E-Cigarette Messages: Exploring Messages on E-cigarettes Aimed at Women and Youth

Presented by:
The Association of State and Territorial Health Officials (ASTHO)

January 29th, 2015
2:00-3:30pm ET
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- Submit questions through the Chat Box
  - Questions will be addressed after all speakers have presented
Webinar Agenda

• Welcome and Introductions
  • Ellen Pliska, Association of State and Territorial Health Officials
  • Diana Karczmarczyk, Association of State and Territorial Health Officials

• Overview of E-Cigarettes and the importance of addressing MCH perspective
  • Desmond Jenson, Tobacco Control Legal Consortium

• State Example
  • Laura Oliven, Minnesota Department of Health
  • Parker Smith, Minnesota Department of Health

• National Organization Example
  • Dr. Jonathan Klein, American Academy of Pediatrics

• Resources from ASTHO, NACCHO, AMCHP & Children’s Safety Network

• Question/Answer

• Conclusion
Regulating E-Cigarettes to Improve Maternal & Child Health

Desmond Jenson, J.D.
January 29, 2015

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Tobacco Control Legal Consortium

A national legal network supporting tobacco control policy change.
Early e-cigarettes closely resembled combustible cigarettes.

What is an E-Cigarette?
What is an E-Cigarette?

The “Cig-a-like”

- Disposable
- Rechargeable
What is an E-Cigarette?
What is an E-Cigarette?

The “Tank System”
What is an E-Cigarette?

Liquid Nicotine
What is an E-Cigarette?

The “Vape Pen” or “E-Hookah”
Potential Harms

1. Unknown long-term health effects
2. Appealing to kids & gateway to cigarettes
3. Unproven cessation claims
4. Unregulated manufacturing
   - Safety of product and nicotine solutions
   - Lack of manufacturing standards & quality control
Who is regulating e-cigarettes?
FDA Regulation

Currently

Regulated by FDA
- Cigarettes
- Cigarette Tobacco
- Roll-Your-Own Tobacco
- Smokeless Tobacco

Not Regulated by FDA
- Dissolvables
- Little/Small Cigars
- Hookah/Shisha
- E-Cigarettes
FDA Regulation

Future

Regulated by FDA

Cigarettes
Roll-Your-Own Tobacco
Cigarette Tobacco
Smokeless Tobacco
Dissolvables
Hookah/Shisha
E-Cigarettes
Little/Small Cigars
# FDA Regulation

<table>
<thead>
<tr>
<th>Provision</th>
<th>Cigarettes</th>
<th>Smokeless Tobacco</th>
<th>E-Cigarettes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum age of 18 for purchase and age verification under 27</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Prohibition on vending machine sales</td>
<td>Allowed in adults-only facilities</td>
<td>Allowed in adults-only facilities</td>
<td>Allowed in adults-only facilities</td>
</tr>
<tr>
<td>Prohibition on sampling</td>
<td>✔️</td>
<td>Allowed in adults-only facilities</td>
<td>✔️</td>
</tr>
<tr>
<td>Mandatory warning labels on packages and advertisements</td>
<td>9 Rotating warnings</td>
<td>4 Rotating warnings</td>
<td>1 Static warning</td>
</tr>
</tbody>
</table>
Federal Warning Labels

Cigarettes
WARNING: Cigarettes are addictive.
WARNING: Tobacco smoke can harm your children.
WARNING: Cigarettes cause fatal lung disease.
WARNING: Cigarettes cause cancer.
WARNING: Cigarettes cause strokes and heart disease.
WARNING: Smoking during pregnancy can harm your baby.
WARNING: Smoking can kill you.
WARNING: Tobacco smoke causes fatal lung disease in nonsmokers.
WARNING: Quitting smoking now greatly reduces serious risks to your health.

Smokeless Tobacco
WARNING: This product can cause mouth cancer.
WARNING: This product can cause gum disease and tooth loss.
WARNING: This product is not a safe alternative to cigarettes.
WARNING: Smokeless tobacco is addictive.
Federal Warning Labels

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WARNING: This product can cause mouth cancer.
WARNING: This product can cause gum disease and tooth loss.
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WARNING: Smokeless tobacco is addictive.

