

This is the most recent report on the efficacy and value of e-cigarettes and another reason not to restrict their use on the basis of a theoretical risk to bystanders, as proposed in HB 4115.

Joel L Nitzkin, MD

(the tall doctor from New Orleans that testified on this topic at the February 5 Committee hearing)

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From: **Siegel, Michael** Date: Mon, Feb 10, 2014 at 7:38 AM

Subject: Most Recent Data from UK Points to Substantial Public Health Benefits of Electronic Cigarettes

To:

This commentary appears today on my tobacco policy blog, at:

<http://tobaccoanalysis.blogspot.com/2014/02/most-recent-data-from-uk-points-to.html>.

### **Most Recent Data from UK Points to Substantial Public Health Benefits of Electronic Cigarettes**

While most anti-smoking organizations continue to oppose electronic cigarettes, warning of the hypothetical risks of these products, new [data](#) from the UK suggest that in real life, e-cigarettes are producing substantial public health benefits.

Recent data (Monthly tracking of key performance indicators; Electronic cigarettes in England - latest trends) from the *Smoking Toolkit Study* (Cancer Research UK, UK Centre for Tobacco Control Studies) reveal the following critical points:

1. The use of electronic cigarettes has increased dramatically, ever since the fourth quarter of 2011.
2. Precisely coincident with the rise in electronic cigarette use in the UK has been a significant increase in quit smoking attempts.
3. Electronic cigarettes have surpassed nicotine replacement therapy (NRT) and other drugs as the most commonly used smoking cessation method.
4. Overall motivation to quit has increased since the dramatic rise in e-cigarette use.
5. The majority of dual users (e-cigarettes and cigarettes) are using e-cigarettes every day, and half are using at least two cartridges/disposables per day.
6. Very few nonsmokers or long-term ex-smokers are using electronic cigarettes.

Report STS140122 (Electronic cigarettes in England - latest trends) draws the following conclusions:

- The increase in electronic cigarette use prevalence may have stalled;
- There is no evidence that electronic cigarettes are undermining motivation to quit or reduction in smoking prevalence; and
- Use of e-cigarettes by never smokers or long-term ex-smokers is extremely rare.

### **The Rest of the Story**

Based on these most recent data from the UK, it appears that there just is not evidence to support the wild contentions that anti-smoking groups, advocates, and health agencies like the CDC and World Health Organization are disseminating to the public. Contrary to what Stan Glantz is telling the press, there simply is no evidence that the use of electronic cigarettes is undermining smoking cessation or impeding the decline in smoking prevalence. Nor is there evidence that electronic cigarettes are causing nonsmokers or ex-smokers to return to cigarette smoking. Moreover, there is no evidence that dual use is decreasing the motivation of smokers to quit or precluding these smokers from reaping any health benefits.

In contrast, however, to the lack of evidence that electronic cigarettes are having any negative public health effects, there is strong evidence to suggest that these products are having a substantial positive public health impact. In particular, there is evidence that not only do these products help many smokers quit smoking, but more generally, they increase population interest in smoking cessation, enhance levels of motivation to quit smoking, and lead to increased quit attempts among current smokers.

The only bad news coming out of the actual data is that the efforts of anti-smoking groups and advocates appear to be working: they are being successful in discouraging smokers from trying to quit smoking using electronic cigarettes. Ironically, the results of public health efforts have been to impede smoking cessation, lower the overall motivation of smokers to quit, and decreasing the number of quit attempts among current smokers.

In other words, the anti-smoking movement is violating the first principle of public health practice by doing public health harm.

While it is difficult for me to have to criticize anti-smoking groups because these are groups with which I have had a career-long collegial relationship, it appears that these groups are substantially harming the health of the public by impeding smoking cessation. Sadly, this means that their efforts are going to result in a significant amount of unnecessary disease and death.

This is not the way public health is supposed to be. But this is what happens when an abstinence-only mentality takes over in any area of public health, whether it be nicotine addiction or heroin addiction.