

## The European Association of Dental Public Health conference resolution on the control of e-cigarettes



### 1. Lead author

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### 2. Date and location of the conference resolution

12<sup>th</sup> June 2014. The 19<sup>th</sup> Scientific Congress, the European Association of Dental Public Health, Wallenberg Conference Centre, University of Gothenburg, Västra Götalandsregionen, Sweden.

A conference resolution calling for control on the availability of e-cigarettes was drafted at the 19th Scientific Congress of the European Association of Dental Public Health, Wallenberg Conference Centre, University of Gothenburg, Västra Götalandsregionen, Sweden. This resolution was subsequently ratified by the European Association of Dental Public Health Executive Council.

### Background

In the case of tobacco and replacement products, every approach should enable the achievement of reduced tobacco use and targets of ‘smoke-free’ and ‘tobacco-free’ within a generation. Tobacco, tobacco products and constituents, including nicotine and other substances contained in e-cigarettes, remain substances of addiction and potential harm. Products are not currently regulated, and so there are no standard or regulated quantities of ingredients in products. Regulation will be introduced over the next 2 years, covering product marketing, quality and use as a potential medicine.

There is little evidence about the quality, safety or effectiveness of e-cigarette use. Based on limited evidence e-cigarettes are likely to be less harmful than tobacco smoking. The effect of dual use of cigarettes and e-cigarettes is unknown. No level of continued tobacco use is safe, and there are no clear benefits from reduced consumption. The role of e-cigarettes in reducing but not completely replacing consumption of cigarettes is unclear. Use may prolong the habitual behaviour and detract from or delay quitting cigarettes altogether.

Although current studies show that most new users of e-cigarettes are seeking a means of cutting down tobacco use or quitting smoking altogether, marketing and widespread use of e-cigarettes risks undermining progressive measures aimed at a smoke-free and tobacco-free environment.

The rapid gain in popularity of e-cigarettes, advertising claims, and associated marketing make them attractive to young people and others who have never smoked and to former smokers.

The tobacco industry is increasingly investing in the e-cigarette market and most e-cigarette companies are owned by tobacco companies. Given the industry’s practices to recruit and maintain their core customers (i.e. tobacco smokers), and to undermine tobacco control efforts, it is plausible that they serve as a gateway device into or relapse into conventional cigarettes.



Smoking cessation is the best way to reduce tobacco-related illness and death. No usage of cigarette or tobacco products is safe, and abstinence from all nicotine products through abrupt quitting will provide the best health outcomes using a combination of pharmacotherapy and behavioural support.

E-cigarette use presents opportunities for health professionals to refer users into smoking cessation services and for services to help e-cigarette users to quit their tobacco use. Services can support current e-cigarette users to address and change their health behaviour towards quitting tobacco and e-cigarette use entirely, thereby minimising the risk of relapse to conventional cigarettes.

Restrictions on the use of e-cigarettes in public places should be consistent with restrictions on smoking (legislation and policies), recognising that such a measure must seek to support rather than undermine current smoking restrictions (both in terms of protection to the smoker and to those around them), and support the precautionary principle.

Restrictions on availability, use and marketing of e-cigarettes should be consistent with products that are of unknown or potential harm, especially to young people. There is currently no research or knowledge around the long term effects of inhaling e-cigarette vapour or of inhaling second hand vapour.

The place of e-cigarettes as a product range should be confined to help to cut down or quit tobacco use with a view to quitting tobacco and e-cigarette use entirely, in line with other nicotine replacement products.

EADPH will continue to monitor the situation and review and update this position statement as and when necessary.

*Conference resolution on electronic cigarettes and other unlicensed nicotine-containing products.*

*Delegates at the European Association of Dental Public Health 19<sup>th</sup> annual scientific congress note the uncertainties surrounding electronic cigarettes in their manufacture, safety, marketing, advertising, regulation and long term general health and oral health outcomes. This conference calls on national governments to regulate electronic cigarettes and other unlicensed nicotine-containing products in the same way as existing tobacco products. This is to support rather than undermine current tobacco restrictions to maintain and improve the oral health of their national populations, especially younger citizens.*

**The resolution can be found on the EADPH website; <http://www.eadph.org/>**

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