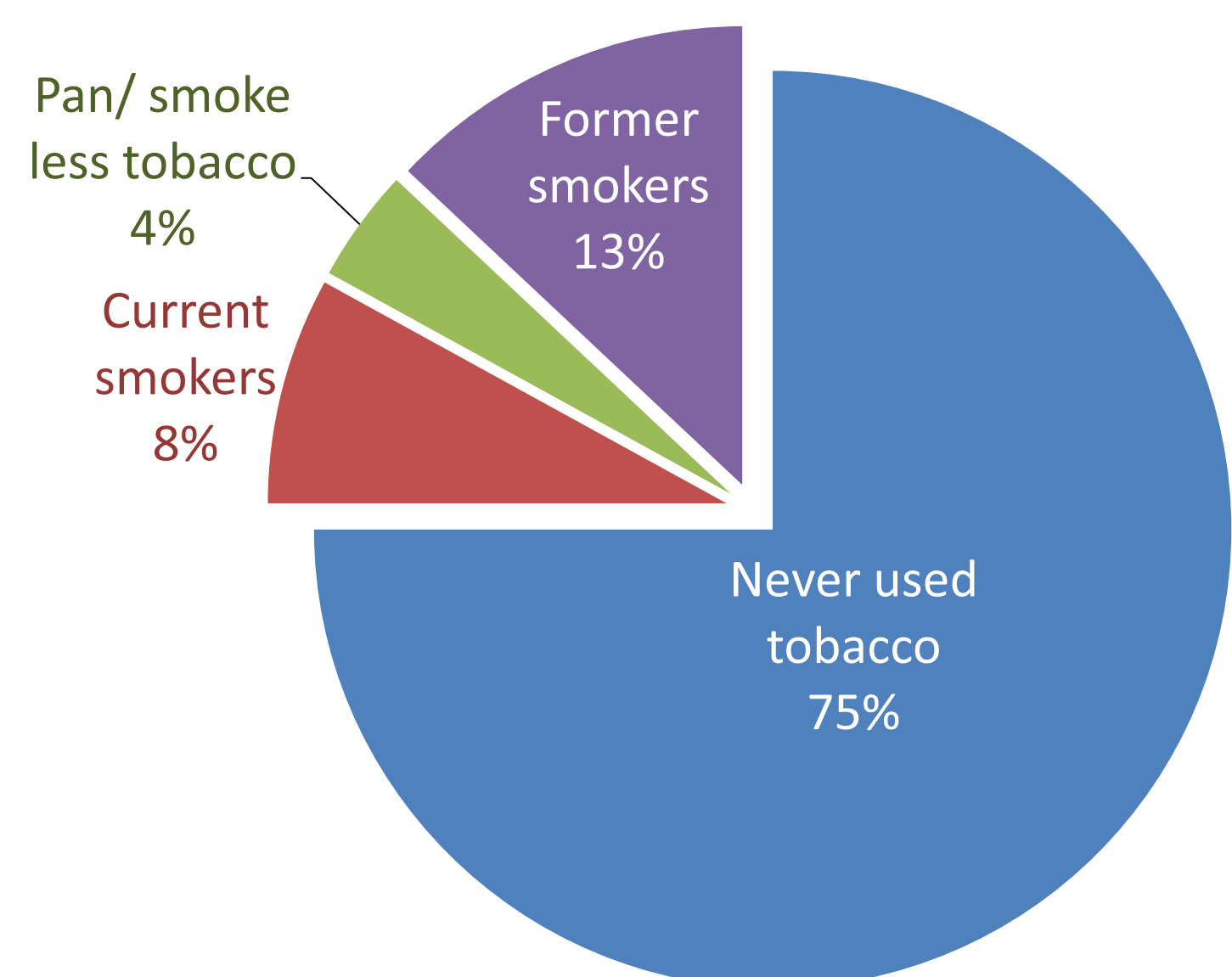
### Profile of the participants

Males: 62(52.5%)  
Females: 56 (47.5%)

