

ACSH's written testimony to the Los Angeles City Council re: e-cigarette legislation

February 22<sup>nd</sup>, 2014

# This submission concerns the following items to be taken up by the ARTS, PARKS, HEALTH, AGING AND RIVER COMMITTEE on Monday Feb..24<sup>th</sup>, 2014.

ITEM NO. (1) 13-1204-S1City Attorney report and draft Ordinance in response to Motion (O'Farrell - Koretz -relative to the amendment of Sections 41.50 and 63.44 of the Los Angeles Municipal Code to revise the definition of smoking to include electronic smoking devices and to revise various provisions regarding the prohibition of smoking in certain places.

ITEM NO. (2) 13-1204-S2 Chief Legislative Analyst (CLA) to report in response to Motion (O'Farrell - Koretz) nstructing the CLA to review the policy proposal from the Los Angeles County Department of Public Health relative to e-cigarettes and to report to Council withany actions the City can take to support these recommendations.

# FEBRUARY 22<sup>ND</sup>, 2014

**The American Council on Science and Health** (ACSH), a public health education and consumer advocacy nonprofit devoted throughout our 35 year history to the promotion of sound science in

public health policy, urges the Los Angeles City Council *not* to regulate or restrict e-cigarettes as though these devices were the same, or similar in any substantive way, to real toxic tobacco cigarettes. They are not. The proposed mechanism for this regulatory revision — simply redefining "cigarettes" to include e-cigarettes, "tobacco" to include the components of e-cigarettes, and "smoke" to include vapor emitted by e-cigarettes, is incorrect, unscientific/baseless, will do serious harm to public health if enacted, and further: *will undermine the rule of law in numerous unintended, unpredictable and destructive ways, by the simple technique of changing the meaning of well-known, long-used common words to suit a transient political agenda.* 

Many smokers — millions in fact — have adopted e-cigarettes (ecigs) as a method of Tobacco Harm Reduction (THR) to help them quit smoking. There is no reason why "vaping," as using ecigs is called, pose a threat to anyone's health. Consigning ex-smokers to areas restricted to tobacco smokers will only encourage relapse, and there is no rationale based on science or health to do so.

The most important, devastating yet preventable public health problem in our nation is cigarette smoking. Many tactics to combat this addictive scourge have been tried over the decades, but while success came after the groundbreaking Surgeon General's report in 1964, progress in reducing the toll of smoking has essentially come to a halt over the past few years.

How bad is this problem? The W.H.O. predicts one billion lives cut short worldwide this century, if current trends continue. In America alone, the equivalent of two jumbo-jets full of American smokers crash each day, amounting to nearly a half million deaths each year.

While real cigarettes contain hundreds, or thousands of chemicals of which at least 40 are known carcinogens — which appear in their smoke when combustion occurs, ecigs contain only a few substances, none of which are thought to be toxic to anyone. They do contain nicotine, which is the only similarity to real cigarettes. The

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nicotine is the main factor in helping addicted smokers quit cigarettes and switch to ecigs.

Our own research on this subject<sup>1</sup> published in a peer-reviewed academic journal, as well as many other studies and epidemiological data, support our assertion that the methodologies comprising THR — the substitution of low-risk tobacco and nicotine-delivery products for lethal cigarettes — have significant potential benefits in terms of reducing the tragic toll of cigarette smoking by supplying addicted smokers with the substance they crave — nicotine — but at a much reduced cost in terms of adverse health effects.

While we are in full agreement that no form of tobacco use is entirely "safe," that nicotine is highly addictive, and that therefore all recreational tobacco use should be discouraged, it is still necessary to acknowledge the fact that there are 44 million addicted adult smokers in our nation — about 20% of the adult population. Further, while almost three-quarters wish to guit, and half of those do indeed attempt to guit each year, only one in ten (or fewer) succeed. Rarely, smokers guit without cessation aid --- cold turkey --- but the FDAapproved methods aimed at increasing guit rates (nicotine patches, Zyban, Chantix, etc.) have had an abysmal "success" rate around 15% or less at one year. Yet, these are the only methods accepted by our public health authorities, who in a perverse distortion of evidencebased public health policy, actively discourage consideration of newer, low-risk alternative cessation aids that have shown promise in helping addicted smokers guit. Perhaps the most significant of the facts that the "stick with the FDA-approved methods" adherents blithely ignore is that every year, over half a million Americans die of diseases caused by cigarette smoke, while 8 million others suffer smoking induced chronic diseases.

