

Tina Kotek, Governor

Date February 26, 2026

TO: The Honorable Ben Bowman, Chair
House Committee on Rules

FROM: Dean Sidelinger, MD, MEd, Health Officer and State Epidemiologist
Office of the State Public Health Director
Public Health Division
Oregon Health Authority
971-673-0716

SUBJECT: SB 1571 A – Protecting Youth by Closing Gaps in Tobacco Prevention Laws

Chair Bowman and members of the House Committee on Rules, on behalf of Oregon Health Authority (OHA), I am writing in support of SB 1571 A which would align state tobacco laws to comprehensively regulate tobacco product sales and decrease youth access to addictive nicotine products.

Every year in Oregon, tobacco use causes over 8,000 deaths. It also costs \$5.7 billion in health care and lost productivity due to illness, disability, and early death. Consistent, comprehensive and equitable regulation of tobacco and nicotine products can reduce the number of Oregon children and young adults that become addicted to tobacco, help current tobacco users quit, and reduce health care costs and deaths.

Oral nicotine products, such as nicotine pouches, gum, tablets, and gummies are not currently covered by Oregon’s public health tobacco retail laws and can lead to adolescent nicotine addiction. These products are heavily marketed, including in youth-friendly flavors like ‘cool mint’, ‘citrus burst’, ‘refreshing chill’ and ‘wild berry’. Nicotine pouches are the fastest-growing product on the U.S. tobacco market. Nationally, oral nicotine pouches became the second most used tobacco product among U.S. middle and high school students in 2024. In Oregon, nearly 3% of youth ages 15-18 currently use oral nicotine pouches, and 78% of those youth reported using flavored pouches. OHA is concerned about these products following the same trajectory as e-cigarettes, as data show pouches are now the second most popular nicotine product among youth.

Oregon has the tools to effectively enforce tobacco laws, but synthetic and tobacco derived nicotine products are not included in the state’s public health regulatory structure. While selling oral nicotine products to underage people violates federal law, Oregon lacks a comparable state law. OHA’s enforcement of federal restrictions is limited by Oregon law’s definition of “tobacco products.” This means that state inspectors are unable to respond to complaints by parents and community members about these products being sold to people under 21 years old. SB 1571 A fixes this gap.

In 2021, the Oregon Legislature created the Oregon Tobacco Retail License (TRL) Program to hold retailers accountable to tobacco retail sales laws. Since the program’s inspections began in 2022, the state has seen significant declines in sales to underage people – from 26% of retailers selling illegally in 2022 to only 11% of retailers in 2025. In its first four years of operation, TRL has proven highly effective at reducing youth access to the products it regulates – but synthetic and tobacco-derived nicotine products are not under the program’s jurisdiction. The Oregon TRL Program inspects every tobacco retailer every year to ensure they aren’t selling tobacco to underage people. The program’s inspections are more comprehensive than the U.S. Food and Drug Administration’s (FDA) inspections. Many retailers are already following federal law, but SB 1571 A would give OHA the tools to enforce sales age restrictions and make sure all retailers are held to the same standard.

Of note, tobacco derived, or synthetic lab-made nicotine products are not designed to help people quit smoking nor minimize negative health impacts. The FDA considers oral nicotine products to be commercial tobacco products and has not approved them as a medication for quitting nicotine addiction.

OHA supports SB 1571 A because it takes important steps toward reducing youth nicotine addiction and reducing tobacco-driven health inequities.

Sincerely,



Dean Sidelinger, MD, MEd
Health Officer and State Epidemiologist
Office of the State Public Health Director