Fontem Ventures' Response to the Call for Evidence of the Northern Irish Committee for Health, Social Services and Public Safety on the Regulation of sale of nicotine products and tobacco



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Call for Evidence on the regulation of sale of nicotine products and tobacco

Response: Fontem Ventures

Introduction

Fontem Ventures is dedicated to developing and growing a portfolio of innovative products including electronic cigarettes (e-cigarettes). A 100% subsidiary of Imperial Tobacco Group (ITG), we nevertheless operate at arm's length from our parent company and are focusing on non-tobacco opportunities only. Fontem Ventures is the manufacturer of market leading UK e-cigarette brand *blu*.

As a market leading manufacturer, Fontem Ventures steers the industry in protecting consumer safety by setting exemplary standards in manufacturing quality and responsibility. Moreover, we support sound, evidence-based, proportionate regulation of e-cigarettes. The protection of children and young people is an important part of our stance on responsibility, and we fully support the current UK rules on e-cigarette advertising and marketing which limits the extent to which e-cigarette advertising can target or appeal to an under-18 audience. These rules constitute an exemplary set of regulations that, while promoting a responsible approach among manufacturers, nevertheless take into account the general consensus among the public health community that e-cigarette advertising rules enable manufacturers to compete, by raising awareness and understanding via consumer information activities, with established tobacco products to which they provide an alternative.

Here, the word "alternative" is key: There are clear and substantial differences between e-cigarettes and tobacco products. E-cigarettes do not contain tobacco, do not burn, and do not smoulder unlike tobacco products (see <u>here</u> for the ASH briefing on electronic cigarettes dated June 2014). Fontem Ventures believes a regulatory approach aimed at preventing uptake by under 18s while encouraging tobacco smokers to shift to e-cigarettes as a smoking-cessation tool and a means of reducing the number of tobacco-related illnesses in Northern Ireland is needed. It is inappropriate to conflate e-cigarettes with tobacco products by incorporating them into tobacco-specific legislation.

It is essential that legislation takes into account the significant emerging evidence of the potential for ecigarettes to provide public health benefits by acting as a gateway *from* smoking. This is exemplified by the recent report by Public Health England (see <u>here</u>) which noted that the current best estimate is that ecigarettes are around 95% less harmful than smoking and that there is no evidence so far that e-cigarettes are acting as a route into smoking for children or non-smokers. Professor Ann McNeill, of King's College London and independent author of the review, underlined that "[t]here is no evidence that e-cigarettes are undermining England's falling smoking rates. Instead the evidence consistently finds that e-cigarettes are another tool for stopping smoking and in my view smokers should try vaping and vapers should stop smoking entirely [...] E-cigarettes could be a game changer in public health in particular by reducing the enormous health inequalities caused by smoking."

Studies funded by Cancer Research UK found that people attempting to quit smoking who used e-cigarettes were approximately 60% more likely to succeed than those who used willpower alone or overthe-counter nicotine replacement therapies. The same report noted that e-cigarettes could "substantially improve public health because of their widespread appeal and the huge health gains associated with stopping smoking" (see <u>here</u> for the report). Meanwhile, in April 2014 the charity ASH published a report noting that "[e]lectronic cigarettes are proving more attractive to smokers than NRT while providing them with a safer alternative to cigarettes", adding that "[t]here is evidence that they can be effective in helping smokers' quit and little evidence that they are being used by never smokers" (see <u>here</u> for the ASH report),



while the Lancet published a report which predicted that EVPs "have far greater reach and higher acceptability [...] among smokers than NRT" (see <u>here</u> for the Lancet report).

Experts from University College London have even estimated that for every million smokers who give up tobacco products in favour of e-cigarettes, more than 6,000 premature deaths could be prevented annually (see articles from September 2014 in the <u>Times</u> and the <u>Guardian</u>).

