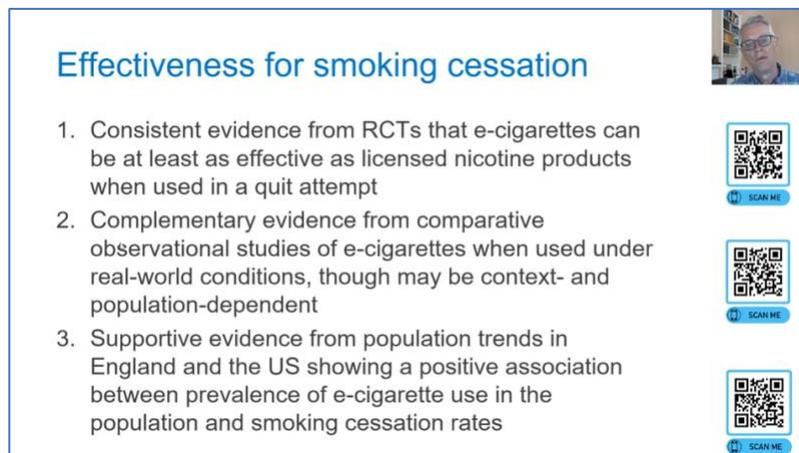


9. Ignores the harmful effects of a vaping flavour ban on adults

The Netherlands still has a real adult smoking problem. Adult smoking prevalence is 22.4% (3 million adults age 18 and over), peaking at 32% in the 18-24 young adult age group. Smoking rates are significantly higher among people with lower or middle levels of education than those with higher education.¹ In contrast, 3.1% of Dutch adults sometimes used e-cigarettes.² By contrast, in the United States, cigarette use in the 18-24 age group is 8%, and any combustible tobacco use is 11.2%, about one-third the level of the Netherlands. However, e-cigarette use in this age group is 9.3%.³ However, the government appears determined to discourage switching from smoking to vaping even though this is an effective strategy to reduce smoking.

The evidence strongly supports vaping as a pathway to quitting smoking. The evidence comes from multiple sources, each with its own strengths and weaknesses, but taken together make a strong case – and stronger than the conventional smoking cessation treatments. British smoking cessation expert, Professor Robert West, summarised the state of evidence in a 2019 presentation.⁴ The slide from Professor West’s presentation above summarises his view of the evidence, and a link to the full presentation is provided at the footnote.



Effectiveness for smoking cessation

1. Consistent evidence from RCTs that e-cigarettes can be at least as effective as licensed nicotine products when used in a quit attempt
2. Complementary evidence from comparative observational studies of e-cigarettes when used under real-world conditions, though may be context- and population-dependent
3. Supportive evidence from population trends in England and the US showing a positive association between prevalence of e-cigarette use in the population and smoking cessation rates

The slide includes a small portrait of Professor Robert West in the top right corner and three QR codes, each with a 'SCAN ME' button below it, corresponding to the three points.

The following provides an overview of studies that support the evidence framework articulated in Professor West’s presentation.

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- ¹ Netherlands Expertise Centre for Tobacco Control. Smoking in the Netherlands: key statistics for 2018, Trimbos-instituut, Utrecht, 2019 (English translation) [\[link\]](#)
 - ² Netherlands Expertise Centre for Tobacco Control. Elektronische sigaretten (e-sigaretten). Trimbos-instituut 2020 [\[link\]](#) Translation [\[link\]](#)
 - ³ Cornelius ME, Wang TW, Jamal A, Loretan CG, Neff LJ. Tobacco Product Use Among Adults — United States, 2019. *MMWR Morb Mortal Wkly Rep* [Internet] 2020 [cited 2021 Jan 22];69(46):1736–1742. [\[link\]](#)
 - ⁴ Robert West, Should health professionals recommend smokers to switch to e-cigarettes? A reprise of a keynote lecture at the Society for Research in Nicotine and Tobacco European conference in Oslo September 2019 Vimeo video [\[link\]](#)

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- *Randomised controlled trials.* Several recent trials show positive results.^{5 6} The most substantial clinical trial to date showed e-cigarettes with approximately twice the smoking cessation efficacy of NRT.⁷ There is an accumulating evidence base: the Cochrane Review now recognises evidence of efficacy, albeit somewhat qualified by the small number of studies.⁸
- *Observational data.* There is evidence that smokers who use e-cigarettes are more likely to quit smoking than those who do not.^{9 10}
- *Population trends.* There is evidence that as the prevalence of e-cigarette use increases in a population, smoking cessation activity also increases.^{11 12 13 14}
- *Modelling studies.* Modelling studies based on the experience so far show very substantial public health potential even when parameterised with sceptical assumptions.^{15 16}

The testimony of users really matters. Millions of former smokers will testify that e-cigarettes – especially in non-tobacco flavours – were important in assisting their efforts to stop. Collections of testimonials provide compelling evidence of smoking cessation success stories.¹⁷ Though this type of

