Prevalence of tobacco and e-cigarette use among adults in the WHO European Region in 2024

World Health Organization
European Region

Overview

The estimated **prevalence of current tobacco use decreased** from 35 per 100 adults (34.9%) in 2000 to 24 per 100 (24.1%) in 2024 *(1)*.

2000	2024
34.9%	**24.1%**

An estimated **173 million people in the WHO European Region were current tobacco users in 2024** (down from 234 million in 2000).

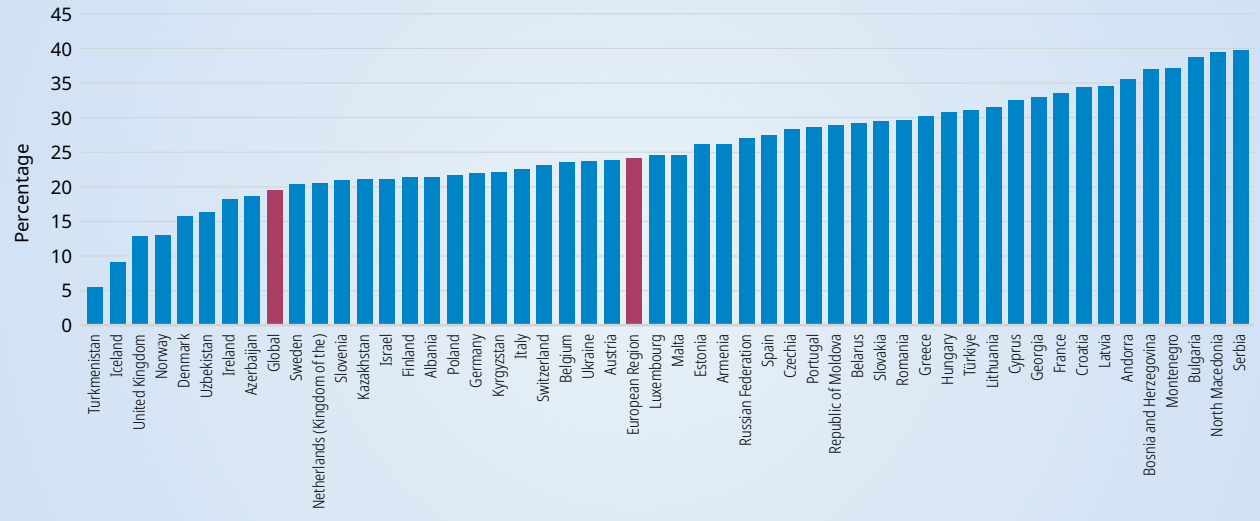
2000	2024
234M	**173M**

Modelling shows that the European Region will have **a relative reduction in rates** between 2010 and 2025 of only 19%, in comparison with the target of the *WHO Global action plan for the prevention and control of noncommunicable diseases 2013–2020* of a 30% reduction in global prevalence *(2)*, and is projected to have the highest prevalence rate of tobacco use globally by 2030, of just over 22%.

The European Region is the only WHO region not expected to reach the female 30% relative reduction target by 2025. The reduction is exceptionally low among women at 12% – the target value needed is 13.7% or less by 2025 – while the projected prevalence sits at 17.3%.

Fig. 1 shows the current age-standardized prevalence rates in countries in the Region. As the figures are age-standardized, they should be used only for drawing comparisons among countries and must not be used to estimate the absolute numbers of current tobacco users in a country.

Fig. 1. Current rates of tobacco use among people aged ≥ 15 years; age-standardized prevalence (both sexes combined), estimates for 2024



Notes: no data were available for three countries: Monaco, San Marino and Tajikistan.
Source: WHO *(1)*.

In 2024, the prevalence of current tobacco use among people aged 15 years and older varied widely across countries. The global age-standardized average stands at 19.5%, while in the WHO European Region it is higher, at 24.1%. Some countries, such as Iceland, Norway, Turkmenistan and the United Kingdom report comparatively low levels of tobacco use (below 15%). In contrast, prevalence exceeds 30% in several countries such as Bulgaria, North Macedonia and Serbia, where tobacco use rates remain among the highest in the Region.

Burden of tobacco use by gender

2000	2024	2000	2024
47.5%	**30.8%**	**22.3%**	**17.4%**
157M	111M	77M	63M

WHO has estimated that the number of male tobacco users has consistently declined since the year 2000 and reached about one third of men (30.8%) in 2024. Male current tobacco users in 2024 numbered 111 million, a reduction from about 157 million (47.5%) in 2000; the number is expected to continue to decrease to about 109 million (30.3%) by 2025 and further to 101 million (27.9%) by 2030.

