



Chair Meek, Vice Chair McClain, and members of the committee-

Thank you for the opportunity to submit testimony in support of SB702 to the Finance and Revenue Committee on the importance of restricting the availability of flavored tobacco in the State of Oregon.

The Oregon Thoracic Society is made up of lung and ICU doctors, thoracic surgeons, respiratory therapists, and other health care professionals on the frontline of caring for patients with respiratory diseases, including people sickened by the tobacco and nicotine industry. Please see our earlier written testimony on the health benefits of this bill. We submit this testimony to include the financial toll of nicotine addiction and why it is vital to take action to restrict the availability of menthol and other flavored nicotine products.

Personal costs of menthol, flavored nicotine, and cigarette smoking

There is a popular misconception that people choose to be addicted to nicotine and can easily choose to stop when they decide to or when it starts to affect their health. Most of the patients we care for as adults want to quit and have made multiple attempts to do so. Those who start under the age of 21 have the hardest time. This bill does not take away the wide availability of unflavored e-cigarettes, nicotine gum, lozenges, pouches, or any FDA approved therapy. The goal of restricting availability of menthol and flavored nicotine is to prevent hooking and addicting new clients of the nicotine industry and to make it easier for people to quit.

Tobacco use costs people a great deal- from lost work days, fees for imaging, medications, doctors appointments, not to mention the money spent on cigarettes and the money spent on medications and procedures because of those cigarettes. Flavored nicotine costs people at a personal level - flavors like menthol make it harder to quit smoking or vaping. Like inhaling a cough drop with every breath, menthol and synthetic non-flavored cooling agents numb the lungs and mask the natural coughing and anti-irritant response the lungs would normally have to inhaling toxins such as those in tobacco smoke and e-cigarette vapor. This enables users to inhale more, inhale deeper and more frequently, and inhale more of the dissolved addictive substance in the vapor, such as nicotine. Among middle and high school students, menthol smoking was associated with greater smoking frequency and intention to continue smoking, compared to non-menthol smoking. Youth menthol smokers have significantly higher levels of measures of dependence, and initiation with a menthol-flavored cigarette is associated with a higher relative risk of daily smoking. We care for adults who suffer from lifelong addiction to menthol cigarettes, addictions that started often as children. Menthol restrictions have led to increased quit rates in those addicted to menthol cigarettes. Following the 2017 ban on menthol in Canada, menthol smokers were more likely to attempt to quit and to succeed in quitting than non-menthol smokers. Furthermore, there was no evidence of development of an outsized illicit or illegal market.

E-cigarette are not safe, and flavors add risk-

Flavored e-cigarette availability encourages new users to start using e-cigarettes, and e-cigarettes are not safe. Unflavored or tobacco flavored e-cigarettes may represent a path to quitting combustible cigarettes for those addicted to cigarette smoking. Those who are able to completely switch from combustible cigarettes to e-cigarettes likely lower their health risks. However, e-cigarettes still adversely affect the health of the lungs. They should not be promoted to non-smokers, and adding flavoring chemicals in



addition increases these risks. Exclusive e-cigarette use, even in those who do not use combustible or “regular” cigarettes, is associated with double the risk of chronic obstructive pulmonary disease or COPD, which is a deadly and costly illness. While we can only hope that exclusive e-cigarette use will be safer long term than combustible cigarettes, there is no reason to encourage new users to begin a harmful habit or to make it an easier habit to prolong through the use of flavors.

Long before vaping oils came along, interstitial lung diseases from inhaling a variety of chemicals has been well-described. Caring for these lung diseases is expensive, and they can result in permanent lung scarring that leaves people with respiratory disability and limited work options. Please see our prior testimony about the additive health risks when flavoring chemicals are added to e-cigarettes. The e-cigarette industry will claim that lung injury from e-cigarettes occurs only from THC containing products, and this is not true. It can also happen from e-cigarette use alone. Furthermore, e-cigarettes both flavored and unflavored affect the immune system of the lungs, increasing the risk of severe respiratory illness when combined with common infections, viruses, and more.

While we do not yet have cost estimates for the toll of exclusive e-cigarette use, it is also important to realize that people who would not normally be at risk of taking up a smoking habit, including children, if starting with a flavored e-cigarette are more likely to later smoke combustible cigarettes. Furthermore, it is not financially wise for the state to permit using flavors to attract even adults to a new habit that is associated with a doubling of the risk of COPD or an increased risk of hypertension.

Cost to Business and Community

It is not only our patients and their families who suffer the costs of these products and the illnesses that result. It hits our businesses, too. For example, people with COPD are more likely to miss work, have decreased work performance, and require short or long term disability. This not only hurts their incomes, it hurts their businesses or those of their employers and decreases state tax revenue. The healthcare cost for patients with COPD is also shared, paid not only by them directly, but the wider community in the form of healthcare premiums whether private or governmental. The total COPD specific cost per person is around \$4332 per person per year.

Avoid repeating history

We all have seen too many lives lost to the nicotine and tobacco industry. It is impossible to watch the next generation getting addicted to nicotine and do nothing to stop it. Menthol cigarettes are deadly, and we know that when they are harder to get and sold in fewer places, people quit without a significant illicit market developing. We know that kids seek the flavors and are influenced by seeing them widely available near candy in gas stations, convenience stores, and more. Flavored e-cigarettes are marketed to those at risk of eating disorders as a “low calorie” way to obtain sweets. Candy is already addictive and unhealthy enough for kids without putting nicotine in it. If these products are harder to get, kids are less likely to start to use them and current users are more likely to quit. Furthermore, many children do respect the adults in their lives and the laws of their State. If something is illegal and not sold at every corner store and gas station at eye level right above the candy, it will carry more of the message that it is not a safe product. The restriction of places where these can be purchased is an important feature of this bill and one of its strengths. We were disappointed to not see a comprehensive flavored nicotine ban, but at least restricting sale locations is an improvement over the status quo, where any child can walk into a gas station or a corner store and see ads and devices targeted at them. The history of restricting flavors



shows that all use falls, which ultimately prevents people from needing the services of the respiratory therapists, lung doctors, ICU doctors and other health professionals of our state. We love what we do, and we are here when the public needs us, but our goal is that fewer people need our services when we can prevent it.

Bottom Line:

The American Thoracic Society has found that: “Flavors are an essential element of the tobacco industry’s efforts to hook people on tobacco products. No one inherently wants to use tobacco-flavored tobacco. Candy, fruit or sweetened flavors lure youth to try tobacco products, mask the harshness of tobacco products and enable naive users to consume tobacco products until they become addicted. Without characterizing agents, the lure of tobacco products would be significantly reduced – much to the benefit of public health.”

The Oregon Thoracic Society encourages passage of SB702 to protect Oregonians from addiction and disease, save lives, and decrease overall healthcare expenditures and improve the economy in the State of Oregon.

Dr. Ethan Corcoran, MD, PhD- President
Dr. Bradford Glavan, MD- President-elect
Dr. Ryan Clay, MD- Secretary
Dr. Karen Wesenberg, MD- Past President
Dr. Erika Moseson, MD- Chapter Representative

Executive Committee of the Oregon Thoracic Society

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