⁵ Eisenberg MJ, Hébert-Losier A, Windle SB, et al. Effect of e-Cigarettes plus Counseling vs Counseling Alone on Smoking Cessation: A Randomized Clinical Trial. *JAMA - J Am Med Assoc* 2020;324(18):1844–1854. [\[link\]](#)

⁶ Pulvers K, Nollen NL, Rice M, et al. Effect of Pod e-Cigarettes vs Cigarettes on Carcinogen Exposure Among African American and Latinx Smokers: A Randomized Clinical Trial. *JAMA Netw open* [Internet] 2020 [cited 2021 Jan 18];3(11):e2026324. [\[link\]](#)

⁷ Hajek P, Phillips-Waller A, Przulj D, et al. A Randomized Trial of E-Cigarettes versus Nicotine-Replacement Therapy. *N Engl J Med* 2019;380(7):629–637. [\[link\]](#)

⁸ Hartmann-Boyce J, McRobbie H, Lindson N, et al. Electronic cigarettes for smoking cessation. *Cochrane database Syst Rev* 2020 10(10):CD010216. [\[link\]](#)

⁹ Jackson SE, Kotz D, West R, Brown J. Moderators of real-world effectiveness of smoking cessation aids: a population study. *Addiction* [Internet] 2019 [cited 2020 Dec 3];114(9):1627–1638. [\[link\]](#)

¹⁰ Kotz D, Brown J, West R. “Real-world” effectiveness of smoking cessation treatments: A population study. *Addiction* 2014;109(3):491–499. [\[link\]](#)

¹¹ Beard E, West R, Michie S, Brown J. Association of prevalence of electronic cigarette use with smoking cessation and cigarette consumption in England: a time–series analysis between 2006 and 2017. *Addiction* 2020;115(5):961–974. [\[link\]](#)

¹² Zhu S-H, Zhuang Y-L, Wong S, Cummins SE, Tedeschi GJ. E-cigarette use and associated changes in population smoking cessation: evidence from US current population surveys. *BMJ*. 2017;358:j3262. [\[link\]](#)

¹³ Levy DT, Yuan Z, Luo Y, Abrams DB. The relationship of e-cigarette use to cigarette quit attempts and cessation: Insights from a large, nationally representative U.S. Survey. *Nicotine Tob Res* 2018; [\[link\]](#)

¹⁴ Beard E, West R, Michie S, Brown J. Association between electronic cigarette use and changes in quit attempts, success of quit attempts, use of smoking cessation pharmacotherapy, and use of stop smoking services in England: time series analysis of population trends. *BMJ* [Internet] 2016 [cited 2020 Dec 3];354:i4645. [\[link\]](#)

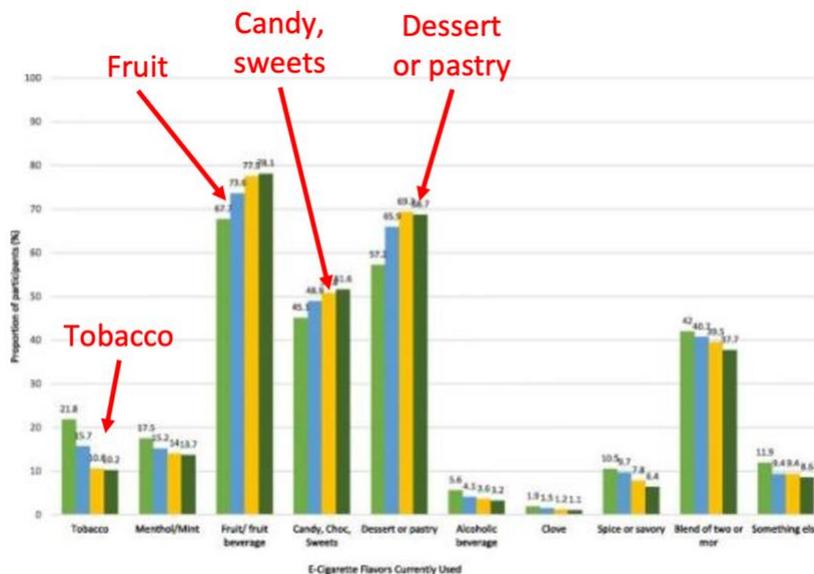
¹⁵ Levy DT, Borland R, Lindblom EN, et al. Potential deaths averted in USA by replacing cigarettes with e-cigarettes. *Tob Control* [Internet] 2018 [cited 2020 Dec 5];27(1):18–25. [\[link\]](#)

¹⁶ Mendez D, Warner KE. A Magic Bullet? The Potential Impact of E-Cigarettes on the Toll of Cigarette Smoking. *Nicotine Tob Res* 2020; [\[link\]](#)

¹⁷ For example, see CASSA (US) testimonials, [\[link\]](#)

evidence is often dismissed as ‘anecdote’, no-one trying to understand the impact of vaping on health would ignore user experience.¹⁸ A detective would not ignore witnesses’ testimony but include it in building a case drawing on multiple strands of evidence (forensic, phone records, identification, financial records, witnesses, etc.)

