

Position statement on newer tobacco and nicotine products

In recent years, a large and increasingly diverse number of new consumer tobacco and nicotine products have emerged. Known collectively as 'newer products', these include e-cigarettes and heated tobacco products. There is ongoing scientific and policy debate about their potential role in tobacco control.

The Tobacco Control Research Group (TCRG) at the University of Bath is a centre for the study of commercial determinants of health. Our research focuses on the tobacco industry as a vector of the tobacco epidemic. Within TCRG individual researchers may hold a range of different views on the role of newer products in tobacco control; views which evolve as the science advances and which are in no way influenced or dictated by any of the funders of our work.

There is, nevertheless, a shared understanding that it is necessary to balance the role some newer products can play in supporting individuals to quit smoking with their potential impact on health at the population level – not least because corporate actors seek to maximise sales and profits from these products with no regard to public health.

To this end members of the group espouse a public health-based view of harm reduction, based on definitions originally used in the drug field, and a set of evidence-based positions on newer products as outlined below.

Definition of harm reduction:

Harm reduction involves reducing harm from addictive behaviours by reducing harm for the individual user AND for the community and society in which they live. In tobacco control, an intervention or product which might enable individual smokers to quit or reduce their harm, but which simultaneously increases population level harm, cannot be considered as harm reducing.

Evidence-based positions:

- Quitting smoking and newer product use entirely is the best option both for individual smokers and from a public health perspective.
- Nonetheless, certain smokers might not be in a position to quit nicotine products altogether. They should be encouraged to use less harmful alternatives and supported to prevent smoking relapse.
- There is a broad range of tobacco and nicotine products which vary in the harm they cause, from smoked tobacco such as cigarettes, which are the most harmful, to nicotine products, with pharmaceutical nicotine products having the strongest evidence base concerning their safety. The exact position of different newer products on this spectrum is currently difficult to determine given limitations in the available evidence and the rapid evolution of these products.
- Newer products that are genuinely less dangerous than smoking might result in benefit at a population level if they enable smokers to quit or act as complete substitutes for smoking (thereby increasing population quit rates), and/or reduce smoking uptake.
- However, even newer products that present lower risks for individual users than smoked tobacco can cause net harm at a population level if they lead to one or more of the following scenarios: if they (1) are taken up in large numbers by those who would not otherwise use

tobacco, (2) increase the risk of smoking among those who would not otherwise use tobacco, (3) do not facilitate quitting, and/or (4) lead to persistent dual use with tobacco products.

- The population impacts of newer products are currently uncertain and will vary by jurisdiction dependent on a number of factors including its stage of the tobacco epidemic, regulatory capacity, progress in implementing the WHO Framework Convention on Tobacco Control (WHO FCTC) measures, and ability to effectively enforce such measures and counter tobacco industry interference.
- To reduce deaths and disease from tobacco use at global level the priority remains the implementation of comprehensive, evidence-based, well-enforced population level policies outlined in the WHO FCTC.
- Overwhelming historic and current evidence, much of it from the tobacco industry's own documents, shows that the tobacco industry has never been genuinely interested in reducing smoking prevalence or population harm. Instead, it has repeatedly invested in and developed newer products to overcome the threat to its profits of falling cigarette sales. The industry has also manipulated and exploited debates over and definitions of harm reduction to secure policy advantage, push marketing and commercial solutions, and weaken the implementation of the WHO FCTC.
- The tobacco industry, and its front groups, should not be treated as legitimate partners in any discussions on tobacco control policies and approaches, including harm reduction, or in research on newer products.

TCRG will continue to work with diverse partners, independent of the tobacco industry, who may have differing opinions on the potential role for newer products. We will also continue to hold the tobacco industry to account as doing so is crucial in reducing both tobacco use and the industry's corrupting influence.