

Gutka- A Silent Killer

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Gutka, a form of smokeless tobacco, is a cocktail of tobacco, nicotine, and carcinogens that contains many unhealthy additives such as magnesium carbonate and phenyl ethyl alcohol, along with harmful perfumery compounds including musk ketones and other injurious fragrance compounds (which are known to be dangerous in toiletries). Gutka use is one of the major causes of oral cancer in India, is one of India's most serious social problems, and is also popular in Asian communities in the US.



The use of Gutka, which is as convenient as chewing gum and as sweet as candy, has spread through the subcontinent and also to South Asians in England. The substance is similar to the traditional compound paan, a sloppy mix of lime paste, cardamom, fennel, honey, areca nut, and, often though not always, flavored tobacco, all wrapped in a betel leaf. Gutka is a dried version of paan, without the betel leaf, and preserved and perfumed with chemicals and sealed in a plastic or foil pack. It is placed in the cheek lining, savored, and then expelled. It is widely used, but unlike smoking, it is not considered to be taboo or addictive. Many people don't consider it to be a tobacco product because it is mixed with other spices. Instead, it is commonly viewed as a breath refresher (like chewing gum) and believed to help with digestion. Additionally, gutka also has a high concentration of nicotine. This is why gutka chewers often become addicted to the product, and thus fall prey to the dual harmful effects of areca nut and tobacco.

Gutka is unique in its dangerous combination of tobacco and areca nut. Areca nut is the fruit of the tree *Areca catechu*, a palm with a tall slender stem crowned by a tuft of large, elegant leaves. The fruit, which is orange-yellow in color when ripe, grows in large bunches at the base of the leaves, and the seed is separated by removing the fibrous husk. Areca nut, a main ingredient in gutka, is a stimulant and is dangerous when taken in large quantities. Excessive areca nut chewing over a prolonged period causes oral submucous fibrosis, an irreversible condition that results in restricted mouth opening. Further, the carcinogenic properties of areca nut are exacerbated when taken along with tobacco, the combination present in gutka.

Areca nut chewing is a practice of great antiquity in many parts of Asia and in some Pacific Islands. In India this practice is at least 2000 years old. It is an integral part of the religious and cultural rituals and also of everyday life. In both medical and popular literature it has often been referred to, rather erroneously, as betel nut.

India has 75,000 to 80,000 new cases of oral cancer per year, the world's highest incidence, according to the World Health Organization. Furthermore, 2,000 deaths per day in India are tobacco caused. Doctors and public health scientists say gutka and other forms of smokeless chewing tobacco are to blame. "What caused this boom of oral cancers was this packaging of tobacco," said Dr. A.K. D'Cruz, the head-and-neck surgeon at Tata Memorial Hospital, Mumbai. "Convenience got them hooked." A 1997 survey in Mumbai by the Indian Dental Association found that 10 to 40 percent of school children and 70 percent of college students had taken to gutka and paan masala. The cultural tradition of areca nut chewing compounded by the lack of consideration of gutka as a dangerous tobacco product, presents a unique public health challenge for this population.

Indians have been the fastest growing immigrant group in the United States through the 1990's. In New Jersey the population of the Indian community has doubled in 10 years and the large majority of Indians live in the five New Jersey counties. There are a couple of indicators that gutka use is a problem in New Jersey. A survey by the UMDNJ Asian Indian Health Disparities coalition found that chew tobacco was the most common method of ingesting tobacco among Indians in New Jersey. In the UMDNJ Tobacco Dependence Program Clinic, patients have presented for treatment for gutka dependence. There is no known published literature on the prevalence of gutka use in the United States. It has also been shown that children in new immigrant ethnic communities pick-up the use of gutka. Dependence upon gutka and the resulting health consequences are potentially a major, unmonitored health problem in these growing communities.

Training Opportunities at the Tobacco Dependence Program

June 2-6 and 9-11

8-Day Tobacco Dependence
Treatment Specialist Training

*Participants other than NJ Quitcenter
staff may take June 2-6 for 5 days of
training.*

August 8

1-Day Training
"Integrating Tobacco
Dependence Treatment into
Your Professional Practice"

*For more information about these
and other training opportunities,
and to register for training,
please visit our website,
www.tobaccoprogram.org*