E-Cigarettes
WARNING: This product contains nicotine derived from tobacco. Nicotine is an addictive chemical.
## FDA Regulation

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<td>Prohibition on self-service displays</td>
<td>Allowed in adults-only facilities</td>
<td>Allowed in adults-only facilities</td>
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<tr>
<td>Minimum package size requirements</td>
<td>✔</td>
<td></td>
<td></td>
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<tr>
<td>Prohibition on breaking packages by retailers (e.g., sales of loosies)</td>
<td>✔</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Prohibition on characterizing flavors</td>
<td></td>
<td>Menthol and tobacco allowed</td>
<td></td>
</tr>
<tr>
<td>Prohibition on brand names on non-tobacco products and brand name sponsorship of sporting and cultural events</td>
<td>✔</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Required notice of advertising in any non-traditional medium</td>
<td>✔</td>
<td>✗</td>
<td></td>
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FDA Regulation

FDA Will:
• Require minimum age of purchase
• Restrict sampling and vending
• Require product & manufacturer reporting
• Regulate of modified risk claims
• Regulate new products

FDA Will not:
• Restrict use
• Restrict advertising
• Prohibit flavors
• Prohibit internet sales
• Require child-resistant packaging
• Levy taxes

FDA Regulation is still years away
FDA Regulation

Do Not Wait for the FDA!
State and Local Action

What can state and local governments do?
State and Local Action

FDA Will:
- Require minimum age of purchase
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State and Local Action

State and Local Governments **Can**:  
- Require minimum age of purchase  
- Restrict sampling and vending  
- Require product & manufacturer reporting*  
- Regulate of modified risk claims  
- Regulate new products

State and Local Governments **Can**:  
- Restrict use  
- Restrict advertising  
- Prohibit flavors  
- Prohibit internet sales*  
- Require child-resistant packaging  
- Levy taxes

*Depending on the type of policy
# State and Local Action

**State and Local Governments Can:**

- Require minimum age of purchase
- Restrict sampling and vending
- Require product & manufacturer reporting*
- Regulate modified risk claims
- Regulate new products

**State and Local Governments Can:**

- Restrict use
- Restrict advertising
- Prohibit flavors
- Prohibit internet sales*
- Require child-resistant packaging
- Levy taxes

*Depending on the type of policy
Child-Resistant Packaging
Child-Resistant Packaging
Child-Resistant Packaging
Child-Resistant Packaging
Child-Resistant Packaging

Passed and implemented:
• Minnesota
• Vermont
• Illinois
• Davis County, UT

Proposed:
• New York
• Indiana
• Mississippi
• Ohio
• Virginia
• U.S. Senate

. . . so far
Child-Resistant Packaging

Considerations

- Disposables?
- Rechargeables?
- Liquid Nicotine?

- Who determines whether a product is child-resistant?
Flavored-Product Restrictions
State and Local Governments Can:

- Require minimum age of purchase
- Restrict sampling and vending
- Require product & manufacturer reporting*
- Restrict use
- Restrict advertising
- Prohibit flavors
- Prohibit internet sales*
- Require child-resistant packaging
- Levy taxes

*Depending on the type of policy
Free Legal Technical Assistance

Resources for:

- Tobacco Control
- Healthy Eating
- Active Living
- and more

www.PublicHealthLawCenter.org
PREVENTING YOUTH TOBACCO USE

E-cigarette messaging and the 2014 Minnesota Youth Tobacco Survey

Laura Oliven, MPP
Alcohol and Tobacco Prevention and Control
Office of Statewide Health Improvement Initiatives, in coordination with the MDH Maternal and Child Health Section
Overview

- Minnesota’s landscape
- 2014 Minnesota Youth Tobacco Survey
- Communications goals
- Key messages
- Rollout and response
Minnesota’s Landscape

- 2007 Minnesota Clean Indoor Air Act
- 2013 Tobacco Tax Increase
- 2014 Law Changes for E-cigarettes

- Prohibit public use in some schools, hospitals, government buildings and universities
- Prohibit sales to minors
- Require license to sell e-cigarettes
- Require behind the counter sales
- Require child-resistant packaging
E-cigarette and Tobacco Poisonings

• In 2013: 74 e-cigarette poisonings overall, with 50 reports involving kids and teens
Child-Resistant Packaging Law

- Went into effect January 1, 2015
- Authority to regulate at the city and county level
- Minnesota Statute 461.20
- 2014 Legislative Spotlight: Electronic Cigarettes, E-Liquids, and Child-Resistant Packaging (PHLC)
2014 MYTS

About the survey

Important public health monitoring tool

Collects in-depth data on MN youth tobacco every three years

2014 survey revealed major successes, concerning trends and a changing landscape of youth tobacco use
2014 MYTS

Success: dramatic drop in youth cigarette use

Percent of high school students who smoked cigarettes in past 30 days: 2000-2014
2014 MYTS

Success: dramatic drop in any youth tobacco use

Percent of students who used any conventional tobacco product in past 30 days: 2000-2014

- **High school**
  - 2000: 38.7%
  - 2002: 34.4%
  - 2005: 29.3%
  - 2008: 27.0%
  - 2011: 25.8%
  - 2014: 19.3%

- **Middle school**
  - 2000: 12.6%
  - 2002: 11.2%
  - 2005: 9.5%
  - 2008: 6.9%
  - 2011: 5.6%
  - 2014: 3.6%
2014 MYTS Findings

