

Knee-jerk vaping bans will fail public health, experts argue

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Bans and other policies restricting e-cigarette sales could do more public harm than good, according to a group of public-health, tobacco-policy and ethics experts.

In a piece published online today in the journal *Science*, the authors, including three public health deans, caution that blanket policies developed in a rush to address two different concerns come with dangerous downsides—most notably the risk of taking away a powerful tool to help smokers quit.

"Illnesses and deaths, which appear to be related to [vaping](#) illicit THC oils, have caused justifiable alarm as has the rise of young people who are vaping nicotine. But in our response we must not lump together these troubling developments and fail to consider the powerful evidence supporting the availability of legal nicotine products," said lead author Amy Fairchild, dean of The Ohio State University College of Public Health.

In *Science*, she and her co-authors write that "Restricting access and appeal among less harmful vaping products out of abundance of caution while leaving deadly combustible products on the market does not protect public health. It threatens to derail a trend that could hasten the demise of cigarettes, poised to take a billion lives this century."

The paper comes after the emergence this year of vaping-related lung injuries and deaths throughout the U.S. The Centers for Disease Control and Prevention has reported 2,291 cases of serious lung injury and 48 deaths as of last week. Authorities have identified vitamin E acetate, a THC-product additive, as a "chemical of concern" and said that many of the products appear to have been acquired through informal sources—not from retail establishments selling products directly from known manufacturers. THC, or Tetrahydrocannabinol, is the primary psychoactive component of marijuana.

Many policymakers and organizations including the American Medical Association have called for an across-the-board ban on vaping, and some municipalities and states have moved to ban either all vaping products or

those with flavors other than tobacco flavoring, including menthol.

Fairchild said that vaping policy discussions and debates should include an examination of the immediate crisis in the context of all of the [scientific evidence](#) regarding the risks and benefits.

"There are important distinctions to be made between nicotine and THC products, between products manufactured by reputable companies and those sold on the black market, and between the potential risks and benefits to adolescents and to adults," she said.

Drawing comparisons to initial reluctance to offer needle exchange programs that promote safety by preventing life-threatening infections for people who aren't ready to quit heroin, the authors write that evidence about harm reduction should outweigh emotional responses.

"We should be careful to remain aware of the unintended consequences of extreme measures and the important lessons that harm reduction has provided us in areas such a heroin use, HIV prevention and alcohol control," said co-author Cheryl G. Heaton, dean of New York University's College of Global Public Health.

The authors point to research showing that not only vaping—but flavored products, in particular—can help adult smokers quit and provide a more effective and appealing option than nicotine replacement therapy.

They urge continued efforts to better understand the risks and benefits of vaping and call for regulatory measures that strike a balance between "making regulated nicotine vaping products available to smokers while adopting forceful measures to limit the risks to and use by youth as much as possible."

Among their suggestions to combat youth use: Implementation and enforcement of laws that restrict purchases to those 21 and older and prohibitions against predatory marketing to children and teens.

They call for the U.S. Food and Drug Administration to implement a product monitoring system and for a surveillance system to detect unanticipated harm early.

Regulatory bans on the menthol front should start with cigarettes and inexpensive little cigars, not with nicotine vape products, they argue.

"Despite two FDA-derived reports that recommended a ban on menthol in combustibles, there has been policy paralysis in the face of appalling evidence," they write, citing statistics showing that more than half of young people and more than 90 percent of African-American youth start smoking with menthol.

Fairchild and her co-authors stress that they take the illnesses and deaths due to vaping seriously but emphasize that each day more than 2,500 U.S. teens start smoking and about 1,300 adults die due to cigarettes. Taking vaping—including flavored products—away as a smoking-cessation and harm-reduction tool now will amount to a public health failure, they argue.

"It is crucial to identify the source of serious lung injuries and closely monitor and regulate the vaping industry—including how it markets its products to young people," said co-author James Curran, dean of the Rollins School of Public Health at Emory University.

"But the evidence so far supports continuing to allow nicotine vaping as a harm-reduction alternative to smoking, which remains the largest preventable cause of death and disability in our country."

More information: A. Fairchild at The Ohio State University in Columbus, OH et al., "Evidence, alarm, and the debate over e-cigarettes," *Science* (2019). [science.sciencemag.org/cgi/doi ... 1126/science.aba0032](https://science.sciencemag.org/cgi/doi/10.1126/science.aba0032)

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