Chinese: 29 (24.6%)  
Indian : 81 (68.6%)  
Malay : 1 (0.8%)  
Others : 7 ( 5.9%)

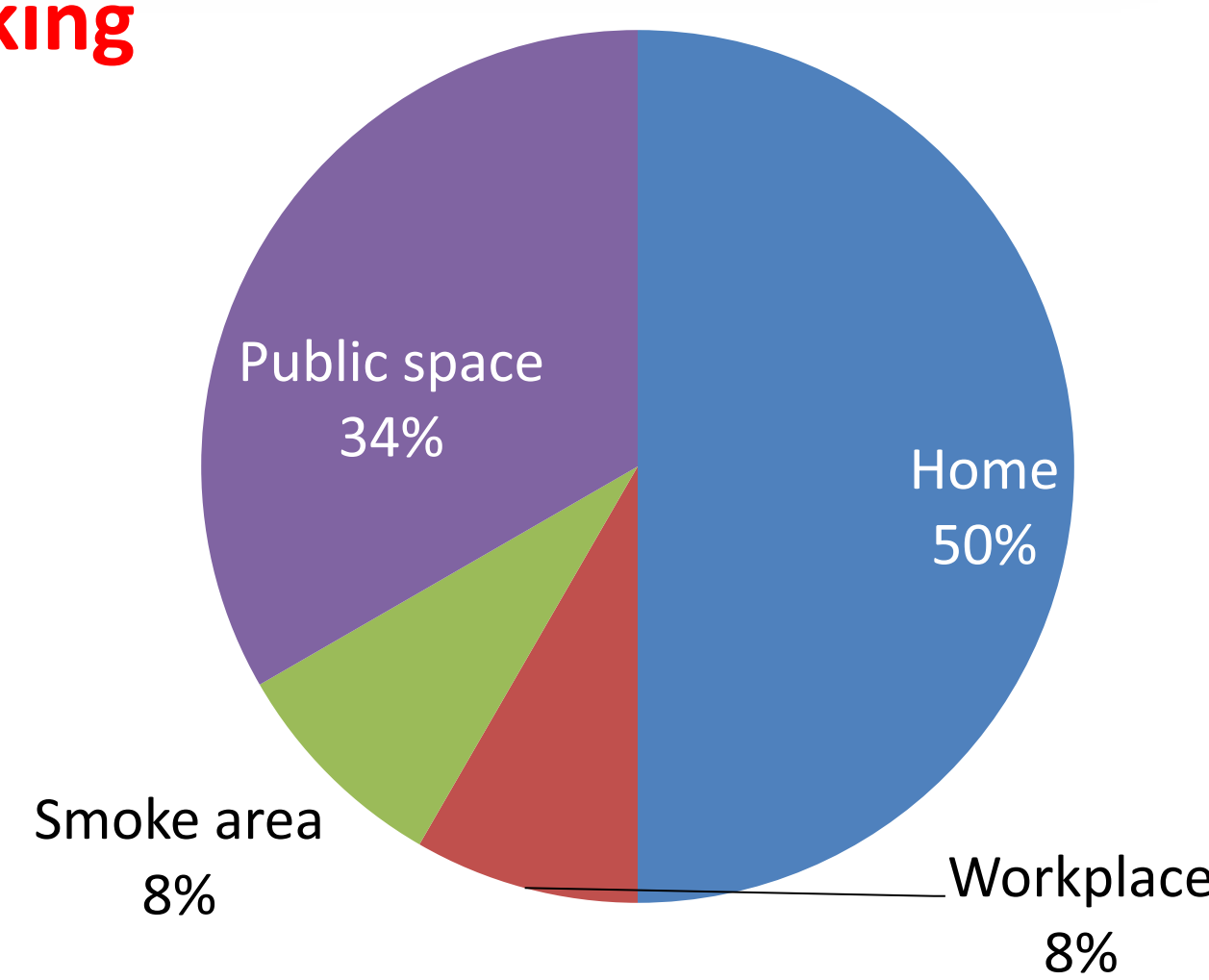


### Usage of tobacco products

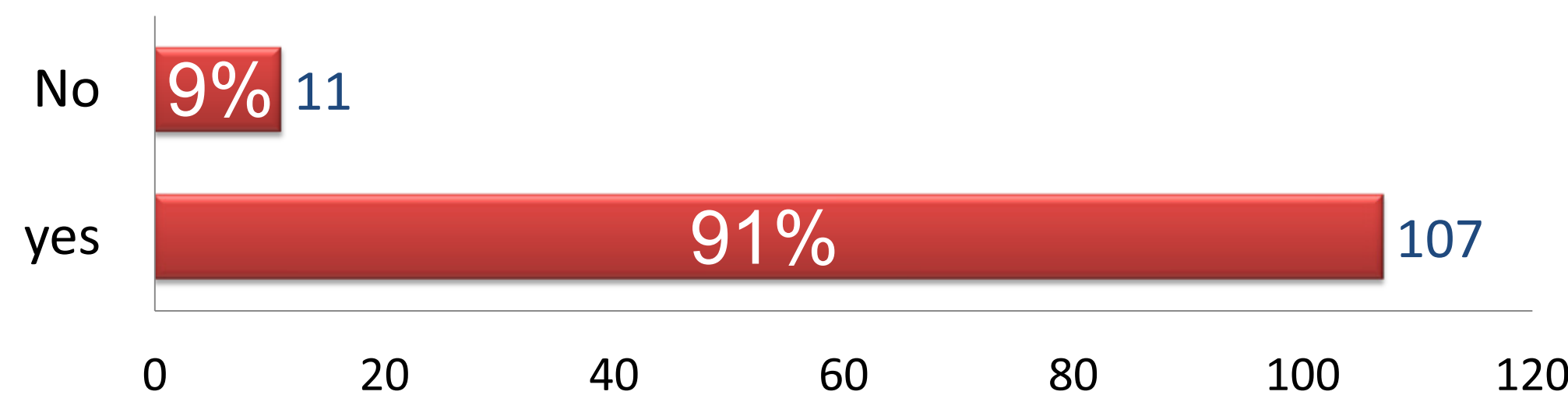


### Users were all male (100%)

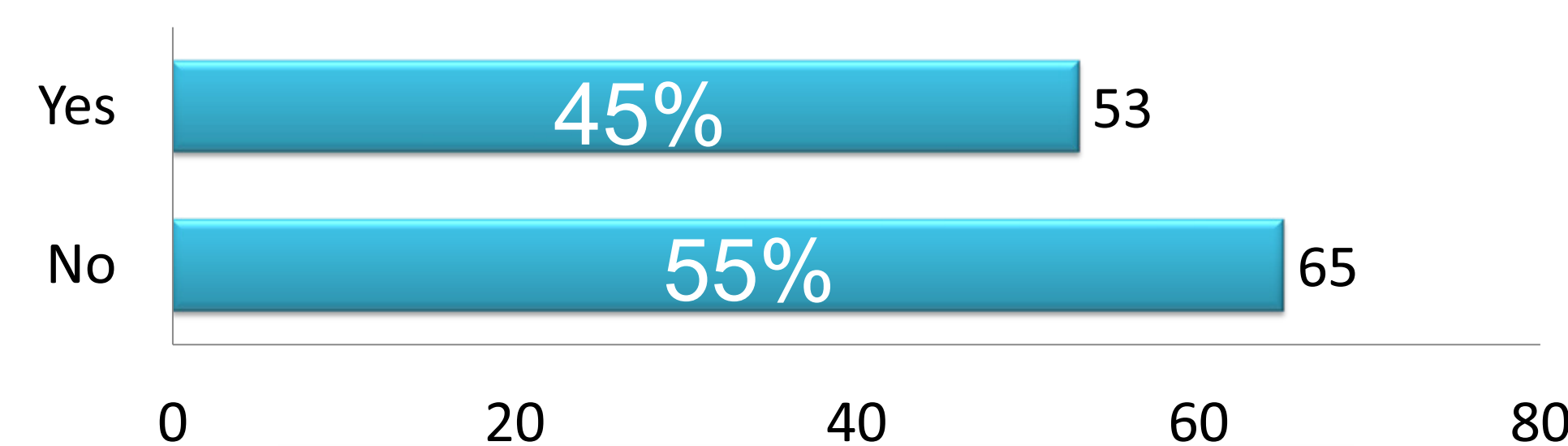
### Place of smoking



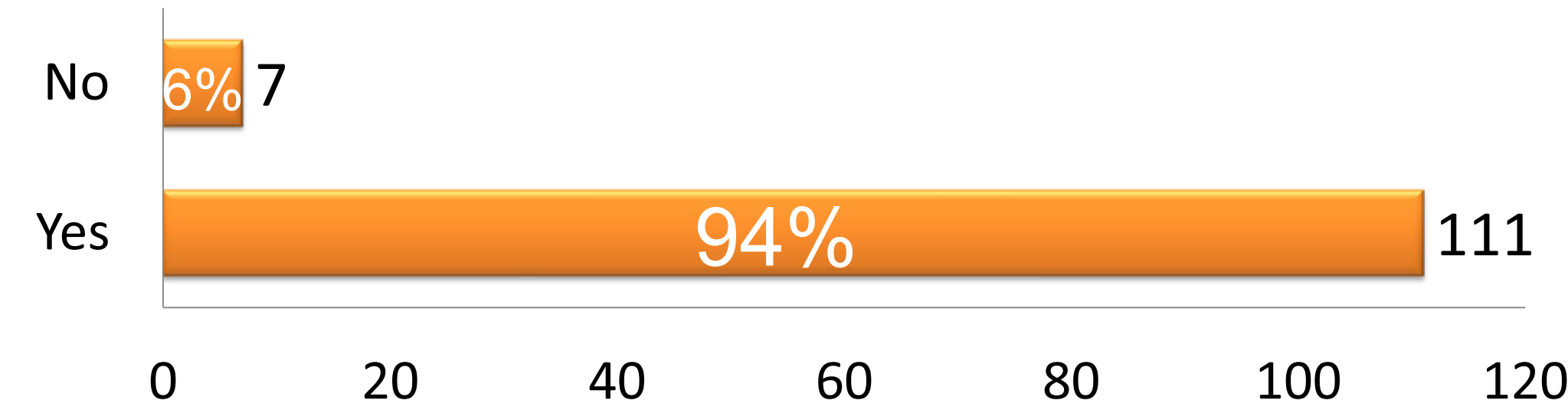
### Role of health Professionals in cessation



### Does the curriculum adequately address the health effects of smoking and cessation?



### Should Health professionals stop smoking



Despite these relatively high rates of tobacco use, there was strong support (94% agreement) for the notion that *health professionals should not smoke and should be a role model for their patients*, and that

*health professionals should assist patients with cessation (91%).*

This latter response is in accord with a survey of dentists in Kelantan, Malaysia, where 99% agreed that they had a responsibility for smoking cessation counseling (Ibrahim et al., Arch Orofacial Sci., 3, p11, 2008).

On the other hand, over half (55%) believed that *the existing curriculum at AIMST University did not provide enough information on smoking*

## Conclusions

These findings suggest that there will be faculty support for strengthening instruction for health science students on how to assist their patients with cessation at AIMST University.

In conjunction with an enhanced referral system for health professionals to refer patients to the national quitline, which is being discussed with Universiti Sans Malaysia,.

**This will represent a small but important step to increase cessation and thus reduce death and disease from tobacco in Malaysia**