We would point the Northern Irish authorities currently considering e-cigarettes and other vaping products to the open letter to the WHO published in May 2014 (see <u>here</u> for the full letter). It was signed by more than fifty health and tobacco specialists, who recommended that the following principles should underpin the public health approach to tobacco harm reduction with regards to e-cigarettes:

- 1. Tobacco harm reduction is part of the solution, not part of the problem.
- Tobacco harm reduction policies should be evidence-based and proportionate to risk, and give due weight to the significant reductions in risk that are achieved when a smoker switches to a low risk nicotine product.
- 3. On a precautionary basis, regulators should avoid support for measures that could have the perverse effect of prolonging cigarette consumption (since policies that are excessively restrictive or burdensome on lower risk products can have the unintended consequence of protecting cigarettes from competition from less hazardous alternatives).
- 4. Targets and indicators for reduction of tobacco consumption should be aligned with the ultimate goal of reducing disease and premature death, not nicotine use per se, and therefore focus primarily on reducing smoking.
- 5. Tobacco harm reduction is strongly consistent with good public health policy and practice and it would be unethical and harmful to inhibit the option to switch to tobacco harm reduction products.
- 6. It is counterproductive to ban the advertising of electronic cigarettes and other low risk alternatives to smoking.
- 7. It is inappropriate to apply legislation designed to protect bystanders or workers from tobacco smoke to vapour products.
- 8. The tax regime for nicotine products should reflect risk and be organised to create incentives for users to switch from smoking to low risk harm reduction products.
- 9. WHO and national governments should take a dispassionate view of scientific arguments, and not accept or promote flawed media or activist misinterpretations of data.
- 10. WHO and parties to the FCTC need credible objective scientific and policy assessments with an international perspective.

They summarise their approach as follows: *"The potential for tobacco harm reduction products to reduce the burden of smoking related disease is very large, and these products could be among the most significant health innovations of the 21st century - perhaps saving millions of lives."*

We would welcome such an approach being applied. As legislators in Northern Ireland and beyond consider the consumption of e-cigarettes, it is thus vital that they weigh up the medical consensus concerning the products, as well as the unintended consequences of prohibiting, limiting or "denormalising" their use.



Response

PART 1: SALE OF NICOTINE PRODUCTS AND TOBACCO

1. Prohibition of sale of nicotine products to persons under 18

Fontem Ventures supports legislation which restricts the access and consumption of nicotine products by anyone under the age of 18, and to make it an offence to proxy purchase nicotine-containing products. Fontem Ventures also supports the introduction of a requirement for retailers of e-cigarettes to have an age verification policy in place to prevent anyone under the age of 18 accessing nicotine-containing products.

That said, there are clear and substantial differences between nicotine-containing products such as e-cigarettes and tobacco products. E-cigarettes do not contain tobacco, do not burn, and do not smoulder unlike tobacco products. For this reason, Fontem Ventures does not agree that e-cigarette legislation should take the form of extended tobacco legislation. Fontem Ventures believes the Northern Irish authorities should embody a regulatory approach aimed at preventing uptake of e-cigarettes by under 18s while encouraging tobacco smokers to shift to e-cigarettes as a smoking-cessation tool and a means of reducing the number of tobacco-related illnesses.

2. Prohibition of sale of nicotine products from vending machines

Fontem Ventures does not agree with the prohibition of sale of e-cigarettes from vending machines. Fontem Ventures believes that by placing vending machines in over 18 establishments or limiting access to vending machines through interaction with staff first, the age of vending machine users can be controlled. Allowing access to e-cigarettes in over 18 establishments helps encourage a switch from traditional tobacco products to e-cigarettes, which have been found to be 95% safer than conventional tobacco products by Public Health England (see here).

Provided that effective age verification can be guaranteed, we generally believe e-cigarettes should be accessible as possible in order to encourage smokers to switch as much and often as possible. Fontem is not alone in this conclusion. In an open letter to the WHO, more than fifty health and tobacco specialists (here) stated that "it would be unethical and harmful to inhibit the option to switch to tobacco harm reduction products". Therefore, an outright ban on e-cigarette sales via vending machines would not be proportionate to the goal of restricting sales to under 18s. Instead, a clear requirement to have effective age verification tools in place will be fit for purpose.

If you like to discuss our comments in more detail please contact:

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