Those who support the concept of tobacco harm reduction, including ACSH, urge you to rely on the readily available scientific and empirical evidence to recommend policies promoting THR and e-cigarettes, which is this:

 The benefits from electronic cigarettes for Los Angeles' public health are supported by a growing mountain of scientific and empirical evidence, which over the past five years consistently indicates that e-cigarettes:

- are approximately 99% less hazardous than cigarettes

- are consumed almost exclusively (i.e. > 99%) by smokers and former smokers who quit by switching to e-cigs

- have helped several million smokers quit and/or sharply reduce cigarette consumption

 have contributed to the historic declines in sales of cigarettes over the past two years

The most important piece of supporting evidence for the use of ecigarettes to help smokers quit is this:

While many smokers, the public, and even many physicians, believe that nicotine is a toxic component of cigarette smoke, in fact the toxic chemicals reside amongst the thousands of other chemicals in the tar and the gas phase. The nicotine is the primary (but not the sole) addictive agent— *smokers smoke for the nicotine, but they die from the smoke.* 

Academic studies have indicated that levels of the contaminants that e-cigarette users are exposed to are far below any levels that would pose a health risk. And, the exhaled vapor poses no risk to bystanders. One such study was conducted by researchers led by Dr. Maciej L. Goniewicz<sup>2</sup> of the Roswell Park Cancer Institute in Buffalo, N.Y. This group conducted a comprehensive analysis of the vapor from a dozen brands of electronic cigarettes under a controlled setting. They found that while e-cigarette vapors contained some toxic substances, the levels of toxicants were nine to 450 times lower than cigarette smoke. The other study, conducted by Professor Igor Burstyn<sup>3</sup> of the School of Public Health of Drexel University's Department of Environmental and Occupational Health, reviewed 9,000 observations about the chemistry of the vapor and the liquid in e-cigarettes, and determined that the levels of contaminants ecigarette users are exposed to are insignificant, far below levels that would pose any health risk.

Furthermore, Professor Burstyn and colleagues concluded that there is no health risk to bystanders. This negates the need for legislation that would ban e-cigarettes in places where smoking is banned since this legislation is based on concern for potential risk to bystanders.

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Some who, for various reasons oppose the use of e-cigarettes to help smokers quit cite a recent CDC teen survey of tobacco use, generating the fear. The results, when interpreted correctly, show that the number of teens actually using e-cigarettes more than once a month is tiny.

The fear that experimentation with e-cigarettes among young people will be a gateway to tobacco cigarettes is in fact baseless, and is actually contradicted by the full CDC survey. According to CDC data<sup>4</sup> and a host of other studies conducted in the USA and Great Britain<sup>5, 6</sup>, cigarette use and overall tobacco use decreased between 2011 and 2012, as e-cigarette use increased. Moreover, a study conducted at the University of Oklahoma last year (<u>http://www.aacr.org/home/scientists/meetings--workshops/frontiers-in-cancer-prevention-research/program.aspx</u>) by Dr. T. Wagener showed that ecigs — rather than being a gateway to cigarette smoking — were actually a "gateway out": they were used by college-age smokers to quit their deadly cigarette habit, not vice versa.

If needless restrictions, bans, or taxation out-of-proportion to risk are enacted — presenting obstacles for desperate smokers trying to quit — electronic cigarettes will become black market items or sold by Big Tobacco companies, eager to snap up the currently vibrant small businesses in the e-cigarette stream of commerce.

E-cigarettes *should* be regulated: restrictions on sales and marketing, ingredient labels, good manufacturing practices, childproof packaging — all need to be mandated. But making e-cigs inaccessible to desperate smokers by needless or inappropriate restrictions will send smokers this message: Keep on smoking.

Banning indoor vaping will also be counterproductive and communicate the message that addicted smokers should keep on smoking. E-cigarette vapor is not smoke, there is actually no combustion, and relegating ex-smoking vapers out into the street with smokers is exactly the wrong way to help them remain smoke-free. While some opponents of e-cigarettes warn: "We just don't know what might happen with e-cigarettes," we at The American Council on Science and Health respond, "We surely do know what will happen with the real ones: almost a half-million dead American smokers, each year."