WHO has estimated that about one fifth of women (17.4%) in the European Region used tobacco in 2024. Female current tobacco users in 2024 numbered 63 million, a reduction from about 77 million (22.3%) in 2000; the number is expected to continue to decrease to about 62 million (17.3%) by 2025 and to 59 million (16.7%) by 2030.

Almost all (97% of male and 99% of female) tobacco users in 2024 were smokers of cigarettes or other forms of smoked tobacco. Among females globally, the highest smoking prevalence is 17.2% in the European Region, which is almost double the next highest prevalence for females; 9.1% in the Region of the Americas. The 62 million female smokers in the European Region represent over 40% of the 143 million female smokers in the world.

A further 1.2% (9 million) of people aged ≥ 15 years in the European Region used smokeless[1] tobacco, of whom 2% (7 million) were men and 0.5% (2 million) were women.

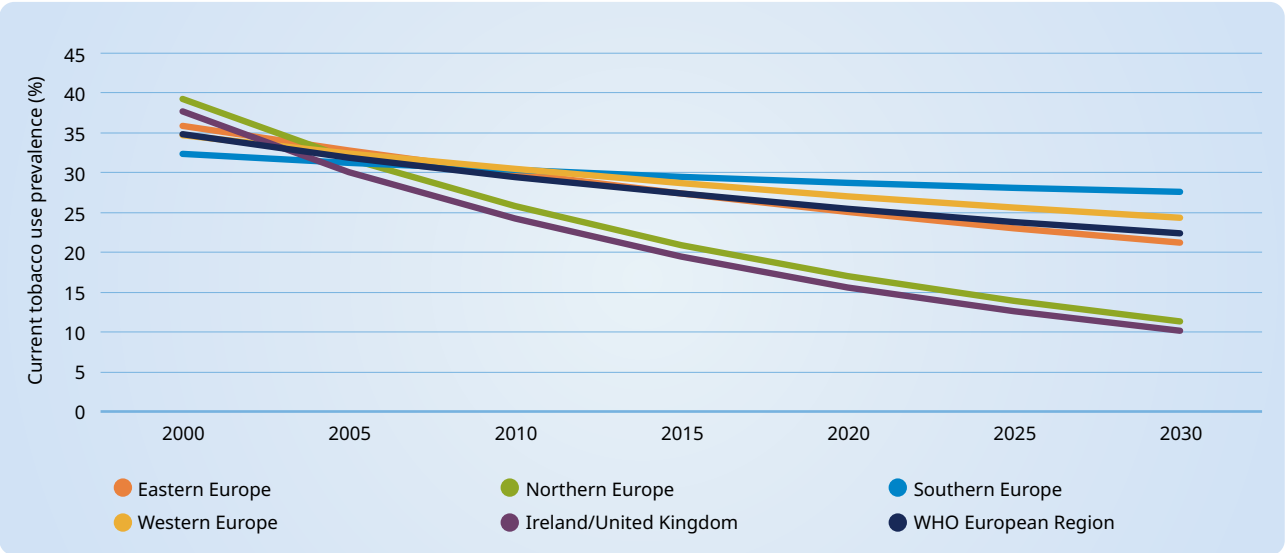
Burden of tobacco use by subregions

Fig. 2 shows the trends in current tobacco use prevalence from 2000 to 2030 across different European subregions.[2] Overall, tobacco use has steadily declined in all regions, although at varying rates. The sharpest declines are seen in northern Europe and Ireland/the United Kingdom, where prevalence is predicted to drop from around 38% in 2000 to around 10% by 2030. Eastern and western Europe show moderate reductions, predicted to fall from roughly 35% to around 20–25%. In contrast, southern Europe demonstrates the slowest decline, predicted to decrease only slightly from about 32% to 27% over the same period. The overall trend for the WHO European Region closely mirrors that of western and eastern Europe, showing a steady downward trajectory toward approximately 22% by 2030.

1 Examples of smokeless tobacco products include products for oral and nasal use. The most commonly used forms of smokeless tobacco in the WHO European Region are snus, a moist to semi-moist ground, oral smokeless tobacco product, and *nasvay*, a type of smokeless tobacco for oral use that is produced and used mainly in central Asian countries.

