



# Knowledge about tobacco smoking among medical students in Saudi Arabia: Findings from three medical schools

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## KEYWORDS

Tobacco;  
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**Abstract** *Introduction:* Tobacco smoking is the leading cause of preventable death worldwide. Educating and training medical students about tobacco dependence prevention and treatment will prepare them for the task of helping smokers quit. In Saudi Arabia, little is known about medical students' knowledge on this topic.

*Methods:* This study was conducted among 237 medical students (89% response rate) from three medical schools in Saudi Arabia. Students were asked to complete a 55-item questionnaire about the knowledge of smoking epidemiology, smoking cessation practice and benefits, and treatment of tobacco dependence.

*Results:* The majority of the students (91.4%) do not have adequate knowledge about the epidemiology of smoking. Students demonstrated a low knowledge of the health risks associated with tobacco use (average score 53%; SD = 11.6), a fair understanding of the benefits of smoking cessation, and insufficient information about treatment of tobacco dependence. Respondents thought they were adequately prepared to counsel their patients to quit smoking.

*Conclusions:* Medical students in Saudi Arabia are not well informed and trained in tobacco dependence and treatment. It is necessary to address this deficit by prioritizing these topics in medical education curricula.

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## 1. Introduction

Tobacco smoking is the leading cause of preventable death worldwide [1]. Currently, 5.4 million people die from tobacco-related diseases each year and 80% of those deaths occur in developing

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countries. In Saudi Arabia, the prevalence of smoking is approximately 21% among the general adult population and 25% among university students [2]. Tobacco-dependence associated health conditions and quality of life are known to usually improve upon cessation [3–6]; hence, tobacco-dependence treatment and counseling have been recommended to help smokers quit. Physicians can play a critical role in reducing the tobacco burden, as it has been documented in developed countries that even brief advice to the patient can substantially decrease smoking cessation rates [7,8]. A visit to the clinic can be an opportunity for physicians to counsel their patients about tobacco dependence. Lack of proficiency and training about tobacco dependence and cessation methods [9–11], lack of confidence and self-efficacy in counseling skills [9–12], lack of time [11,12], and a health system that does not support tobacco cessation services [12] are among the reasons why physicians do not intervene with patients that use tobacco. Low level of competence in tobacco cessation practice among doctors has been linked to low level of knowledge associated with the smoking cessation practice guidelines among medical students [13]. Medical students as future health care professionals, educators and researchers are in a key position to influence future tobacco cessation and control programs in Saudi Arabia and elsewhere [2,14–16]. There are no published studies that have reported on the extent to which medical students or physicians in Saudi Arabia are knowledgeable about tobacco dependence treatment, and no attention has been paid to the Saudi medical school's core curricula in tobacco education. The objective of this study is to measure knowledge related to smoking-related epidemiology, the harmful effects of smoking, and the efficacy of counseling techniques and pharmacotherapy among medical students from three medical schools in Saudi Arabia.

## 2. Methods

This was a cross-sectional study that was conducted during the 2011–2012 school year among fifth-year medical students enrolled at three medical schools in Saudi Arabia. This study was approved by the institutional Review Board at the sponsoring institution.

### 2.1. Study population

The study was conducted among 237 medical students from the fifth year cohort at three different medical schools from the central (King Saud Bin

Abdul-Aziz University), western (King Abdul-Aziz University), and southern (Jazan University) regions of Saudi Arabia. Medical students in the introductory years were not included in the study because they are still learning the basic sciences, and medical students in their sixth year are hard to reach because they are mostly in clinical rotations and rarely in the classic classroom setting. After obtaining informed consent and explaining the purpose of the study, the questionnaire was completed in about 20 min before the start of a professional skill class. To be eligible, a medical student had to be in the target year for the medical school and understand English. All students who were enrolled in the three medical schools and were present in class during the period of data collection received a copy of the survey and were asked to participate.

### 2.2. Study instrument

The instrument used in this study mostly contained items that were adopted from previous studies conducted among medical students for the same purpose [15–17], in addition to newly developed items related to demographics (Questionnaire available upon request). Students completed a 55-item self-administered questionnaire in English about demographic characteristics, smoking status, knowledge of smoking epidemiology, the practice of smoking cessation counseling, knowledge of treatment of nicotine addiction, and knowledge of the benefits of smoking cessation. The instrument was pilot tested among 20 medical students for validation purposes in terms of clarity and feasibility. Changes related to comprehension and clarity were made based on the pilot results.

### 2.3. Measures

The “demographic characteristics” section of the survey included questions related to age, gender, and marital status of the student, their smoking status, and if they are interested in quitting.

Measures related to the “knowledge of smoking-related epidemiology” included the health risks associated with smoking and exposure to second-hand smoke. Students were asked whether cigarette smoking greatly increases, slightly increases, or does not affect a smoker's risk for many chronic illnesses, such as cardiopulmonary diseases and cancer. They were also asked about the health risks associated with cigarette smoking during pregnancy and the percentage of adults (over the age of 18) who smoke in Saudi Arabia. Other questions

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