Thank you for your consideration.

Elizabeth M. Whelan, Sc.D., M.P.H., President, ACSH

Gilbert L. Ross, M.D., Medical Director, ACSH

## **References**:

- 1. <u>http://acsh.org/2012/02/helping-smokers-quit-the-science-behind-tobacco-harm-reduction/</u>
- 2. Goniewicz: <u>http://tobaccocontrol.bmj.com/content/early/2013/03/05/</u> tobaccocontrol-2012-050859.abstract
- 3. Burstyn: <u>http://publichealth.drexel.edu/~/media/Files/publichealth/m</u> <u>s08.pdf</u>
- Centers for Disease Control and Prevention, 2013, National Youth Tobacco Survey 2012<<u>http://www.cdc.gov/tobacco/data\_statistics/surveys/nyts/</u>>

(Accessed 17Jan2014).

- 5. Johnston LO PM, Bachman J, Schulenberg J, 2013, 18/Dec, *Teen Smoking Continues to Decline in 2013*, in Monitoring the Future <<u>http://www.monitoringthefuture.org/data/13data.html#2013data-</u> <u>cigs<http://www.monitoringthefuture.org/data/13data.html</u>
- 6. Mitka M. CDC: Use of emerging tobacco products increasing among US youths. JAMA 2014 8/Jan;311(2):124.

#### Links to ACSH's own publications on tobacco harm reduction and most recently, nicotine.

http://acsh.org/2012/02/helping-smokers-quit-the-science-behind-tobacco-harm-reduction/

http://acsh.org/2014/01/effects-nicotine-human-health/

# **Supporting Studies:**

The emerging phenomenon of electronic cigarettes.

Caponnetto P, Campagna D, Papale G, Russo C, Polosa R.

http://www.ncbi.nlm.nih.gov/pubmed/22283580

Tobacco, nicotine and harm reduction.

<u>Le Houezec J</u>, <u>McNeill A</u>, <u>Britton J</u>. <u>http://www.ncbi.nlm.nih.gov/pubmed/21375611</u> Contrasting snus and NRT as methods to quit smoking: an observational study

Janne Scheffels<u>1</u>, Karl E Lund, and Ann McNeill <u>http://www.harmreductionjournal.com/content/9/1/10</u>

## Recent op-ed's by ACSH's Dr. Gilbert Ross:

FORBES: <u>http://www.forbes.com/sites/realspin/2013/12/17/michael-bloombergs-attack-on-e-cigarettes-will-drive-ex-smokers-back-to-the-real-thing/</u>

The Parliament: <u>http://www.theparliament.com/latest-news/article/newsarticle/pm-blog-gilbert-ross-ecigarettes/#.UswzY2RDuYj</u>

Eureporter: http://www.eureporter.co/world/2013/12/04/opinion-eubureaucrats-plan-to-protect-cigarette-and-drug-markets-while-killingsmokers/

TheAmerican: <u>http://www.american.com/archive/2013/november/smo</u> king-kills-and-so-might-e-cigarette-regulation

NPR: http://acsh.org/2013/10/dr-gilbert-ross-on-npr-cleveland/

FORBES: <u>http://www.forbes.com/sites/realspin/2013/10/11/why-is-</u> the-fda-shielding-smokers-from-the-good-news-about-e-cigarettes/

Washington Examiner: http://washingtonexaminer.com/calling-thefdas-bluff-and-saving-smokers/article/2504143

American Spectator: <u>http://spectator.org/articles/34413/deadly-</u> <u>crusade-against-e-cigarettes</u>

FORBES: <u>http://www.forbes.com/sites/realspin/2013/01/10/the-eus-new-tobacco-directive-protecting-cigarette-markets-killing-smokers/</u>

"Can e-cigarettes help you give up smoking? "(Interviews of Mike Siegel and ACSH's Gil Ross by staff writer Lori Newman), *Lifescript Healthy Living for Women*, 2/3/2013

URL:<u>http://www.lifescript.com/health/centers/smoking\_cessation/articles/can\_ecigarettes\_help\_you\_give\_up\_smoking.aspx?p=1</u>