Concern: rise in youth e-cigarette use

Percent of students who have ever tried an e-cigarette

- Middle school: 7.7%
- High school: 28.4%
2014 MYTS Findings

Concern: rise in youth e-cigarette use

**Percent of students who used an e-cigarette at least once in past 30 days**

- **Middle school:** 3.1%
- **High school:** 12.9%
2014 MYTS Findings

Concern: rise in youth e-cigarette advertising exposure

Percent of high school students seeing e-cigarette ads in various media in past 30 days: 2014
2014 MYTS Findings

Concern: youth use of flavored and other tobacco products
Changing Landscape of Youth Tobacco Use

As youth move away from cigarettes, they are also trying new, often flavored products.
Strategic Communications

Developing our goals: inform, alert, educate, reinforce
Key Messages

New Data
- Cigarette smoking among students decreased sharply

Concerning Trend
- E-cigarette use is rising quickly
- Many students dual users
- 25% of those ever trying e-cigarettes, had never used a conventional tobacco product
Key Messages

E-cigarette use puts our youth at risk.

No amount of nicotine is safe for youth.

Nicotine is addictive and harmful to the developing adolescent brain.

Many e-cigarettes contain nicotine, but none are regulated by the FDA.

E-cigarette use may be especially harmful if they lead to the ongoing use of nicotine or other tobacco products.
Key Messages

E-cigarettes and Advertising
Minnesota youth reported high exposure to e-cigarette advertising and promotion.
Key Messages

Proven strategies for reducing youth use work.

Underscoring the importance of prohibiting public e-cigarette use

Preserving the social norms for our youth

Protecting our youth, children and families from unknown health risks
Rollout and Response

Toolkit assembled

- Talking Points
- Executive Summary
- Data Highlights
- Infographic
- E-cigarette Factsheet
- Q & A
Cigarette Use Decreases Sharply | E-Cigarette Use Increases Dramatically

Students who have used an e-cigarette in the past 30 days

In 2012, an estimated 2.8% of high school students nationally used an e-cigarette in the past 30 days.

Minnesota's 2014 results far surpass this national data.

2011: 18.1%
2014: 10.6%

Nicotine in all forms is harmful to the developing adolescent brain.

**Proven strategies to decrease tobacco use**
- Increase the price of tobacco
- Increase compliance and enforcement
- Restrict indoor use of tobacco
- Limit youth access to products that appeal to youth

**FAST FACTS**

28.4% of high school students have tried e-cigarettes

According to the CDC, three of every four teen smokers becomes an adult smoker.

Minnesota Department of Health
2014 Minnesota Youth Tobacco Survey
www.health.mn.gov/myts
Rollout and Response

Heads-up call, press conference featuring youth
Rollout and Response

Extensive media coverage

"Cigarette use drops among teens, but e-cigarettes prove tempting“
Minnesota Public Radio

"Are Winona kids smoking less, or just differently?“
Winona Daily News

"Steep drop in teen smoking; more of them trying e-cigs"
MinnPost
CONTACT INFORMATION

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E-cigarettes and Electronic Nicotine Delivery Systems – A Clinical Perspective

Jonathan D. Klein, MD, MPH, FAAP
Associate Executive Director, American Academy of Pediatrics
Director, Julius B. Richmond Center of Excellence
Why should pediatricians and other physicians care about e-cigs?

They look cool and appeal to adolescents and young adults.
Why should pediatricians and other physicians care about e-cigs?

They come in kid-friendly flavors.
Why should pediatricians and other physicians care about e-cigs?

They are marketed to adolescents and young adults.
What is the prevalence of use?

- National Youth Tobacco Survey data: An estimated 1.78 million students reported having used e-cigarettes in 2012.
  - Electronic cigarette use 2011-2012 increased significantly among middle school (0.6% to 1.1%) and high school (1.5% to 2.8%) students, and hookah use increased among high school students (4.1% to 5.4%)
  - What about e-hookah???
    - Some 20.3% of middle-school students (aged 11—14 years) and 7.2% of high-school students (aged 14—18 years) who had ever tried e-cigarettes reported that they had never smoked conventional cigarettes
- Among adults in 2011, 6.2% of all adults and 21.2% of current smokers had tried e-cigarettes

*MMWR*, 2013
King, et al, 2013
What are the health effects?

• Relative to smoked tobacco, may be less
  – No tar and variable levels of nicotine to allow “step down”? 

• Relative to NO tobacco or medical NRT
  – Concerns about decreased lung function, retarded lung growth and development, and increased behavioral issues
  – Quality control – adulterated products have been found

• Results in new nicotine addiction among nicotine naïve or former smokers

• Safety of flavors and chemosensory agents when heated and inhaled is unknown – some have proven toxicity

• May impact combusted tobacco use among those who have quit completely
What are the public health effects?

