

Some smokers successfully switch to electronic cigarettes

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(Medical Xpress) -- While electronic cigarettes may be a long-term alternative to the real thing for some smokers, Penn State College of Medicine researchers suggest medical providers should continue to encourage more traditional smoking cessation methods.

The researchers investigated this growing phenomenon through a survey of 104 long-term e-cigarette users. E-cigs typically consist of a cigarette-shaped device with a battery, a heating element and a cartridge containing propylene glycol and nicotine. Users puff on the mouthpiece to activate a circuit that heats the atomizer and produces avapor. The users then inhale.

"If some smokers have difficulty overcoming both <u>nicotine dependence</u> and long-term habit change, then surely one solution is to help them avoid most of the <u>health risks</u> with only a minimal alteration in their nicotine-seeking habit," said Jonathan Foulds, Ph.D., professor of public health sciences and psychiatry. "This implies a <u>nicotine replacement</u> device that looks like a cigarette and delivers nicotine like a cigarette, but does not deliver the tar and carbon monoxide that cause the vast majority of smoking-caused disease."

The study found that 78 percent of long-term users were no longer using tobacco and planned on using their e-cig instead. Interestingly, only 8 percent were using the most widely marketed style of cigarette-shaped e-cigs. Most had learned that these do not deliver adequate nicotine and had used online forums and personal experience to find out which types



of e-cigs deliver a satisfying effect capable of keeping them off real cigarettes, the researchers reported in a recent issue of the <u>International</u> <u>Journal of Clinical Practice</u>.

"These products initially seemed to be something of a gimmick and likely to be banned by the FDA," said Foulds. "However, they are continuing to be popular and at least some smokers appear to find them helpful. However, we just don't have enough information on their long-term safety and effectiveness for clinicians to recommend them.

"Until that research has been carried out, I would advise smokers to use proven treatments. The treatments that have been proven to work include counseling (e.g. available for free via 1-800-QUIT NOW), nicotine replacement, bupropion or varenicline."

An additional problem with e-cigarettes, Foulds said, is that there appears to be poor quality control. Some sold as "high nicotine" appear to deliver very little nicotine, and there are concerns about the quality of the labeling and instructions.

"I am particularly concerned that a child may be poisoned by drinking the flavored liquid designed for e-cigarettes," Foulds said. "These types of products have the potential to help smokers to quit, but right now tighter quality control and regulation is needed."

Foulds also noted that the sample of e-cig users participating in the study were not representative of all e-cigusers, but were a self-selected subsample of enthusiasts who have used the products, on average, for over a year.

Other researchers are Arthur Berg, Ph.D., and Susan Veldheer, both of the Department of Public Health Sciences.



Provided by Pennsylvania State University

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