Strong evidence that flavours play an important role in adult smoking cessation. Further, it is clear that adults make extensive use of non-tobacco flavours, including fruit and candy, even though these may be considered childish, or even ‘kid-appealing’. One study found 68% of American adult e-cigarette users had used non-tobacco flavours in the past 30 days. Of these, 45% had used fruit, 44% menthol or mint, and 26 per cent candy, chocolate or other sweet flavour.¹⁹ Russell and colleagues conducted a large survey of US users:²⁰ The data show extensive and increasing use of non-tobacco flavours in the United States. See the chart showing high preferences for flavours among adults (authors’ annotations in red):



The adult behavioural and supply-side response to a flavour ban is difficult to predict. Still, the government did not attempt to estimate these effects in the justification for the flavour ban. There is some evidence suggesting that the availability of non-tobacco flavours helps some adult smokers transition completely away from smoking.²¹ In [Section 7 above](#), we set out a range of possible behavioural responses to a flavour ban, some of which increase harm. However, given that smoking is

¹⁸ See Carl V Phillips, Science lesson 3: Anecdotes ARE scientific data, Patreon, 14 April 2019 [\[link\]](#)

¹⁹ Bonhomme MG, Holder-Hayes E, Ambrose BK, Tworek C, Feirman SP, King BA, et al. Flavoured non-cigarette tobacco product use among US adults: 2013-2014. *Tob Control*. BMJ Publishing Group Ltd; 2016 Nov;25(Suppl 2):ii4-ii13. [\[link\]](#)

²⁰ Russell C, McKeganey N, Dickson T, Nides M. Changing patterns of first e-cigarette flavor used and current flavors used by 20,836 adult frequent e-cigarette users in the USA. *Harm Reduct J* [Internet] 2018 [cited 2018 Jul 17];15(1):33. [\[link\]](#)

²¹ Farsalinos KE, Romagna G, Tsiapras D, Kyrzopoulos S, Spyrou A, Voudris V. Impact of flavour variability on electronic cigarette use experience: an internet survey. *Int J Environ Res Public Health* 2013; 10: 7272–82. [\[link\]](#)

far more harmful than vaping, the impact of only a small uptick in smoking would overwhelm any conceivable benefits from reductions in vaping.

Dutch vapers are trying to use vaping for harm reduction, but the government seems determined to obstruct them. In 2018, the Supplementary module of the Lifestyle Monitor asked about the user motives of Dutch e-cigarette users (multiple answers were possible):²²

- 44.2% wanted to quit smoking tobacco cigarettes.
- 29.3% wanted to smoke fewer tobacco cigarettes.
- 21.3% cited the lower cost of e-cigarettes as a motive.
- 16.6% cited convenience, no ashes or less fire hazard.
- 14.4% said they liked e-cigarettes better than regular tobacco products

All of these are good reasons to use e-cigarettes. The government should not be putting itself in the way by obstructing the uptake and continuation of vaping as an alternative to smoking.

There is economic evidence that e-cigarettes function as an *alternative* to cigarettes, not as a complement. Economic data suggest that when policies are used to make e-cigarettes less attractive, then smoking increases. For example, studies of the effects of e-cigarette tax increases suggest tax increases cause e-cigarette consumption to fall and cigarette consumption to rise for adults²³

We find that higher e-cigarette tax rates increase traditional cigarette use and reduce e-cigarette use. Cross-tax effects imply that the products are economic substitutes.

Though a flavour ban is not the same as a tax increase, both have the effect of making e-cigarettes less attractive to the user—both taxes and a flavour ban risk triggering a substitution effect, causing an increase in cigarette use. Policy analysis in this field suggests that the welfare costs of activating such substitution pathways via misguided policies could be high.²⁴

It is beyond reasonable doubt that e-cigarettes effectively help people stop smoking, and the reason is obvious. As well as all the evidence discussed above, there is also a case grounded in common sense. Vaping replaces more of the experience of smoking (effective delivery of nicotine in a similar way to smoking, throat sensation, flavour, hand-to-mouth movement, behavioural ritual and cultural or identity aspects) – but at a much lower risk to health. The underlying public health model is different from conventional smoking cessation treatments. With nicotine replacement therapy or prescription

²² Trimbos Institute in collaboration with CBS and RIVM. LSM-A Resources / Lifestyle Monitor. 2018. Cited at reference 17 in Netherlands Expertise Centre for Tobacco Control. Elektronische sigaretten (e-sigaretten). Trimbos-instituut 2020 [\[link\]](#)

²³ Pesko MF, Courtemanche CJ, Maclean JC. The effects of traditional cigarette and e-cigarette tax rates on adult tobacco product use. *J Risk Uncertain* 2020;60(3):229–258. [\[link\]](#)

²⁴ Kenkel DS, Peng S, Pesko MF, Wang H. Mostly harmless regulation? Electronic cigarettes, public policy, and consumer welfare. *Health Econ* [Internet] 2020 [cited 2021 Jan 23];29(11):1364–1377. [\[link\]](#)

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medications like Varenicline or Bupropion, the aim is to manage withdrawal and craving on the pathway from smoking to abstinence. In contrast, vaping is a rival consumer proposition available to smokers, for those who want it, replacing one pleasure with another