• Second-hand vapor is NOT just water vapor
  – Emit variable levels of nicotine (1/10th that of cigarettes), plus fine particles of similar size to that of cigarettes, and comparable concentration of fine particles
  – Emit low levels of other toxins: formaldehyde, acetaldehyde, metals

• Re-normalizing the image of smoking
  – Allowed in places where smoking is not allowed
  – Advertising is completely unrestricted, with TV ads for the first time since 1971
  – Largely indistinguishable from cigarettes

Czogala et al, *Nicotine and Tobacco Research* 2013
Fuoco et al, *Environmental Pollution* 2014
“E-juice” poisonings

- Constituents of “e—juice”
  - Nicotine
  - Propylene glycol
  - Vegetable glycerin
  - Flavorings and chemosensory agents
  - Wax/hashish
  - Wax/cannabis
  - Oils
  - Whole tobacco, Herbs, Marijuana

- For all: unknown long-term health impacts from repeated inhalation
Poison Control Calls

FIGURE. Number of calls to poison centers for cigarette or e-cigarette exposures, by month — United States, September 2010–February 2014

- Cigarettes
- E-cigarettes

No. of calls


American Academy of Pediatrics
Julius B. Richmond Center of Excellence
Clinical practice implications

• Pediatricians and other physicians need to ask the right questions about tobacco use and secondhand smoke exposure, INCLUDING e-cigarette and other electronic nicotine delivery device use and exposure to secondhand “vapor”

• Until we know more about “eanything” and cessation, we should recommend FDA-approved NRT, quitlines, and other evidence-based interventions for smokers who want to stop smoking or nicotine addiction

• Electronic cigarette should not be used around non-smokers, by pregnant women, or in the presence of children
Other policy implications

• FDA should move quickly to regulate all e-cigarettes and electronic nicotine delivery systems

• Research is imperative to assess secondhand vapor effects (of all kinds), addiction potential and dual-use maintenance

• Child-proof packaging is critical to child safety

• E-cigarettes and other electronic nicotine delivery system use should be included in smoke-free air laws
Emerging and Alternative Products

Tobacco comes in many different forms, especially when it comes to nicotine. The use of alternative forms involves finding alternative methods to use nicotine. The use of alternative forms involves finding alternative methods to use nicotine. The use of alternative forms involves finding alternative methods to use nicotine.

- Chewing tobacco is referred to as spit or chew, chewing tobacco is a form of moistened tobacco leaves, or a cut form of tobacco is pressed together, wrapped in a tobacco leaf, and smoked. Chewing tobacco plunders the oral mucosa and the pharynx.
- Cigarillos are cigar-shaped products with tobacco and another substance containing tobacco that is sustained. Cigarillos are similar to cigars, but they are not as popular.
- The FDA is not satisfied with the current tobacco products.
- Electronic tobacco products are also known in the form of "e-cigarettes." These are rechargeable devices that provide nicotine in a form that is similar to cigarettes. The FDA is not satisfied with the current tobacco products.
- E-cigarettes are also known as electronic nicotine delivery systems. These systems are battery-powered and provide nicotine through a puff of air. They are especially popular among young people.

www.richmondcenter.org
Questions?

Emily H., 2013
Issue Brief: Smoking Cessation Strategies for Women Before, During, and After Pregnancy: Recommendations for State and Territorial Health Agencies

- Role of state and territorial health agencies
- Recommendations
- Resources
- State examples
ASTHO Tobacco Resources

ASTHO Tobacco Webpage:
http://www.astho.org/Prevention/Tobacco/E-Cigarettes/
  • Webinar recordings
  • State resources about e-cigarettes – including our recently released issue brief on e-cigs

ASTHO E-Cigarette Webpage:
http://www.astho.org/Programs/Prevention/Tobacco/E-Cigarettes/State-Research-and-Resources/
  • Spreadsheet of resources that have been compiled and organized by ASTHO
• ASTHO Healthy Babies Clearinghouse: http://www.astho.org/healthybabies/

• State Case Studies: http://www.astho.org/Programs/Access/Maternal-and-Child-Health/MCH-Case-Studies-and-Resources/

• State strategies to improve birth outcomes (including smoking cessation): http://www.astho.org/t/AllStrategies.aspx?id=7027
NCSL Tobacco Resources

NACCHO Tobacco Resources

http://www.naccho.org/topics/HPDP/tobacco/Index.cfm
AMCHP Resources

http://www.amchp.org/programsandtopics/BestPractices/InnovationStation
Blog Post- The Spike in E-cigarette Poisonings:
http://www.childrenssafetynetwork.org/blog/spike-e-cigarette-poisonings

Webinar- Preventing E-Cigarette Poisoning among Children and Youth:
If you would like to ask a question, please type it into the chat box on your screen.
Thank you for joining us!

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