

Statement from Australian Council on Smoking and Health to the Select Committee on Personal Choice and Community Safety, Legislative Council, Parliament of Western Australia, 27 March 2019

Thank you for the opportunity to present to the Committee.

The Australian Council on Smoking and Health (ACOSH) is an independent, non-government, not for profit coalition of 39 prominent West Australian health, education, community, social service and research bodies with a shared concern about smoking and health.

ACOSH, established in 1971, works through advocacy and collaboration on comprehensive strategies to achieve a smoke free Australia by 2025, and reduce the more than 15,000 preventable deaths caused by smoking each year in Australia.

ACOSH has made a major contribution to the Australian tobacco control initiatives that have reduced the prevalence of smoking from 35% in the mid 70s to 12% today.

In our submission to this Select Committee, we have summarised the important role of Government as a steward to protect and promote the health and wellbeing of the community.

There are countless examples including clean water and sanitation, ensuring the safety of our citizens, dealing with pollution and environmental degradation, food safety, child protection, occupational health and safety, car safety and drink-driving laws that have resulted in reducing vehicle related morbidity and mortality to the same levels as in the 1930s despite huge increases in population and in vehicle ownership, and many more.

As noted in our submission, in relation to the specific term of reference on e-cigarettes and other so-called harm reduced products, we are concerned that the Chair of this Select Committee has a clear conflict of interest.

The Hon Aaron Stonehouse has recognised that his political party, the Liberal Democratic Party, accepts donations from tobacco company Philip Morris.

He has also commented that he would welcome further donations from Philip Morris, if they were offered.

Turning now to the claims being made by the tobacco industry and vaping advocates about so-called harm reducing products such as e-cigarettes and heated tobacco products.

First, they make claims about safety; second, that they assist smokers to give up smoking; and third, that they do not encourage children and young adults to take up smoking.

I will deal with each of these claims seriatim.

The tobacco industry and vaping enthusiasts rely heavily on a discredited claim by Public Health England that e-cigarettes are 95% safer than smoking.

This is based on a guesstimate by 12 individuals, some with links to e-cigarette manufacturers, and is not based on scientific evidence but personal opinions.²

The evidence in regard to the safety of e-cigarettes, and their effectiveness as an aid in smoking cessation, has been comprehensively reviewed by the following independent, scientific organisations:

- National Health and Medical Research Council (NHMRC)³
- The Therapeutic Goods Administration (TGA)⁴
- Australia's Commonwealth Scientific Industrial Research Organisation (CSIRO)⁵
- World Health Organization⁶
- US National Academies of Sciences, Engineering and Medicine (NASEM)⁷
- American College of Preventive Medicine⁸
- European Respiratory Society⁹
- American Academy of Paediatrics¹⁰

All of these organisations concluded there is insufficient evidence to recommend e-cigarettes as a safe and efficacious method to give up smoking. It is also important to note that we are now seeing increasing evidence of harms attributable to their use.

It is also important to emphasise that there is now also convincing evidence that the use of e-cigarettes by children and young people is an on-ramp for the use of traditional cigarettes.^{11,12,13,14,15,16}

In recent months, the US Surgeon General, Secretary for Health and Commissioner of the Food and Drug Administration have sounded an alarm about the "epidemic" of vaping there by adolescents.^{17,18}

The FDA Commissioner Dr Scott Gotlieb has said:

"The numbers are clear – we're experiencing epidemic level rises in youth e-cigarette use, which is threatening the progress we've made toward reducing youth tobacco use. These trends require forceful and sometimes unprecedented action among regulators, public health officials, manufacturers, retailers and others to address this troubling problem."

The US Surgeon General Dr Jerome Adams has said:

“I, Surgeon General of the United States Public Health Service ... am emphasizing the importance of protecting our children from a lifetime of nicotine addiction and associated health risks by immediately addressing the epidemic of youth e-cigarette use. The recent surge in e-cigarette use among youth, which has been fuelled by new types of e-cigarettes that have recently entered the market, is a cause for great concern. We must take action now to protect the health of our nation’s young people.”

In a country where e-cigarettes are freely available and promoted, the use of e-cigarettes by middle school students in the US increased by 48%, and in high school students by 78% comparing 2017 and 2018.¹⁹

Canada has also recently allowed the marketing of Juul e-cigarettes, and preliminary survey data suggests, for the first time in 30 years, the youth smoking rate has increased in Canada, with e-cigarettes being the likely cause.²⁰

According to Professor Dave Hammond, University of Waterloo, the Canadian teenage vaping rates have increased substantially, similar to the dramatic increase in the U.S.²⁰

Despite having stricter regulations, the latest Australian survey shows that in 2017, 48% of students aged 12 to 17 years-old who had used e-cigarettes (13% of the total sample had ever used e-cigarettes) reported they had never smoked a tobacco cigarette before.²¹

These findings are a great concern to ACOSH.

A growing cause for concern in discussions about any possible utility of e-cigarettes relates to the extent to which the potential benefits of making a possibly less harmful alternative to tobacco widely available to smokers might be outweighed by several potential risks.

Risks identified to date include uptake by non-smokers, gateway effects, dangers associated with dual use, depressed cessation and dual use, increasing evidence about harms from e-cigarette use, renormalising smoking, allowing the tobacco industry to influence decision-making in public health, and distraction from the evidence-based action needed to reduce smoking.²²

ACOSH, along with many of Australia’s leading health and medical organisations, supports the position adopted by all Australian governments through the Ministerial Drug and Alcohol Forum that:

“... the current evidence base in relation to e-cigarettes supports maintaining and, where appropriate, strengthening the current controls that apply to the marketing and use of these products in Australia.”

Noting also that, “Members agreed to national guiding principles which reflect a precautionary approach to e-cigarettes and affirmed the current national regulatory framework remains appropriate”.

If any producer wishes to market e-cigarettes or other products to support cessation or otherwise for purported therapeutic benefit, they should take them to the Therapeutic Goods Administration (TGA) with evidence of safety and efficacy. It is then for the TGA to examine the evidence and make the appropriate determination. Thus far, to our knowledge no companies have done this.

To continue the decline in the prevalence of smoking in Australia, we need support for, and not distraction from, the evidence-based action we know works – a comprehensive approach including taxation, renewed national mass media education campaigns, product regulation, strengthened legislation in states and territories as we have seen introduced recently in WA, expansion of smoke-free measures and coordinated support for cessation.

We table this statement for the Select Committee accompanied by crucial examples of e-cigarette marketing in the US and UK, and information regarding the use of e-cigarettes among teenagers in the US.

We have also provided an infographic that describes the latest data on smoking by Australian secondary school students, and a recent example of tobacco advertising by Philip Morris in Indonesia that graphically illustrates that their objective in that country is to sell as many traditional cigarettes as possible with a price of about \$1 Australian per pack.

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