Position statement on electronic cigarettes

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This position statement was developed following a joint meeting of the above APPGs on electronic cigarettes on 10th June 2014.

Background to electronic cigarettes
1. Electronic cigarettes deliver nicotine in vapour form without the deadly tar or carbon monoxide inhaled from cigarettes.¹
2. Use of electronic cigarettes tripled between 2012 and 2014 and it is estimated that there are now over 2 million regular users in Britain.²
3. Very few people who have never smoked use electronic cigarettes.²
4. Around one third of current users have quit smoking entirely, while the other two thirds continue to smoke.²
5. There is growing evidence that the devices can help smokers quit.² ³
6. Most users start using disposable or rechargeable ‘cigalike’ products (1 and 2), but long-term users are more likely to use later generation products known as ‘vapourisers’ (3)².
7. A small, though growing, number of children have experimented with electronic cigarettes, but almost all of them are current or ex-smokers.²

Potential risks of electronic cigarettes
8. Advertising, promotion and sponsorship glamourising use of electronic cigarettes is growing, as tobacco companies take over electronic cigarette companies, raising concerns that this will encourage uptake amongst the young and be a gateway into smoking.⁴
9. While the vapour is a lot less harmful than smoke, it may sometimes contain toxic substances, and we don’t know what their long-term impact may be.¹

Potential benefits of electronic cigarettes
10. Electronic cigarettes provide a new route to quitting for smokers and even if used long-term any harm is negligible compared to smoking cigarettes.¹
11. 100,000 smokers a year die prematurely in Britain. If all smokers switched to electronic cigarettes then most if not all of these lives would be saved.¹

Regulatory framework
13. From 2016 there will be a twin track regulatory approach in the EU - products will either have to meet standards set under the EU Tobacco Products Directive, or be licensed as medicines. (See table overleaf for requirements under each regime).⁵
Recommendations

14. We would like to see the UK implement the regulatory framework in such a way as to maximise the benefits and minimise the risks.

<table>
<thead>
<tr>
<th>Maximise benefit</th>
<th>Minimise risk</th>
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<tr>
<td>Support quitting</td>
<td>Minimise uptake in youth</td>
</tr>
<tr>
<td>Encourage smokers to switch</td>
<td>Minimise uptake in never smokers</td>
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<tr>
<td>Discourage relapse to smoking</td>
<td>Improve product safety, quality and efficacy</td>
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15. The regulatory framework under the EU TPD and medicines licensing should be complementary and should:
   - Ensure easy access for smokers, while preventing access to the young;
   - Restrict targeting of marketing to adult smokers only;
   - Facilitate communication of accurate information for example on relative risks;
   - Encourage improvements in quality, safety and efficacy;
   - Support innovation; and
   - Enable the monitoring of the market and rapid responses where necessary.

16. Electronic cigarettes are relatively new and evolving; they have only been on sale in Britain since 2007. The evidence-base is still thin, and research funding is needed to monitor the rapidly evolving market to ensure that policy is based on the latest evidence.

Characteristics of regulation under MHRA and TPD

<table>
<thead>
<tr>
<th>Tobacco Products Directive regulation of electronic cigarettes</th>
<th>MHRA licenced Nicotine Containing Products (NCPs) including electronic cigarettes</th>
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<tbody>
<tr>
<td>Products not available on prescription</td>
<td>Products available on prescription</td>
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<tr>
<td>20% VAT</td>
<td>5% VAT</td>
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<tr>
<td>Cross border advertising banned by 2016, up to Member States to decide on domestic advertising (billboards, Point of Sale, buses etc.)</td>
<td>Advertising allowed - under OTC rules so no celebrity endorsement or free samples and must be targeted at adult smokers etc.</td>
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<tr>
<td>Products widely available</td>
<td>Products available on general sale (GSL)</td>
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<tr>
<td>Can’t make health claims</td>
<td>Can make health claims</td>
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<td>Upper limits for nicotine content will be set and likely to be in force by 2017.</td>
<td>MHRA regulation is flexible; there are no upper limits.</td>
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<tr>
<td>30% health warning on packs about nicotine on front and back of packs</td>
<td>No health warnings on packs</td>
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<tr>
<td>Member States retain powers e.g. on flavours, domestic advertising.</td>
<td>Flavours require a marketing authorisation</td>
</tr>
<tr>
<td>Children and Families Bill allows for age of sale of 18 for nicotine products.</td>
<td>Age of sale 12 but can be varied by product so could be higher for electronic cigarettes.</td>
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</table>

References

2 Use of electronic cigarettes in Great Britain: ASH Fact Sheet, April 2014
4 Bauld, L, Angus, K, De Andrade, M. E-cigarette uptake and marketing: A report commissioned by Public Health England
5 Department of Health position paper on electronic cigarettes Department of Health/JW/ECIGS100614