2 The grouping of countries into their repsective subregions is based on that in the *WHO global report on trends in prevalence of tobacco use 2000-2024 and projections 2025-2030 (1).*

Fig. 2. Current tobacco use prevalence trends in the European Region subregions, 2024



Notes: eastern Europe subregion: Armenia, Azerbaijan, Belarus, Bulgaria, Czechia, Estonia, Georgia, Hungary, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Poland, Republic of Moldova, Romania, Russian Federation, Slovakia, Tajikistan, Turkmenistan, Ukraine and Uzbekistan; northern Europe subregion: Denmark, Finland, Iceland, Norway and Sweden; southern Europe subregion: Albania, Andorra, Bosnia and Herzegovina, Croatia, Cyprus, Greece, Israel, Italy, Malta, Montenegro, North Macedonia, Portugal, San Marino, Serbia, Slovenia, Spain and Türkiye; and western Europe subregion: Austria, Belgium, France, Germany, Luxembourg, Monaco, Netherlands (Kingdom of the) and Switzerland.

Source: WHO *(1)*.

Prevalence of e-cigarette use among adults

In the WHO European Region the **prevalence of current e-cigarette use among adults is the second[3] highest globally at 4.6%** (5.1% among males and 4.2% among females), based on a survey coverage of around 88% of the population aged ≥ 15.

The estimated **number of adult e-cigarette users is 31.4 million** (16.6 million among males and 14.7 million among females).

Among the countries with data, the highest current e-cigarette use prevalences were reported in Serbia (18.4% in 2023), Luxembourg (17% in 2023), Croatia (12.0% in 2023), Ireland (11.2% in 2024) and Czechia (11.1% in 2023). All other prevalences are at 10% of adults or lower. The lowest prevalences reported from surveys undertaken since 2021 were in Hungary, Portugal and Romania (each at 1% in 2023) *(1)*.

Deaths attributable to tobacco use

In some European Region countries up to 20% of deaths due to **noncommunicable diseases (NCDs)** in 2023 were attributable to tobacco use, with a Regional median of 13%: therefore one in five premature deaths due to NCDs could be avoided if tobacco use was eliminated in these countries *(3)*.

Across the 53 countries of the WHO European Region, between 7% and 20% of deaths due to NCDs are attributable to tobacco.

The proportion of deaths due to NCDs that are attributable to tobacco use varied from 9% to 29% for men and from 3% to 14% among women. In all, 1 115 000 deaths from NCDs in the Region were attributed to tobacco use in 2023 (847 000 among men and 268 000 among women).

The proportions of deaths from **cardiovascular diseases** (e.g. heart diseases, stroke) due to tobacco use are estimated to be between 9% and 31% for men and between 2% and 10% for women in European Region countries. In 2023, 486 000 deaths from cardiovascular disease in the Region were attributed to tobacco use (373 000 among men and 113 000 among women).

3 The highest prevalence is in the Region of the Americas at 4.8%.

The proportion of **deaths due to cancer** that are attributable to tobacco use varied between countries in the Region from 13% to 41% for men and from 2% to 21% for women. Overall, the percentage of deaths from neoplasms in the Region attributed to tobacco use in 2023 ranged from 9% to 31%, with a median of 20%. In total, 467 000 deaths from cancers were due to tobacco (358 000 among men and 109 000 among women).

In 2023, tobacco use accounted for between 41% and 75% of tracheal, bronchus and lung cancer deaths (13% to 62% among females and 50% to 84% among males) across countries in the WHO European Region, with a median of 64%. In all, 292 000 deaths from tracheal, bronchus and lung cancers were attributed to tobacco use (222 000 in men and 70 000 in women).

What should be done?

- More countries should monitor all forms of tobacco use, including new and emerging nicotine and tobacco products such as electronic nicotine delivery systems, electronic non-nicotine delivery systems, nicotine pouches and heated tobacco products.
- Countries are encouraged to use standardized protocols and questions in tobacco surveys to monitor key tobacco control indicators. Standardization ensures comparable data over time and across countries.
- Country capacity for preparing and implementing surveys and disseminating and using the data for the monitoring and evaluation of policy should be strengthened.
- Countries should integrate tobacco surveillance programmes into national, regional and global health surveillance programmes to ensure that data are comparable and can be analysed at regional and international levels, as appropriate *(4).*

References[4]

1. WHO global report on trends in prevalence of tobacco use 2000-2024 and projections 2025-2030. Geneva: World Health Organization; 2025 (https://iris.who.int/handle/10665/383060). License: CC BY-NC-SA 3.0 IGO.
2. Global action plan for the prevention and control of noncommunicable diseases 2013–2020. Geneva: World Health Organization; 2013 (https://iris.who.int/handle/10665/94384).
3. GBD Results [online database]. Seattle: Institute for Health Metrics and Evaluation; 2025 (https://vizhub.healthdata.org/gbd-results/).
4. WHO Framework Convention on Tobacco Control [website]. World Health Organization; 2025 (https://www.who.int/fctc/en/).

4 All references were accessed 14 November 2025.

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