Editorial

A question of morality

The proposals of the all-party House of Commons Expenditure Committee (1977) to reduce cigarette smoking include a ban on advertising except at the point of sale, increased health education, and progressive increases in the real price of cigarettes. The Government should either implement these recommendations immediately or state what further evidence is required to justify such a campaign. A recent study (Atkinson and Townsend, 1977) suggests that the reduction in morbidity and mortality that would follow such intervention would affect health service costs only marginally, and the overall Budgetary position would probably be improved, largely because tobacco tax would rise faster than consumption would fall. However, the implication that these agreeable conclusions should influence public policy requires closer examination. The Government now recognises that revenue lost on cigarette taxation could be raised in other ways (Ennals, 1976), and any likely reduction in smoking would be too gradual to cause economic or social disruption, so an effective campaign is certainly a viable option. If the prospect of a marginal improvement in the Budgetary position should persuade a reluctant Government to intervene to reduce smoking, it should presumably act less enthusiastically or not at all if a reduction in tobacco consumption would eventually lead to a substantially lower standard of living. This is not a merely academic point. The average standard of living is the gross consumable national product divided by the consuming population, and Budgetary manipulation can only redistribute wealth. It cannot create or destroy it, except in so far as it encourages or discourages productivity. But whether or not a substantial reduction in smoking would help to balance the Budget, it would certainly reduce average living standards. The diseases caused by smoking usually kill near or after retirement, and the economic contribution of retired people is almost entirely negative. They continue to eat, drink, wear clothes, and occupy houses, and place an increasing burden on the social services. This cannot be offset by the slightly longer average working lives that those who stopped smoking would enjoy, particularly at a time of high unemployment when early retirement is being encouraged. If marginal economic considerations are relevant it therefore seems that we should at least preserve the status quo, and perhaps encourage smoking. This outrageous conclusion is not illogical. It is the implicit moral assumption that is objectionable.

Scientific attitudes now dominate areas of social decision-making that would a hundred years ago have been widely regarded as lying exclusively within the domain of morality or religion. It seems obviously better to discuss the economic consequences of socialist or capitalist policies, the measurable effects of comprehensive and selective education, or the recidivism rate among paroled prisoners than to adopt extreme views on moral grounds. Apparently objective social or political argument must be regarded with some caution, however. The response to research often reflects approval or disapproval of the conclusion rather than appraisal of the underlying argument. The conflict that this can engender was illustrated by the scientific community's reaction to the dubious inference that average intelligence varies widely between races. The data were certainly not decisive, but many who found the conclusion offensive but were unable to disprove it were reduced to pretending that the issue could not in principle be discussed for profound scientific reasons. The demonstration that a particular policy leads to advantageous consequences is mere propaganda unless the opposite policy would be recommended, or at least supported, if the opposite effect were predicted.

Epidemiology reveals that more than 50 000 Britons (slightly more than the number employed in the tobacco industry) are almost certainly killed by smoking each year (Department of Health, 1972), but effective action is delayed while the academic discussion rages, from the extremely implausible assertion that lung cancer is not caused by smoking at all (Burch, 1976) to argument about whether banning advertising, improving health education, or increasing the price of cigarettes would reduce consumption substantially and permanently (Atkinson and Skegg, 1973). Cost-benefit analysis of effective antismoking intervention illuminates the debate, although not in the sense intended by its advocates (Atkinson...
and Mead, 1974; Atkinson and Townsend, 1977). Smoking is economically advantageous, so we must either conclude that it should be encouraged, or assert that such studies are irrelevant, because it is worth paying a considerable price to avoid such a massive toll of morbidity and mortality, and proceed immediately to radical action. It is impossible to predict the effect on consumption of any particular form of intervention with any confidence, but even within ten years many thousands of lives would probably have been saved (Peto, 1976). Banning tobacco advertising and widespread antismoking publicity would certainly do no harm, and it is now generally accepted that progressive real price increases, allowing for inflation, would be effective (Peto, 1974; Royal College of Physicians, 1977). Relatively marginal changes such as the introduction of tobacco substitute may do more harm than good if they are a political substitute for an effective campaign. The tobacco industry encourages smoking, particularly among the young, by every means available, and the suggestion that cigarettes need not be very dangerous should not be tolerated. These ambiguities cannot justify further delay, however. Future research should be largely devoted to evaluation, rather than prediction, of the effects of massive intervention, including nationwide randomised trials of various forms of sustained publicity and methods of smoking withdrawal. A concerted campaign would probably reduce smoking substantially, and the possible disadvantages of a few false starts could hardly exceed the inevitable cost of continued inaction. If the Government refuses to launch such a campaign, the central component of which should certainly be an annual increase in the real price of cigarettes of at least 10%, we must ask what further evidence could conceivably persuade it to do so.

Those who still believe that more research will help the Government to reach a decision should examine the recent White Paper, which rejects or shelves all but the most marginal steps to reduce smoking (Department of Health, 1977). The intellectual level of this depressing document is exemplified by the refusal to restrict publicity:

"Before the Government could support a policy of outright banning of cigarette advertising, the merits of doing so would need to be confirmed beyond doubt." No economic or social projection could conceivably satisfy such a stringent criterion. Scientists can and should exert political pressure, but the campaign will be less effective and scientific standards will be debased if political and scientific activities are not clearly distinguished. A suitable slogan might be that "cigarette advertising should not be allowed unless it can be confirmed beyond doubt that it does not encourage smoking."

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References