



On 27 November 2010, the CPME Board adopted the “CPME Position on Nicotine delivery products including electronic systems (ENDS)” (CPME 2010/104 Final EN)

CPME Position on Nicotine delivery products including electronic systems ENDS

Background

Tobacco remains the single most lethal human product and the largest single avoidable cause of premature death and disability worldwide. Strong regulation of tobacco and nicotine products followed by meaningful surveillance of their manufacture, packaging, marketing, labeling and distribution is essential to establish comprehensive tobacco control strategies. Therefore, the CPME is highly concerned about the recent trends in smokeless tobacco and nicotine products, some of which fall into dangerous regulatory gaps.

There is particular concern about electronic nicotine delivery systems (ENDS) which are designed to deliver nicotine directly to the respiratory system, without combustion and thus smoke, and are marketed under a variety of names, including electronic or e-cigarettes, green cig and smartsmoker. Manufacturers have not fully disclosed the chemicals contained in ENDS and their toxicology and addictive effects (which are highly probable) have not been studied. Independent scientific research should be conducted to address these concerns and define their dependence potential and psychological consequences. ENDS are marketed internationally on the Internet and by direct consumer marketing in some countries. They are sometimes sold as a smoking cessation aid that delivers "safer" nicotine at lower levels compared to cigarettes, and sometimes as recreational nicotine products providing smokers with nicotine in settings where smoking is prohibited.

As these products are not regulated, there are no age restrictions, while the addition of flavours such as strawberry reveals the manufacturers' intention to target young people.

Smokeless products pose a significant challenge to regulation as in many countries they fall into a regulatory gap. On the one hand, they escape regulation as drugs since they are *not* Nicotine Replacement Therapy (NRT) products and on the other hand, they avoid the controls levied on other tobacco products as well as the bans on smoke free environments.

The CPME is conscious that many forms of smokeless tobacco exist, which differ considerably in their composition, addictive and carcinogenic potential, toxicity and therefore carry very different degrees of risks. As they do for other consumer products, regulatory authorities should lower the allowed concentration levels of carcinogens present in all smokeless tobacco products available on the market.

CPME Statement

The CPME strongly supports the conclusions and recommendations of the WHO Report on the scientific basis of tobacco product regulation, published in 2009¹. **Proper regulation should apply to ENDS and other forms of smokeless tobacco or nicotine products; when such regulation is not possible, they should be subjected, under tobacco control laws, to regulation of contents and labeling, prohibitions against public use and restrictions on advertising, promotion and sponsorship.** They should be clearly differentiated from NRT products and claims imputing health benefits, reduced harm or use in smoking cessation should therefore be prohibited until (if ever) they are scientifically proven. CPME urges regulators to act rapidly and apply age restrictions to these products.

Moreover, **the CPME advocates that the use of ENDS is banned in public places** by the same smoke free regulations which restrict the places in which smoking is allowed. The reason is twofold: first, there is no evidence that the use of ENDS will not expose non-users to toxic emissions. Second, if smokers start using ENDS in public places where smoking is prohibited, their nicotine dependence will clearly be sustained and this will make it even more difficult for them to quit.

In the long term, the CPME advocates that all tobacco and nicotine delivery products are classified as dangerous drugs and controlled accordingly². Sufficient counseling and treatment, including pharmacotherapy, should be available to help consumers succeed at quitting.

¹ Report on the scientific basis of tobacco product regulation: Third report of the WHO study group on tobacco product regulation, WHO technical report series 955, 2009.

² See CPME Position paper [CPME 2009/016 FINAL](#) on Legal control of tobacco products.